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

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

State and federal law establishes the right of any individual:

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

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

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

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

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

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

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

100.4 - RECORD RETENTION - The Code of Virginia §42.1-76 places authority to issue regulations concerning retention and destruction of records with the Library of Virginia (LVA). The LVA General Schedule No. 15 governs records maintained by local social service agencies, including client case records. LVA General Schedule No. 02 governs locality fiscal records including purchase orders. While many records can be destroyed three years after case **closure** there are exceptions to that general rule. These exceptions include situations involving audits, investigations, court cases, and fraud or overpayments related to supportive services and emergency assistance among others.

Each local agency must designate a Records Officer who will be in charge of seeing that LVA regulations for record retention and destruction are followed. See http://lva.virginia.gov/agencies/records/retention.asp for information about establishing a Records Officer and for access to the specific schedules for record retention and disposition. The Library encourages agencies to contact the Records Analysis Services section at 804-692-3600 with questions about records management**.**

100.5 - VIRGINIA DEPARTMENT OF SOCIAL SERVICES STRENGTHENING FAMILIES INITIATIVE (SFI) PRACTICE MODEL - The Virginia Department of Social Services Practice Model sets forth standards of professional practice and serves as a values framework to define relationships, guide thinking and decision-making, and structure beliefs about individuals, families, and communities. The Practice Model suggests a desired approach to working with and delivering services to Virginia's citizens.

The tenets of the Practice Model are:

1. **All children, adults and communities deserve to be safe and stable.**
2. **All individuals deserve a safe, stable and healthy family that supports them through their lifespan.**
3. **Self-sufficiency and personal accountability are essential for individual and family well-being.**
4. **All individuals know themselves best and should be treated with dignity and respect.**
5. **When partnering with others to support individual and family success, we use an integrated service approach.**
6. **How we do our work has a direct impact on the well-being of the individuals, families, and communities we serve.**

Benefit programs are designed to provide income support benefits to assist families who are unable to provide the necessities of life and maintain minimum standards of health and well-being through their own efforts. Gathering relevant information about a family's situation and assessing that information against the eligibility for benefit programs are the basis for making the eligibility determinations. This process also includes an assessment of need for service programs and other resources to assist the family, which includes

following the Practice Model described above. If other needs exist, the eligibility worker must refer the family for appropriate services or resources within the agency or community.

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

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

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

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

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

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

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

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

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

D. Definition Of A Person With A Disability - The Americans with Disabilities Act of 1990 as amended protects individuals with a "disability" and defines that term to mean a person who has a physical or mental impairment that substantially limits one or more of the major life activities of that individual, a person who has a record of such an impairment, or a person who is being regarded as having such an impairment. "Life activities" include, but are not limited to: the operation of a major bodily function, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. Chronic health problems such as asthma, diabetes, and hypertension may also be considered disabilities if these conditions limit the individual's ability to function.

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

Individuals who believe they have been discriminated against on the basis of disability (including failure to provide reasonable accommodations), race, national origin (including the failure to provide access to services to people with limited English proficiency) can also file a complaint with the Office of Civil Rights at the U.S. Department of Health and Human Services. Complaints must be filed within 180 days after the 101.1 discrimination occurred. The complaint should include the same information listed in Part A above. To file a complaint, write to:

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

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

The case record must include a copy of the form "Do You Have a Disability?" along with a description of any reasonable modifications that agency staff have determined are needed to address the person's disability and services and supports the agency will provide to assist the individual and family.

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

procedures to ensure that the person with a disability receives full and meaningful access to TANF programs and services.

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

H. Examples Of Accommodations

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

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

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

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

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

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

2. The date and nature of the treatment received.

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

4. Any other pertinent facts related to the complaint.

5. The date the complaint is made.

6. The signature of the person making the complaint.

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

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

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

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

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

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

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

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

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

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

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

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

A. During the TANF application and VIEW assessment the agency must ensure and document that a clear and full explanation is given to the applicant/ recipient of the eligibility requirements for the type of assistance and services being requested or received; of his responsibility to give complete and accurate information related to his eligibility and to report promptly and fully any changes in his circumstances; and of the provisions of the law with respect to knowingly giving false information or deliberately withholding information which would affect his eligibility for assistance or the amount thereof. The worker must explain fully to the recipient what types of changes in his circumstances would have an effect on the grant and services provided. At TANF application, the agency must explain IPV to the applicant/recipient and explain the Notice of Intentional Program Violations **and** Penalties **(Form 032-02-0646**). A copy is to be given to the applicant/recipient and a copy is filed in the eligibility record. The assistance unit must report all required changes within 10 calendar days from the date the unit knows of the change but is reported timely if reported by the tenth of the following month.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

F. Cases in which an IPV is alleged will be referred for prosecution in accordance with the agreement established between the local Commonwealth's Attorney or other legal authority and the local

agency. This agreement shall include information on how and under what circumstances cases will be accepted for possible prosecution. Additionally, it will contain any other criteria set by the prosecutor for accepting cases for prosecution, such as a minimum for the overpayment which resulted from the IPV. The local agency will refer for prosecution all individuals meeting the criteria established by the Agreement.

102.3 IPV DISQUALIFICATION PENALTIES - An individual found to have committed an IPV by a court of appropriate jurisdiction, or pursuant to an administrative disqualification hearing (ADH), or by waiving his right to an administrative disqualification hearing is subject to IPV penalty periods of six months for the first offense, twelve months for the second offense, or permanently for the third offense. Notice of the disqualification penalties for IPV is included in the Application for Benefits (032-03-824), the Statement of Facts, **and the Notice of Intentional Program Violations and Penalties (032-03-0646).**

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

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

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

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

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

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

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

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

In order to request an ADH, the local agency shall ensure that a pre-hearing investigation has occurred and that the evidence supports the charge of

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

intentional program violation. There must be clear and convincing evidence which demonstrates the individual committed or intended to commit a TANF, or VIEW IPV. Examples of evidence include but are not limited to:

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

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

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

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

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

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

G. Verification that items were obtained under false pretenses. Example: obtaining supportive services to purchase a vehicle in order to participate in VIEW and then giving the vehicle to another person.

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

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

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

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

is compelling evidence of intent to violate the requirements, then it will not be appropriate to accept a waiver of hearing from the individual and the request for a hearing must be forwarded to the State Hearing authority.

If a signed waiver is received, an ADH is not scheduled and the disqualification period is imposed in accordance with Section 102.3.

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

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

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

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

If the ADH and fair hearing are combined, the agency must follow ADH time frames for conducting an ADH. If the hearings are combined for the purpose of settling the amount of the claim at the same time as determining whether or not the IPV has occurred, the household will lose its right to a subsequent fair hearing on the amount of the claim. However, the local agency must, at the household's request, allow the household to waive the 30 day advance notice period for the scheduling of the ADH when the hearings are combined.

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

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

The advance notice of ADH may be sent by first class mail, certified mail – return receipt requested, or by any other reliable method. If the notice is sent by first class mail and it is subsequently returned as undeliverable, the hearing may still be held.

Once the ADH has been scheduled, the ADH is to be conducted and a decision made within 90 days of the date the household is notified in writing that the ADH has been scheduled. A copy of the decision must be provided to the household and the local agency.

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

102.10 FAILURE OF INDIVIDUAL TO APPEAR AT THE ADH - **Unless the agency has received proof that the ADH advance notice has not been received, the requirement to notify the individual alleged to have committed the IPV has been met. The ADH may be held even if the member or representative subsequently cannot be located or fails to appear without good cause.**

The individual has 10 days from the date of the scheduled ADH to present reasons other than nonreceipt of the notice to show good cause for failure to appear at the hearing. Good cause reasons based on nonreceipt of the notice must presented within 30 days of the scheduled hearing.

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

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

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

A. Attendance at the ADH

The ADH is attended by persons directly concerned with the issue. This normally means a representative of the local agency and the individual alleged to have committed the IPV. **If space is limited, the hearing officer has the right to limit the number of persons in attendance.**

B. Responsibilities and Duties of the Hearing Officer

The hearing officer shall:

1. Identify those present for the record.

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

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

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

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

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

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

C. Rights of Individual

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

1. Examine all documents and records to be used at the ADH at a reasonable time prior to the ADH as well as during the ADH. The contents of the case file, including the application form and documents of verification used by the local agency to establish the alleged IPV, shall be made available **provided that confidential information, such as the names of individuals who have disclosed information about the household without its knowledge, or the nature and status of pending criminal prosecutions, is protected from release.**

   If requested by the household or its representative, the local agency shall provide a free copy of the portions of the case file that are relevant to the hearing. Confidential information that is protected from release, and other documents or records which the household will not otherwise have an opportunity to contest or challenge, shall not be introduced at the hearing or affect the hearing officer's decision.

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

3. Bring witnesses.

4. Establish all pertinent facts and circumstances.

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

6. Advance arguments without any undue influence.

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

The individual may refuse to answer questions during the hearing.

D. Responsibilities and Duties of Local Agency

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

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

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

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

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

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

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

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

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

If the individual is found not guilty of committing an IPV, no disqualification is imposed and any overpayment is handled as a nonfraud recovery. If a VIEW participant is found not guilty of committing an IPV for VIEW supportive or transitional services, no overpayment is considered to exist.

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

103.2- CONFIDENTIALITY

Federal law requires that client information be kept confidential. The local department may not release information about the client without the client's written consent except for purposes directly connected with the administration of public assistance programs, or by court order, except as outlined at 103.3, 103.4, 103.5, and 103.6.

A. Legal Basis for Confidentiality

1. Federal Privacy Act

Information from all federal agencies must be kept confidential. Local departments may not release information to any outside source, except as required for purposes of program administration.

2. Virginia Statutes and Regulations

The legal basis for this guidance includes state laws relating to privacy protection (Code of Virginia § 2.2-3803), data collection and dissemination (Code of Virginia § 2.2-3800), access to public assistance records (Code of Virginia § 63.2-102), access to health records (Code of Virginia 32.1-127.1:03), and regulations promulgated by the State Board of Social Services.

B. Release of Information

1. Release of Information Not Requiring Additional Written Permission

Based on the client's signature on the Request for Assistance or the Application for Benefits, information related to the TANF case, including information related to VIEW, may be given out or obtained in order to carry out the administration of the program without additional written permission from the client.

2. Release of Information Requiring Additional Written Permission

Except as provided for in 103.2B(1) above, the client must give additional written permission before case information is released to or obtained from an outside agency other than an agency of federal, state, or local government. The Confidentiality Form (032-01-0040) or the Consent to Exchange Information form (032-01-0005), also known as the Authorization to Use and Exchange Information form, should be used to secure written permission.

C. Client Access to Records

Clients, or their representative, may read information about themselves contained in their own case records except for medical or mental health reports when the physician who wrote the report recommends against it. **Other individuals who are or were part of the assistance unit can also read information about themselves contained in the TANF case record under**

the same terms and conditions. In the case of an individual who was on the TANF case as a dependent child, access to the record will be available only after the individual reaches age 18.

The agency shall not release the name or other identifying information about an individual who has made a complaint alleging child abuse/neglect, fraud, participation in illegal activities, or other questionable behaviors on the part of the client.

The local agency is advised to seek guidance from the agency's legal counsel if there are questions about the propriety of releasing specific information, or if the agency has reason to be concerned that the safety of a client or former client might be threatened by the release of such information.

D. Penalty for the Unauthorized Release of Confidential Information

The disclosure, directly or indirectly, of confidential information contained in a case record by any officer, agency or employee of the local department shall be considered a Class 1 misdemeanor.

E. Ownership of Records

All client information contained in the local department's records is the property of the local department. Employees of the local department shall protect and preserve such information from dissemination except as necessary for the administration of the case.

Original client records may be removed from the premises only by auditors, individuals monitoring case records, other authorized staff of the state or the local department, or by court order.

The local department may destroy records pursuant to record retention schedules referenced at 100.4.

F. Correcting Inaccurate information

Local departments must provide means for inaccurate information to be corrected.

103.3 – DISCLOSURE OF INFORMATION FROM THE INCOME ELIGIBILITY VERIFICATION SYSTEM (IEVS)

Retention requirements and requirements regarding disclosure of information regarding all match reports received through the Income Eligibility Verification System (IEVS), including Internal Revenue Service (IRS) data, can be found in the IEVS User Guide.

103.4 - EXCHANGE OF INFORMATION WITH LAW ENFORCEMENT AGENCIES –

A. The agency must provide the address of a current or former recipient when requested to do so by a Federal, State, or local law enforcement officer who furnishes the name of the recipient *:

***** **45 CFR 205.50(a)(1)(v)**

1. who is fleeing to avoid prosecution, or custody, or confinement for a felony, or who is in violation of a condition of Federal, State or local probation or parole; or

2. who has information that is necessary for the officer in the conduct of official duties; and

3. when locating or apprehending the recipient is within the officer's official duties.

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

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

2. a written request for the address. The form "Request for the Address of a TANF Recipient" (032-03-560) located in the forms drawer may be used for this purpose.

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

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

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

* Public Law 104-193, Section 404

104.1 PURPOSE AND SCOPE OF APPEAL PROCESS - The Temporary Assistance for Needy Families State Plan and the Code of Virginia, Sections 63.2-517 - 63.2-519, as amended, provide the opportunity for a "fair hearing" to individuals affected by the administration of the public assistance programs.

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

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

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

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

104.3 PRELIMINARY DEFINITIONS -

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

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

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

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

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

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

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

105.1 NOTIFICATION OF RIGHT TO APPEAL -

A. Every applicant for and recipient of assistance shall be informed in writing, at the time of application and at the time of any action, proposed or taken, affecting his claim, of the circumstances under which he has a right to a fair hearing of the method by which he may obtain a hearing, and of the right to be represented by others or to represent himself.* At the time assistance is first requested, the worker will provide the applicant with information about the assistance program(s) for which he is applying and fair hearing procedures. For recipients, this is accomplished when the recipient receives a written notice at the time of any action, proposed or taken, affecting his claim.

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

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

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

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

105.2 FAIR HEARINGS

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

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

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

2. Provisions Regarding Continuation of Assistance –**If a hearing request is received prior to the effective date of any proposed reduction in benefits or discontinuance of benefits, assistance will be continued in the original amount without interruption until a hearing decision is rendered, unless the client requests in writing that benefits not be continued**. If the client does not want benefits to continue in the original amount she must submit in writing **to the local agency or the Appeals Office,** a statement indicating her desire to refuse such assistance.

Once the Appeals and Fair Hearings Office receives an appeal request, a Local Agency Validation Form is sent to the local agency. This begins the validation process. The local agency completes the bottom portion of the form indicating whether or not the appeal was filed within 30 days of the mailing date of the Notice of Action. Appeals filed within this time frame are considered valid. (The 30 day period ends on the 31st day following the date of the agency's Notice of Action.) The agency also completes the section on the form indicating whether or not the appeal was filed within the applicable time frame for continuation of benefits. (The agency also indicates on the form if action has been taken to continue benefits). The local agency does not have to wait for the validation form to continue benefits. Once the form is received the local agency has five days to send it back to the Appeals Office. If the worker receives the request for an appeal timely, she must continue the benefits.

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

If continuation of assistance in the original amount is declined by the recipient in writing and the hearing decision is in the recipient's favor, the agency will correct the underpayment(s). If the decision of the hearing officer is in favor of the agency and the client did not continue to receive benefits no action will be taken. If the client did continue to receive benefits during the appeal process benefits are subject to recovery by the agency. (Refer to 106.1 E).

The agency is not required to provide additional notice before taking action based on the appeal decision. See 401.4F. The difference between the original amount continued during the appeal and the correct benefit as supported by the hearing decision is an overpayment and must be recouped. The method of collection is that prescribed for recoupment and recovery of overpayments set forth at Section 503.8. Exception: TANF assistance granted during the appeal of a VIEW sanction for a client who has not yet received 24th months of assistance is not considered an overpayment when the hearing decision is adverse to the recipient. The unsuccessful appeal simply delays the imposition of the VIEW sanction and the consequent loss of benefits to the household. Any benefits issued beyond the 24th month are an overpayment and must be recouped.

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

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

a. If the proposed action is to terminate or suspend assistance, the **benefits** must be available for same day issuance in the event an appeal is filed.

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

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

105.3 REQUEST PROCEDURES –

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

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

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

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

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

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

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

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

* 22 VAC 40-295-110

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

105.4 TIME LIMITS FOR REQUESTING HEARING –

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

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

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

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

* 45 CFR 205.10(a)(5)

106.1 PROCESSING OF APPEAL -

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

B. The local agency shall prepare an Appeal Summary of Facts (032-03-0444-00) in the case to be forwarded to the hearing officer no fewer than 7 days prior to the hearing. A general outline of this summary follows, although the content may vary to fit the particular case situation. All statements made should be factual and phrased in a way not objectionable to claimant.

The Appeal Summary of Facts includes the following:

1. Identifying Information

   Name of local agency
   Name, address, and case number of claimant
   Persons included in the assistance unit - Name, birth date, relationship to claimant
   Other persons in the household - names, relationship to claimant

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

3. Statement of Agency Action

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

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

   c. If the amount of assistance is in question, give a detailed breakdown of the claimant's financial circumstances as shown in ADAPT and on the Statement of Facts with whatever explanation may be necessary.

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

4. State whether assistance is continuing during the appeal process in the amount authorized immediately prior to the adverse action.

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

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

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

If other evidence pertinent to the hearing IS received by the local agency or there are changes in the situation following transmittal of the Summary, copies of the new evidence and a written statement of the changes shall be mailed in advance of the hearing to the hearing officer, the claimant and the claimant's representative, if any. if the agency mails (i.e., postmarks) any other such evidence within fewer than seven (7) calendar days before the scheduled hearing, the hearing officer shall reschedule the hearing upon request.

E. During the period from the filing of an appeal to receipt of decision by the State Hearing Authority, the local agency continues to be administratively responsible for the case on appeal. This responsibility includes appropriate adjustment in eligibility status or payment necessitated by change in claimant's situation, his income, change in composition of assistance unit, or change for any other reason.

In the case where assistance is being continued during the appeal process, however, assistance must not be reduced below the amount being received at the time of receipt of advance notice of proposed action. Exception: If a change in circumstances occurs during the appeal process, advance notice is sent. If the claimant fails to appeal such proposed additional change, assistance may be adjusted with respect to this change in circumstances.* Any such change shall be reported to the hearing officer for consideration of possible effect on the decision.

106.2 FAIR HEARING PROCEDURES -

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

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

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

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

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

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

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

D. Specific Hearing Procedures

1. Identification of those present for the record.

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

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

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

*45 CFR 205.10(a)(2)

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

c. bring witnesses;

d. establish pertinent facts and advance arguments;

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

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

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

5. Evidence admissible at the hearing shall be limited to data having a bearing on the issue(s) on appeal. Such issues include those given by claimant at the time of his appeal and those given by the local agency as a basis for its action or inaction under appeal. The hearing officer determines whether an issue other than the one being appealed may be introduced, but no additional issues are admissible without concurrence of the claimant and the local agency.

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

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

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

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

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

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

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

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

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

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

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

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

106.3 DECISION ON APPEAL -

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

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

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

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

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

If the decision of the hearing officer upholds the agency’s action and results in a decrease in the TANF benefit, that decrease must be reflected in the month following the decision, or as soon as administratively possible. Since the assistance unit was notified of the agency’s intention to decrease benefits at the time of the original action, no additional notice is needed when the decision of the hearing officer is implemented.

E. The decision of the hearing officer shall be rendered within 60 days following the date the appeal is received by the local agency or the State Department of Social Services. An exception to this is when the hearing officer grants the claimant or his/her representative an extension, or otherwise occasions a delay, not to exceed 30 days. This constitutes prompt and definitive administrative action and, for these purposes, the

date of decision of the hearing officer is considered in relation to meeting the time requirement, and is unaffected by any subsequent request for review by claimant, his representative, or local agency to the Commissioner of Social Services.

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

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

106.4 REVIEW OF HEARING OFFICER'S DECISION – APPEALS REVIEW PANEL

The Commissioner has established an Appeals Review Panel to review administrative hearing decisions upon request of either the claimant or the local agency. The purpose of the panel is to make recommendations to the Commissioner regarding whether changes are needed to **guidance** or in the conduct of future hearings.

The Appeals Review Panel cannot change the decision of the Hearing Officer. It may only make recommendations to the Commissioner about future changes in **guidance** or procedures.

A request for review by the Appeals Review Panel by either party must be submitted in writing and postmarked within 10 days following the date of the hearing officer’s written decision. A request for review from a local agency must be submitted by the director or by his/her designee whose name is on file with the Hearings Manager.

Submit requests for review by the Appeals Review Panel to:

Commissioner
Virginia Department of Social Services
801 E. Main Street
Richmond, VA 23219-2901

106.5 DISPOSITION OF APPEALS OTHER THAN BY HEARING DECISION -

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

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

B. An appeal may be abandoned by the claimant. An appeal is considered abandoned if neither the claimant nor his representative appears at the time and place scheduled for the hearing without good cause. When **the** claimant or his representative fails to appear, the hearing officer will **issue a 10-day show cause letter to the** claimant giving him an opportunity to explain why he did not appear**.** If there was a reasonable basis for the failure to appear, the hearing officer will arrange another bearing date.

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

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

106.6 AVAILABILITY OF HEARING DECISIONS -

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

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201.1 ELIGIBILITY FACTORS

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

1. Is under the age of 18 years* or if 18 but not yet 19 is enrolled and attending a secondary school or vocational/technical school of secondary equivalency, and is expected to complete the high school or vocational/technical program prior to or in the month he attains age 19. **(201.2)**

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

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

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

5. The family is in need of financial assistance.* (**302.3**)

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

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

1. Provide a social security number or proof of application for an SSN. **(201.1, 201.8)**

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

3. Provide, or have provided on his behalf, a written declaration of citizenship or alien status.**** The declaration requirement is met for all members of the assistance unit when the applicant/recipient age 18 or older completes and signs the "Application for Benefits" or the "Eligibility Review, Part A" form, as applicable, or signs the ADAPT Statement of Facts.(201.7)

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

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

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

C. The parent or caretaker/relative shall be eligible for TANF unless one of the exceptions specified in 302.7.D. or E. is applicable. Eligibility of the caretaker/relative may exist even though:

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

2. The only eligible child in the home receives an adoption assistance payment. Even though the child who receives an adoption assistance payment may not be eligible to have his needs included in the TANF grant amount, he is deemed eligible for TANF for purposes of qualifying the caretaker-relative for TANF.*** (Refer to **302.7.C.4**.)

3. The only eligible child in the home receives a federal, state, or local foster care maintenance payment. Even though the child who receives a foster care maintenance payment is not eligible to have his needs included in the TANF grant amount, he is deemed eligible for TANF for the purpose of qualifying a non-parent caretaker, but not a parent, for TANF. **(Refer to 302.7.C.5)** (**See** 201.5.B. regarding ineligibility of the natural parent or other caretaker-relative to receive TANF for this child in his prior home.)

* Code of Virginia, Section 63.2-606
** Code of Virginia, Section 63.2-602
*** ACF, Region III, IM 93-6

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

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

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

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

   c. Verification that the child is exempt.

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

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

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

   For cases that are transferred, the receiving agency must ensure that the recipient has been notified of the immunization

* 45 Code of Virginia, 63.2-603

requirement. If no notification has occurred, the eligibility worker must advise the recipient of the immunization requirement. The receiving agency shall not impose an immunization penalty unless the transferring locality initiated the penalty or the receiving locality's redetermination occurs at least six months after notification of the requirement.

4. VERIFICATION - Workers should attempt to use the **Virginia Immunization Information System (VIIS) to verify childhood immunizations whenever possible. When the VIIS verification has returned no results, or when the client disagrees with the VIIS results, then workers should use the** Childhood Immunization Certification form (032-03-0960) to verify receipt of immunizations. Physicians or medical personnel should complete this form indicating that the child is age appropriately immunized, medically exempt, or in the process of being brought up to date.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

b. Notifying applicants and recipients of the immunization requirements.

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

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

G. SIXTY (60) MONTH LIMIT ON RECEIPT OF TANF - An assistance unit that includes an adult who has received 60 months of assistance under TANF as defined below, is not eligible for assistance.* "An assistance unit that includes an adult" means an assistance unit where the adult's needs are included in the grant or a case where the adult's needs are not included in the grant but the adult is required to participate in VIEW.(See 901.2.) (Note: At the time the adult on the case has received 60 months of TANF assistance, all members of the assistance unit, including minor caretakers included on the case as children (PC), become ineligible. A former minor caretaker who subsequently applies for TANF for herself and her child when she becomes 18 will be the parent on the new case [PR] and the case will be subject to a new 60-month clock.) The 60 months of TANF eligibility is an accumulated period of time. The 60-month clock will reflect each month for which a TANF payment is issued, **even if it is a partial payment.** For example, if TANF benefits are issued in November for both October and November, both October and November will appear on the clock.

Effective March, 2008, the 60-month time limit applies to the following individuals whose needs are included in the TANF grant: an adult caretaker on a case, the spouse of the caretaker, a minor caretaker with her own case, and the spouse of the minor caretaker. Both parents in a TANF-UP case**, including minor parents,** will have a 60- month clock regardless of marital status. **(Note: Prior to March, 2008, the 60-month clock was not based on months of TANF receipt in Virginia. Instead, only VIEW months, including months in a VIEW sanction, and months of TANF received in another state, were counted on the clock. The individual 60-month clocks of parents in TANF-UP or TANF two-parent households were identical in terms of months counted that were based on VIEW participation; months of TANF counted in another state may have been different for each parent.)**

The 60-month time limit will apply to an individual who has been removed from the TANF grant due to one of the following reasons:

1) SSN requirement is not met
2) IPV disqualification
3) Questionable citizenship
4) Failure to cooperate with child support enforcement
5) Ineligible alien excluded due to sponsor's income
6) Ineligible parent excluded due to spouse's income
7) Questionable legal presence
8) Felony drug conviction/fleeing felon/parole violator.

The 60-month time limit will not apply to the following individuals:

1) an adult who is excluded from the TANF grant due to the receipt of SSI
2) an adult who is excluded from the TANF grant due to his status as an ineligible alien. Ineligible aliens include individuals who are in the country illegally, as well as lawful permanent residents and other individuals who are not eligible for TANF for five years from date of entry.
3) a non-parent caretaker who has been removed from the TANF grant due to VIEW non-compliance.

A month in which an individual received TANF benefits in another state (which for the purposes of determining the months of TANF assistance includes the District of Columbia and the territories of Guam, Puerto Rico, and the Virgin Islands) counts toward the 60-month limit. If an applicant states on the application for TANF benefits that he received assistance in another state, the eligibility worker must verify any TANF months to be counted by contacting the appropriate state and recording those months in the ADAPT system.

Note: The effective date for TANF implementation will vary from state to state. When contacting other states to verify the number of months already accrued, the worker should request the number of months counted by that state toward the 60-month limit. If the other state tracks days of receipt instead of months, the EW will need to verify the exact dates of receipt of TANF. The EW will then count any month in which the individual received TANF as a month toward the 60-month limit. The following website identifies each state's contact person: http://dpaweb.hss.state.ak.us/training/map/map.html

If contacted by another state to verify TANF benefits received in Virginia, the worker should provide the number of months countable under Virginia's TANF program since February 1, 1997. Prior to March, 2008, these would have only been months that were included on the VIEW 24-month clock. Beginning March, 2008, these would be months in which a TANF payment was issued (and may or may not have been countable on the 24-month VIEW clock).

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

1) Months of receipt of Aid to Families with Dependent Children (AFDC). Thus, months of financial assistance received in Virginia prior to February 1, 1997 do not count;
2) Any months that an individual receives assistance as a minor child (not a caretaker);
3) Months during which the adult lived on an Indian reservation during the month;
   (a) at least 1,000 individuals were living on the reservation; and
   (b) at least 50 per cent of the adults living on the reservation were unemployed;
4) Months in which the case was a "control" case. (Petersburg, Portsmouth, Prince William, Wise, and Lynchburg were research sites for the VIP evaluation. Cases in these localities were assigned a research or control status.)
5) Months that the TANF case is suspended and no payment is issued.
6) Months in which the individual received Diversionary Assistance.

Note: When the client has received 58 months of TANF, a 60-month letter will be sent to the agency printer dedicated to print system generated notices. The letter will notify the client that she is approaching her lifetime limit for the receipt of TANF benefits. The EW will mail the original letter to the client and file a copy of the letter in the TANF case record.

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

Example 2: Client is participating in VIEW and her clock has run from April 2007 through July 2008. On July 8, 2008 the VIEW worker placed the client in an Inactive status. The ESW places the client back in an active status on August 22, 2008. July will count as a month on her 24-month and 60-month clocks. August will not count on the 24-month clock because of the inactive status on the first of the month. August will count on the 60-month clock because the client received a TANF payment for the month. The 24-month clock count will resume with the month of September.

Example 3: Client and her three children received 60 months of TANF, with the March 1, 2003 payment. The TANF case was closed effective March 31, 2003. On April 12, 2003 the client was incarcerated and her three children moved in the grandmother's household. The grandmother applied for TANF for the three children on May 1, 2003. The TANF application was approved on May 29, 2003. Note: the AESANC screen with the 60-month POI information will have to be deleted for each child. The screen should be copied before it is deleted so that it can be re-entered if the grandmother's case closes. The children are eligible because they now live with an adult who is not included in the grant and does not have a 60- month clock. In March, 2008, the grandmother becomes financially needy and requests to be added to the AU. When she is added to the AU, she will become subject to a 60-month clock.

Example 4: Client and her two children have 60 months on her 60-month clock as the result of federal clock months from another state and/or months in Virginia. As long as the children remain in the home with this client, this family of three have reached their lifetime limit of TANF and will not be eligible again unless the client becomes totally disabled or becomes needed on a substantially continuous basis to care for a disabled family member who is living in the household.

Example 5: The children in example #4 leave the client's home and go to live with their father. The father has been a TANF recipient but has less than 60-months on his clock. The father and children can receive TANF until he has reached his 60-month time limit.
Note: the EW will have to delete the AESANC screen with the 60-month POI information for each child. The EW should copy the screen prior to deleting it as the screen should be re-entered if the father's case closes.

Example 6: Client receives TANF for herself and three children. The client has cycled in and out of TANF/VIEW and reaches her 24-month and 60- month limits. If the children go to live with their father or any relative, no one can receive TANF for the children during the two year period of ineligibility due to the VIEW limit. Note: The client may become eligible to receive TANF assistance again during the two year period of ineligibility due to the VIEW limit if she becomes totally disabled or becomes needed on a substantially continuous basis to care for a disabled family member who is living in the household.

Example 7: Mr. and Mrs. X are in the same AU and each has 30 months on the 60-month clock. Mr. X moves out and does not receive TANF while he is gone. When Mr. X moves back in with Mrs. X, she has 50 months on her clock. Ten months later, the TANF case is closed because Mrs. X reaches the 60-month lifetime limit on her clock. Mr. X has 40 months on his 60-month clock at the time of the TANF case closure.

Subsequently Mr. X moves out, taking one of the children with him. He applies for TANF for himself and the child. The TANF application will be approved if all other TANF eligibility criteria is met. Mr. X may remain eligible until he has accumulated 60 months on his 60-month clock.

H. Eligibility beyond the 60-month limit - An assistance unit may be eligible to receive additional months of TANF assistance beyond the 60-month time limit when either

1) the caretaker (both caretakers in a two-parent TANF household) is totally physically or mentally disabled (according to a Medical Evaluation 032-03-0654 completed by a medical professional which shows that the client is unable to work 20 hours or more per week) and is not able to be self supporting due to the disability; or

2) the caretaker is needed on a substantially continuous basis to care for a family member who is living in the household. (The family member does not have to be included on the TANF grant.) The family member must have a verified physical or mental disability and must have caretaking needs that prevent the caregiver from being self supporting. These "caretaking needs" include the need for attendance, supervision, and home care, and other needs related to the family member's disability. A medical professional must complete a Statement of Required Presence of Caregiver form (032-03-0020) to verify the family member's condition, and the need for the caregiver to be available on a substantially continuous basis. If the disabled family member is out of the home for substantial portions of the day, the caregiver will not be considered to be needed on a substantially continuous basis. Additionally, if the caregiver is employed outside of the home, the caregiver will not be considered to be needed to care for the disabled individual on a substantially continuous basis. In both of these situations, the TANF benefits will not be extended beyond the 60th month.

See Appendix IV for instructions on adding months beyond sixty to the sixty-month clock.

The total disability of the caretaker or the need for the caretaker to act as a caregiver for a disabled family member living in the household must be re-evaluated based on new verification at the end of the anticipated duration as noted on the medical form or every 90 days, whichever occurs first. If the medical form is incomplete, the eligibility worker must contact the medical professional to obtain the missing information before acting on the medical.

The TANF case is to be closed as soon as administratively possible upon verifying that the caretaker is no longer totally disabled or is no longer needed to care for a disabled family member living in the household.

When the disabled caretaker is eligible to receive Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI), additional verification of the disability will not be required.

When the disabled family member who requires a caregiver is eligible to receive SSI or SSDI, additional verification of the need for a caregiver for the disabled family member will be required annually. In addition, when the medical professional has indicated a specific duration that the caregiver will be needed, the eligibility worker will request verification of the need for the caregiver at the end of the anticipated duration as noted on the Statement of Required Presence of Caregiver form. If the individual subsequently becomes ineligible to receive SSI or SSDI and is no longer disabled, the TANF case is to be closed as soon as administratively possible.

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

The following documents may be used to verify age:

- Birth certificate
- Notification of birth
- Hospital record
- Physician or midwife record
- Baptismal record
- School record
- Birth form VS95 from the State Bureau of Vital Records and Health Statistics

If the child is obviously under 12, the child may be included in the assistance unit pending age verification.

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

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

An 18 year old child may be eligible if he is a **student** enrolled in a secondary school or vocational/technical school of secondary equivalency if he is expected to complete the high school or vocational/technical program prior to or in the same month as his 19th birthday. Verify with the school that the child is enrolled and expected to complete the program no later than the month of his 19th birthday. The program is considered completed on the last day of final exams or, if exams are not required, the last day of scheduled classes. The child will be eligible for the month in which completion of the school program occurs; however, eligibility cannot be extended past that month. The case record must be well documented in this area.

A child 18 years old is not eligible if he is in college, enrolled in school part- time, or not in school at all.

201.3 SCHOOL ATTENDANCE* - To be eligible for assistance, children in the assistance unit under age 18, including minor parents, must comply with the compulsory school attendance requirement. School attendance must be verified by the client during the 30-day application processing period. (Note: A child who is 18 years old meets the school attendance requirement, regardless of actual attendance, as long as he is enrolled and expected to complete high school or an equivalent program as stated in Section 201.2 above.) If school attendance is not verified, the child is considered truant and guidance at 201.3 C and D should be followed.

For applications made during the summer months, verify that the child was in attendance at the end of the school year. If attendance cannot be verified, or if the child has moved to a new school system after the end of the school year, approve the case if otherwise eligible. Set an alert in ADAPT for the month school is scheduled to begin and verify attendance at that time. Allow the client 10 days from the beginning of the school year to provide verification of enrollment or attendance. If the client does not furnish the school enrollment form within the time frame, the child is **considered** truant. If school attendance is not verified, the child is considered truant and the EW should follow guidance at 201.3 C and D.

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

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

(Note: The Virginia Department of Education (DOE) provides the following guidance regarding truancy to local school systems: "In the absence of a legal definition, the Virginia Department of Education is using a proxy measure to report truancy: the number of students with whom a conference was scheduled after the student had accumulated six absences during the school year, in accordance with §22.1-258, Code of Virginia." *) The determination of truancy is always made by the local school system.**

B. Notification of Truancy - The "Learnfare" provisions of the Virginia Code establish responsibilities for both the local agency and local school system in addressing truancy. When the local school division determines that a child receiving TANF is truant, it will notify the local department of social services. When a child attends a private, denomination, or parochial school, the local agency must arrange with the school to receive notification when the child is truant.

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

1. State Department of Social Services provides all local school divisions with a list of all individuals ages five through 17. Per Learnfare requirements, this information is e-mailed to a designated contact person in each school division monthly. **The Learnfare Coordinator's** Guide for School Systems can be accessed on SPARK under

* Code of Virginia, Section 63.2-606
** Code of Virginia, Sections 22.1-254 et seq.
*** **Improving School Attendance: A Resource Guide for Virginia Schools, 2005.**
http://www.doe.virginia.gov/support/prevention/dropout_truancy/improving_school_attendance.pdf

TANF/VIEW Training. The Guide provides detailed information for the school system in identifying truant children who are TANF recipients and in sharing that information with the local agency.

Note: Local agency staff who encounter technical issues related to the Learnfare program can contact Evelyn Robinson at (804) 726-7393 or at evelyn.robinson@dss.virginia.gov (primary contact) for assistance.

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

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

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

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

The notice must include the following:

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

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

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

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

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

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

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

2. a time frame for achieving compliance;

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

4. **a description of the** performance **that will** constitute compliance.

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

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

E. Failure to Establish or Cooperate with the Plan -

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

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

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

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

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

   If the truant child is the only eligible child, the case is ineligible for assistance and must be closed. If the caretaker and child subsequently decide to cooperate with the plan, the caretaker must reapply for TANF.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

* Code of Virginia, Section 22.1-257

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

201.5 LIVING ARRANGEMENTS - The child must be living with a parent or other relative (Subsection A., below) in a residence maintained as a home (Subsection B., below) by one or more such relatives. For TANF-UP, both natural or adoptive parents of at least one child must be living in the home. (Refer to 701.2.) Note: In some situations, a child who is in foster care may be placed with a parent or relative on a temporary basis, such as for a trial visit, and would be considered living with the parent or relative. No foster care maintenance payment would be made on behalf of the child and the family could be eligible for TANF assistance during the temporary placement.

A. Relatives - The relative with whom the child is living, who is designated as the caretaker, must be a relative by blood, marriage, or adoption. Relationships by marriage exist even after the marriage has been terminated by death or divorce. **(Note: A marriage is a legal relationship between two individuals. Depending on the laws of a state at the time of a marriage, a marriage can be between individuals of the opposite sex or between individuals of the same sex. Same sex marriages performed legally in other states are recognized by Virginia effective 2/14/14, including marriages performed prior to that date. While same sex marriages became legal in Virginia as of 2/14/14, the first same sex marriages performed legally in Virginia occurred on or after 10/6/14.)**

Example 1: Mrs. Green applies for assistance for her two children and her step-daughter Marcia following the death of Mrs. Green's husband who was Marcia's father. Mrs. Green can receive assistance for her own children and for Marcia to whom she is related by marriage. Because Mrs. Green has no legal responsibility for Marcia, two separate assistance units will be established.

Example 2: Ms. Johnson applies for assistance for two children after her son Ronnie abandons them when he moves to another state. Ronnie was married to Sarah, the children's mother, and was their stepfather until he and the mother divorced. Ms. Johnson can receive assistance for the children because she was their step-grandmother during the time Ronnie and Sarah were married. Ms. Johnson will have to establish her relationship to Ronnie, and prove that Ronnie and Sarah were married, and that Sarah is the parent of both children.

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

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

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

The identity of the parent or other relative must be established prior to determining relationship. (Appendix III lists documentation that can be used to verify identity). Additionally, documentation that is adequate to trace the relationship of each child to the parent or caretaker relative must be provided. The case record must document the verification methods used to establish identity and each relationship.

The following documents may be used to establish relationship:

- Birth certificate
- Hospital certificate
- Adoption papers or court record of adoption
- Baptismal certificate
- Hospital or physician's record
- Church record
- Bureau of Vital Records/Health Statistics record
- Marriage record
- Court support and/or divorce orders which clearly identify the relationship of the caretaker/relative to the children
- Court document **which clearly identifies an individual by name and relationship** as a relative of the child
- Genetic testing **report from a licensed and accredited laboratory** identifying relationship based on DNA match **that affirms at least 98% probability of relationship. Chain of custody for the DNA samples must be documented.**

Documents must be adequate to trace relationship completely, except that, if the applicant is the mother, initial eligibility can be established based on birth verification for the child.

In the case of a relative who will be the caretaker (though not a father not married to the child's mother, or a relative of such a father), a notarized statement by an individual, other than the applicant/recipient, who has sufficient knowledge to attest to the relationship may be used to establish initial eligibility. A copy of the child's birth certificate or other documentation used to establish relationship must be obtained no later than the next renewal.

If the applicant is a father not married to the child's mother, or relative of such father, evidence of paternity must be provided. The following documents may be used as evidence of paternity:

- Court record establishing paternity
- Court order stating that child is living with paternal or maternal relative
- Birth certificate from any state where father's name is included

A father, not married to the child's mother, who does not have one of the documents listed above at the time of application, will be given a Referral to Division of Child Support Enforcement From Local DSS form (032-03-0431-00)and will be referred to the Division of Child Support Enforcement District Office so he can obtain DNA testing that will establish his relationship to the child. If the applicant father is otherwise eligible, and produces results of the DNA testing that verify relationship, the TANF application will be approved. If he is not able to establish relationship within the standard processing period, the application must be denied. The father will be required to reapply if he subsequently secures verification of relationship.

If the caretaker is a relative of the father who is not married to the child's mother, the relationship between the relative and the father must be established once evidence of paternity has been provided.

B. Living in a Home* - A home is the family setting maintained, or in the process of being established, by the relative, as evidenced by the presence of the child. A home may exist in situations where the assistance unit lacks a fixed home address or is otherwise considered homeless.

A home exists even though the child or relative is temporarily absent from the customary family setting. A temporary absence based on admission or commitment to a **psychiatric hospital** or institution, **including a psychiatric ward in a general hospital,** or **to a** correctional facility, is limited to 30 consecutive days. Other temporary absences, including absences for other types of hospitalization, employment, education or training, vacations, or visits, are limited to 60 consecutive days. A parent or child who is absent from the home for longer periods cannot be considered to be living in the home.

Exception:
A parent who is absent from the home due to active duty in the uniformed services is considered living in the home and is not subject to the 60 consecutive day time limit.

The following individuals do not meet the living in a home requirement and are ineligible for TANF:

1. A parent or other caretaker who has been absent from the home for a period of 60 consecutive days (30 days if the absence is due to admission or commitment to a mental hospital or correctional facility).

2. A child who has been, or is expected by the caretaker to be, absent from the home for a period of 60 consecutive days (30 days if the absence is due to admission or commitment to a mental hospital or correctional facility). The child may be eligible in another assistance unit.

   Exception: A newborn may be added to the AU as of his date of birth even if he remains in the hospital. If the newborn is still in the hospital 60 days after his birth, he will be removed from the AU. The child may be added back to the AU when he enters the home.

The caretaker must report to the local agency after it becomes clear to the caretaker that the caretaker or minor child will be absent from the home for 60 consecutive days (30 consecutive days in the case of a mental institution or correctional facility). (Refer to Section 401.2.B.2.a.1)

If the caretaker fails to report the change within the required time frame as described above, the caretaker or the child who is absent from the home is ineligible. If the absent child is the only child in the home, the case will also be ineligible. (See 502.4 regarding establishment of an emergency payee when the caretaker is absent from the home.)

* Public Law 104-193

The primary source for verification of living arrangements for children who attend school, including nursery schools, pre-schools, or child care centers, is the school record which shows the name of the child, the name of the relative the child lives with and the address where they reside. For pre- school age children who are not in nursery school, pre-school, child care, etc. the following documents can be used to verify living arrangements as long as the **documents are current and contain** the child's name, the relative's name, and their residence address: hospital or physician's record, court or public agency record, or military record. (These records may also be used as secondary sources of verification for children attending school or primary verification for children who are home schooled.) If these documents are not available, the worker can verify living arrangements for a pre-school age child through contact with the landlord, public housing authority, or a friend or family member who can attest to the living arrangements. In all cases, the case record must be documented to reflect the verification obtained. Client statement cannot be used to meet the verification requirement.

Note: While VIIS is a public agency record, it cannot be used to verify living arrangements as there is no requirement to update the child's address in the VIIS system.

If verification cannot be obtained from one of the sources listed above, the case record must be documented to reflect all the attempts that were made to secure verifications from primary or secondary sources. The case record must also contain documentation of all evidence obtained by the worker that does substantiates the child's presence in the home.

If the agency is unable to verify the child's presence in the home, and the applicant/recipient continues to maintain that the child lives in the home, the agency must evaluate any evidence provided by the individual before taking action to exclude the child.

C. Living with a Relative for a Part of Each Month or Year – It is the responsibility of the local department of social services (LDSS) to determine whether a child who is in the home of the applicant/recipient for part of a month or part of a year should be included as a member of the TANF assistance unit. The child must actually live in the home, not simply be in the home temporarily for a few days a week, or for a weekend, or for a vacation, in order to meet the "living with" requirement.

The "living with" determination will require an evaluation of both the child's presence in the home and the parent's responsibility for the child while in the home and may include information about

- the child's entry into the applicant/recipient's home;
- the child's status in the home as a resident or as a visitor;
- the extent of the parental responsibilities the applicant/recipient will exercise on behalf of the child while the child is in the home; and
- the applicant/recipient's responsibility to maintain a home and meet the basic day-to-day needs of the child for food, shelter, and clothing.

1. Visits and Vacations: A minor child who usually lives with a custodial parent or caretaker relative, and who is visiting the other parent (or other caretaker relative), is considered to be temporarily absent from the home of the custodial parent and does not meet the "living with" requirement in the other home. (Note: the custodial parent may or may not be a current TANF recipient).

Example 1: The child lives with his mother and siblings. He spends his summer vacations with his father who lives in another county. His father would not be eligible for assistance for the child if he applied for TANF during the child's summer vacation because the child does not actually live in the father's home but is only there temporarily for a visit.

Note: If the child's mother receives TANF for him, and he is gone from her home more than 60 consecutive days, the child will no longer meet the "living in a home requirement" for her household as outlined at 201.5B. In this circumstance, he would not be eligible in either household until he returns to his mother's home following his summer vacation with his father.

Example 2: The child lives with his grandmother during the week and visits his mother every weekend. His grandmother receives TANF for him. His mother, who receives TANF for the child's three younger siblings, requests that he be added to her assistance unit. The child is not eligible, however, since he lives with his grandmother and only visits his mother.

2. Shared Living Arrangements: In some cases, a child lives with each parent for portions of a month or for several months of the year. These shared arrangements may be formal arrangements as in the case of legal joint custody in which an agreement legally establishes that both parents are to share physical custody of the child. The arrangements may also be informal arrangements established by the parents or caretaker relatives. In either case, the agency must determine the child's actual living arrangements. This determination may include examination of visitation schedules, written statements from each parent or caretaker relative, or other verifications. A statement by the applicant without additional documentation cannot be accepted as verification of the living arrangements except as outlined below.

The child is considered to be "living with" the parent or other caretaker relative with whom the child spends 51% or more of the time when the living arrangements are examined on an annual basis. (Note: If the living arrangements have not been in effect for at least one year, they will be examined based on the period they have been in effect. If the shared living arrangements have just begun, and the applicant states that the child will be living with her 51% or more of the time and there is no evidence to the contrary, the application can be approved with a special review set for the next review. The agency must verify the child's actual living arrangements at that time and determine whether the "living with" requirement continues to be met.)

If the child lives with both parents an equal amount of time and no parent has the child 51% or more of the time, both parents meet the "living with" requirement and either can apply and be granted assistance for the child if otherwise eligible.

If the agency is unable to determine the amount of time the child spends with each parent for any reason, "living with" cannot be determined and the child is ineligible.

EXAMPLE 1: The parents have shared joint legal and physical custody. The child lives with his mother from Monday through Friday. The child lives with his father on the weekends. The agency verifies the living arrangements. The child lives with the mother more than 51% of the time and would meet the "living with" requirement if his mother applied for assistance for him; he would not meet the "living with" requirement if his father made the application.

EXAMPLE 2: The agency verifies that the parents have 50/50 joint legal custody and that the child actually spends 50% of the time with each parent in alternating weeks. The child will meet the "living with" requirement with either parent; either the father or mother could receive assistance for him if otherwise eligible.

3. Local Agency Custody: A child living with his parent(s) may be eligible for TANF even though custody is held by the social services **agency**, if all other eligibility factors for TANF are met. **A child living with a relative other than a parent may also be eligible for TANF, even though custody is held by the social services agency, unless the home is an approved foster home. No foster care maintenance payment will be made on behalf of a child in agency custody while he is included in the TANF assistance unit of a parent or non-parent caretaker.**

It should be noted that for TANF eligibility purposes, a child can only have one home, as defined above in this section. Therefore, **a child in agency custody cannot be considered temporarily absent from the home of the parent or other relative with whom the child was living before coming into care if another parent or relative is currently eligible for TANF based on the presence of the child in his/her home.**

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

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

D. Minor Parent Residency Requirement ** - A minor parent is an individual under 18 years of age who is the natural parent of the child. A minor parent and the dependent child in her care must reside in the home maintained by her parent or person standing in loco parentis, unless she meets an exception. (*In loco parentis* is defined as standing in place of or taking the role of a parent. For TANF, the *in loco parentis* role may be filled by a relative [see 201.5A], the legal guardian of the minor child, or a person 21 years of age or older who is acting as a parent. By definition, the *in loco parentis* role may not be filled by a person such as a boyfriend or girlfriend whose relationship to the minor parent is other than parental.) Minor applicants must be informed about the residency requirement at the time of application. If the minor cannot make arrangements to live in the home of a parent or person standing in loco parentis within the standard 30 day processing time, and does not meet an exception, then the worker must deny the application.

* 45 CFR 233.90(b)
** Section 63.2-607, Code of Virginia

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

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

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

   a. The minor parent is married;

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

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

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

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

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

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

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

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

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

Residence must be verified except in unusual cases, such as homeless assistance units, migrant farm worker assistance units or assistance units newly arrived in a locality, where verification of residence cannot reasonably be accomplished. **In the case of an applicant/recipient who is participating in the Address Confidentiality Program (as referenced in Broadcast 6976 dated June 22, 2011), residency is established by the applicant/recipient's verbal statement that the family is residing in the locality where they have applied or are currently receiving assistance. The Office of the Attorney General will issue an Address Confidentiality Program (ACP) authorization card to each participant in the program. The card will have the participant's unique ACP authorization code on it (PMB#). The card will be used by the LDSS agency to verify participation in the ACP. If the LDSS has questions about the participant's status in the ACP or legal documents need to be served to the participant, the ACP Coordinator at the Office of the Attorney General should be contacted.**

The actual physical address of the applicant/recipient must not be entered into any of the department's automated systems. The mailing address for the ACP (PO Box 1133, Richmond, Virginia, 23218-1133) should be used.

* 45 CFR 233.40

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

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

201.7 CITIZENSHIP AND ALIENAGE - Federal law* and state law** **require** anyone whose needs are considered in determining the amount of assistance for TANF be a citizen of the United States or an eligible alien. **Citizenship and alien status must be verified by the local agency using documents specified in Appendix II or Appendix III in Chapter 200. Citizenship and alien status are not verified when the client meets the declaration of citizenship requirement outlined at 201.7C or when the client provides a Social Security number in order to meet the condition of eligibility requirement outlined at 201.1B.**

A. Citizenship/Alienage Status

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

a. born in the United States, regardless of the citizenship of his parents (Note: This does not apply to children of foreign heads of state or children of foreign diplomats. These children do not automatically obtain citizenship even when born in the United States or in U.S. jurisdictions.); or

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

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

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

a. "Qualified alien" is defined as:

1) an alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA), without regard to the number of the alien's SSA qualifying quarters;

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

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

* **45 CFR 233.50**
** 63.2-503.1
*** Public Law 111-118, Section 8120

amended),* or an alien who is a victim of human trafficking.

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

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

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

7) an alien, and/or alien parent of battered children and/or an alien child of a battered parent who is battered or subjected to extreme cruelty while in the U.S.; or

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

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

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

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

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

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

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

*** Public Law 105-33**
**** Public Law 104-208**
***** 1997 Acts of Assembly**

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

d. Exception for Veterans and Persons on Active Duty and Their Relatives - An alien lawfully residing in the state meets the alienage requirement regardless of the date of entry into the U.S., provided he is:

1) a qualified alien and is a veteran discharged honorably and not on account of alienage and who has served a minimum of 24 months or the period for which the person was called to active duty. "Veteran" also includes individuals who served in the Philippine Commonwealth Army during World War II or as Philippine Scouts following the war;**

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

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

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

(b) for one year or more; or

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

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

3. Verification of immigration status is required at application, redetermination, and as individuals are added, using U.S. Citizenship and Immigration Services (USCIS) documents provided by the alien or, if the individual is a victim of human trafficking, using documentation from the federal Office of Refugee Resettlement. A copy of the document must be filed in the case record and the comment screen documented. If an applicant/recipient's alien status changes or an individual who was an alien becomes a U.S. citizen, his eligibility for assistance must be evaluated under the new status. **Exception: When the status of an alien changes to legal permanent resident, eligibility for assistance must be evaluated under the original status.**

*** Public Law 96-442**
** Public Law 105-33

If an alien presents expired documents as evidence of his immigration status, or has no documentation, refer the alien to the local USCIS office to obtain documentation of status. In unusual cases involving aliens who have physical or mental disabilities that limit their ability to obtain or provide the required evidence, the worker should make every effort to assist the individual to obtain the required evidence. If the alien can provide an alien registration number, the worker should file Form G-845S Document Verification Request along with the alien registration number and a copy of any expired USCIS document presented with the local USCIS office to verify status.

Note: If a USCIS receipt for a replacement document was used to verify qualified alien status, obtain a copy the actual replacement document at the next renewal.

B. Sponsored Aliens

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

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

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

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

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

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

C. Declaration of Citizenship or Alien Status

Federal law requires that all TANF applicants/recipients, as a condition of eligibility, provide, or have provided on their behalf, a signed statement attesting, under penalty of perjury, to their citizenship or alien status.* The declaration of citizenship is to be obtained at the time of application or when a new member, including a newborn, is requested/required to be added to the assistance unit. While required, the declaration of citizenship is a statement only. It is the responsibility of the agency to verify the applicant's or recipient's claim of citizenship or alien status following procedures outlined at 201.7D.

The declaration requirement is met when the applicant/recipient age 18 or older completes and signs the "Application for Benefits (032-03-0824) or "Eligibility Review - Part A" (032-03-0729A) form, as applicable, or signs the "ADAPT Statement of Facts." In the absence of an adult in the assistance unit, the applicant will sign for all unit members.

Any individual for whom there is no declaration of citizenship or alien status shall not be included in the assistance unit. If the individual is a required member of the assistance unit, the income of the individual will be considered available to the assistance unit as provided in Section 305.4.E.1.e.

D. Verification of Citizenship or Alien Status; Legal Presence

Children and Other Applicants under age 19 - Citizenship or Alien Status: In order to meet TANF categorical eligibility requirements, the citizenship or eligible alien status of each applicant child, including newborns, and other applicants under age 19, must be verified before the individual can receive assistance. Citizenship or alien status can be verified by birth certificate or by other documents as specified in Chapter 200, Appendix II or Appendix III. Note: In the case of a newborn, the proof-of-birth letter furnished by the hospital to the parent is sufficient documentation to add the child to the assistance unit. A copy of the child's birth certificate, or other documentation verifying citizenship as specified in Chapter 200, Appendix III, should be obtained no later than the next renewal.

Applicants age 19 or older - Citizenship or Alien Status; Legal Presence: The citizenship or alien status of an applicant age 19 or over must be verified by the documents specified in Chapter 200, Appendix II or Appendix III. When citizenship or alien status is verified, the legal presence requirement is also met.

If the applicant is not able to prove citizenship or alien status at the time of application, a provision in the legal presence requirement allows the applicant to receive assistance while seeking to verify his status. Under this circumstance, assistance is limited to a maximum of 90 days, or until it is determined that the applicant is not legally present, whichever comes first.* If the case closes and the individual subsequently reapplies, he will not be given another 90-day period to provide verification of legal presence. If the verifications are not provided with the standard 30-day processing time, the individual is not eligible for assistance.

E. Systematic Alien Verification for Entitlements (SAVE) Program

1. The Immigration Reform and Control Act of 1986 (IRCA), requires the verification of the immigration status of aliens applying for certain types of benefits, including TANF.

* Code of Virginia, 63.2-503.1

Local agencies should not use the SAVE system to confirm the status of human trafficking victims since their status is verified by the federal Office of Refugee Resettlement.

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

   Verification is obtained through two processes:

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

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

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

3. Primary Verification

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

   SAVE is accessible through the seven, eight, or nine-digit Alien Registration Number (A-Number) which should be displayed on the alien's USCIS documents. SAVE is accessible via online access by authorized personnel to immigration files by logging on at https://save.uscis.gov/Web/vislogin.aspx?JS=YES

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

* Public Law 99-603, Section 121

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

4. Secondary Verification

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

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

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

c. Immigration documents have no Alien Registration Number (A- Number) or documents presented are not identified in 201.7;

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

e. The document presented is a USCIS fee receipt;

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

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

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

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

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

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

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

5. Secondary Verification Procedures

a. Once the requirement to obtain secondary verification is determined, the agency must initiate the request within 10 work days. Complete the top portion (Section A) of the USCIS Form G- 845S, Document Verification Request. A separate form must be completed for each alien. A copy of the G-845S form is included in Appendix V to Section 201.

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

c. Retain a copy of the completed G-845S in the case record. Mail the completed form to the USCIS office listed below:

U.S. Citizenship and Immigration Services
10 Fountain Plaza, 3rd Floor
Buffalo, NY 14202

Attn: Immigration Status Verification Unit

Do not send bulk mailings.

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

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

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

A. Obtaining a Social Security Number - For those individuals who provide SSNs prior to approval or at any other time the agency shall record the SSN in ADAPT and **attempt to verify the SSN** according to 201.8 E. As soon as all other steps necessary to approve an application are completed except for verification of the social security number the agency shall approve the application.

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

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

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

B. Assistance to Newborns – An electronic application for a social security number for the newborn will be made by the hospital before the mother is discharged. The parent should be able to provide the agency with verification that the social security number was applied for when requesting that the child be added to the grant. If for some reason the parent cannot provide this information, the child can be added to the assistance unit, but the parent must provide the child's social security number, or proof of application for the number, at the next case renewal, or within six months, whichever is later.

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

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

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

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

E. SSN Verification and Documentation

The local agency shall verify the SSNs reported by the assistance unit by submitting them to the Social Security Administration (SSA) through the State Verification and Exchange System (SVES) or the State Online Query- Inquiry System (SOLQ-I). The print out from SVES or SOLQ-I must also be filed in the case record. **When proof of an application for a social security number has been obtained, the worker will enter a code of SH- verified in the hospital or SS-applied for at a social security office on the AEDEM1 screen and then must document the comment screen to reflect the date that the application for the SSN was filed.**

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

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

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

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

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

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

F. Ending Ineligibility

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

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

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

201.10 COOPERATION IN OBTAINING SUPPORT

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

- identifying and locating the parent of a child for whom aid is claimed,
- establishing the paternity of a child born out of wedlock for whom aid is claimed;
- obtaining support payments for the applicant or recipient and for a child for whom aid is claimed; and
- obtaining any other payments or property due the applicant or recipient or the child.

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

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

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

* Code of Virginia, Section 63.2-1909

a. Name of Parent

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

2) If the applicant/recipient is not certain of the child's paternity, she must identify all individuals with whom she had sexual intercourse who may be the father. The "List of Putative Fathers" form (032-03-0880) must be completed by the applicant/recipient, listing the individuals who may be the father in rank order of their probability of being the father.

a) The applicant/recipient must designate, in writing, the men most likely to be the father. If the putative fathers designated are excluded from paternity as a result of the genetic testing, the applicant/recipient will be considered as not cooperating and the agency will impose a **penalty** until paternity has been established for the child. **Note**: **DCSE will provide genetic testing for up to five potential fathers at its expense. After five potential fathers have been tested, the parent must assume full responsibility for additional testing. If the parent fails or refuses to pay for further genetic testing, this will be considered to be noncooperation.**

b) If an applicant/recipient has named only one putative father, and subsequent genetic testing determines that this individual is not the father, the applicant/ recipient must be given an opportunity to provide another name(s) for the putative father. The applicant/recipient is considered to be cooperating with the identification requirement if she provides the name of another individual(s) with whom she had sexual intercourse who may be the father. If the men named are excluded from paternity through genetic testing, the applicant/recipient will be considered as not cooperating and the agency will impose a **penalty** until paternity has been established for the child unless the applicant/recipient signs the Attesting to the Lack of Information form (032-03-0423). Note: Individuals **on whom a penalty was imposed** prior to October 2006 must be given an opportunity to name all putative fathers upon reapplication. Each man named must be excluded from paternity through genetic testing before the applicant/recipient will be considered as not cooperating.

c) If the genetic testing determines that an individual named is not the father and the applicant/recipient maintains there are no other men who could be the father, the applicant/recipient must be advised of her right to meet with the DCSE worker and have her case reviewed. DCSE will review the case and offer

the applicant/recipient an opportunity to view the photograph of the individual tested. If the individual in the photograph is not the man named by the applicant/recipient, DCSE will initiate action to administer another test to the appropriate parties.

If the individual in the photograph is the man named by the applicant/recipient, DCSE may refer the matter to the court if the applicant/recipient insists that he is the father. During that time, the applicant/recipient will be considered to be cooperating.

3) A mother who was married at the time of the child's birth, but names someone other than her husband as the child's father, must refer both men to DCSE. The man to whom she was married at the time of the child's birth is the legal father and is considered the child's father until a court has determined that he is not. After the court has excluded the husband as the father, DCSE can proceed to determine the paternity status of the man named by the mother.

b. Additional Information to Identify the Noncustodial Parent - For each noncustodial parent referred to DCSE, including the legal father if the mother was married at the time of the child's birth, the applicant/recipient must provide, under penalty of perjury, additional informational items including, at a minimum, three of the following:

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

c. Exception to the Requirement to Provide the Name of and Identifying Information on the Noncustodial Parent - If the applicant or recipient attests to the lack of information under penalty of perjury, cooperation exists even though identifying

information required in 201.10 A.1.a. and/or b. is not provided and no penalty is to be imposed. If the applicant/recipient cannot provide the name of the noncustodial parent and at least three pieces of identifying information, she must sign an Attesting to The Lack of Information (ATL) form (032-03-0423). **The client will be considered to be not cooperating if she states that she is unable to provide the name and other identifying information for a noncustodial parent but also refuses or fails to sign the ATL.** (Note: A separate ATL form must be completed for each noncustodial parent.) When an ATL is completed, a code "75" will be entered in the "Good Cause" field on the Absence Deprivation/ Paternity Absent Parent Data – Screen 1 (AEDEP1) in ADAPT. This code will be pre-filled on the "Good Cause" field on the Absence Documentation (AEMCAG) screen. This coding will ensure that a referral on this noncustodial parent will not be sent to DCSE.

At the time of each renewal, the eligibility worker is to ask the client to provide information on each noncustodial parent. If the client continues to be unable to provide the name and at least three pieces of identifying information on a noncustodial parent, the eligibility worker will have the client complete a new ATL form for that noncustodial parent.

Note: An applicant/recipient who is the grandparent of the child for whom assistance is requested, is expected to be able to provide the first and last name and at least three additional pieces of identifying information for the noncustodial parent who is her own child. If she fails to do so, she will be subject to noncooperation penalties outlined in guidance at 201.10 B and C.

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

   a. verbal or written information, or

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

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

4. Appearing for a scheduled appointment to have testing completed to establish paternity.

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

6. Paying for all additional genetic testing after the first five potential fathers have been tested and excluded as the father of the child.

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

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

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

   a. failed to provide identifying information, including the first and last name of the father or of all individuals who may be the father of the child(ren), and at a minimum three additional informational items to identify the parent, and the exception in Section 201.10 A.1.c. is not applicable**, or the exception in Section 201.10A.1.c is applicable but the client fails or refuses to sign the ATL;** or

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

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

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

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

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

   g. the putative fathers listed on the "List of Putative Fathers" form are excluded from paternity as a result of genetic testing; or

   h. fails or refuses to pay for further genetic testing after DCSE has paid for the first five potential fathers to be tested; or

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

2. The finding of noncooperation**, including noncooperation for failure/refusal to sign the ATL after attesting to a lack of information,** must be documented on the Comment screen for the Absence Documentation (AEMCAG) screen in ADAPT.

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

   b. If noncooperation was determined by DCSE, the DCSE worker will update the noncooperation indicator in APECS. On a monthly basis, a list of the individuals who are not cooperating and the noncooperation reason(s) will be available (in ADAPT) to the Eligibility Worker. This new "DCSE Noncooperation Work List" will also contain the names of individuals who failed to cooperate in the past but have begun to cooperate. A report regarding the action taken on the case based on this list will be available in Data Warehouse.

- **If the EW has cases on the DCSE Noncooperation Work List, she will have 10 calendar days to take the required action in ADAPT to close the case or reduce the TANF benefits as appropriate.**

  Note: If the EW has failed to take action on the case by the end of the sth calendar day after the report is received, the EW's supervisor will receive an alert on the 6th calendar day stating that the EW has noncooperation items on the Work List that have not been addressed.

- **If no action has been taken by the EW by the end of the 10th calendar day after the report is received, ADAPT will automatically close the case if paternity has not been established for the child for whom the caretaker has failed to cooperate and the child has received TANF for at least six months.**

  If paternity has been established or, if the child has not been on TANF for at least six months, the system will not automatically close the case. For these cases, it will be the responsibility of the EW to take the action in ADAPT to reduce the grant by the appropriate amount as determined by guidance at 201.10C. The reduction will be effective for the following month and the action to reduce the grant must be completed at least 10 days prior to the effective date of the action (excluding the date of the mailing and the effective date of the action).

The EW must manually update the DCSE Noncooperation Work List when no action is required and when the client's status changes from noncooperation to currently cooperating.

Detailed information is to be maintained in the DCSE case record to document the noncooperation and must be made available, upon request, if the penalty resulting from the noncooperation finding is appealed. If the action is appealed, the **EW** must contact the DCSE worker to inform him that an appeal has been filed and to request the supporting documentation required to be included in the appeal summary. The DCSE worker will attend the hearing or participate in the telephonic hearing to testify as to the applicant/recipient's failure to cooperate.

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

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

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

b. If the penalty is due to failure to redirect support, the agency must also explain that the support, minus the $100 disregard, will count as income to the assistance unit.

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

1. Noncooperation During First Six Months of Receipt of Assistance - When the applicant/recipient or a minor parent fails to cooperate during the first six months of receipt of assistance, the individual will be ineligible for assistance. The individual will remain ineligible and any penalty reduction must continue until he has cooperated or the information not previously provided has been obtained from another source, or all children for whom the individual did not cooperate have left the home. The worker shall:

a. Exclude the caretaker's needs from the grant, reducing the grant by the amount of the caretaker's needs or by 25 percent, whichever is greater, effective the month following noncompliance, if administratively possible. Note: If the individual not cooperating is a minor parent who is a member of an assistance unit that include her sibling(s), the agency must notify the applicant/recipient that the penalty may be avoided by withdrawing the request for assistance for the minor parent’s child.

Procedures for calculating the amount of the reduction are as follows:

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

2) The grant must be reduced by 25 percent if the caretaker’s needs are not currently included on the grant because
a. the caretaker is categorically ineligible (e.g., receives SSI, is an ineligible alien, etc.);
b. the caretaker has failed or refused to cooperate in meeting a requirement of eligibility; or
c. the caretaker is a non-parent caretaker not on the grant (a payee).

See Appendix X to Chapter 201 for penalty calculation examples.

b. Recalculate the penalty reduction to ensure that the penalty reduces the grant by the greater of the amount of the caretaker's needs or 25 percent whenever:

1. there is a change in the assistance unit size or the grant amount.
2. the caretaker subsequently complies with the eligibility requirement that had caused his needs to be removed.

c. Lift the penalty reduction if all children for whom the client did not cooperate have left the client's home. Reimpose the penalty if the children subsequently return to the home.

d. Add the recipient to the grant by the month following the month in which he cooperates with DCSE or the information not previously provided is obtained from another source. Note: If the caretaker complies with the support enforcement requirement but continues to be ineligible due to noncompliance with another requirement, the penalty reduction (amount in excess of the caretaker's needs) must be removed but the caretaker's needs must continue to be excluded.

e. If, in the sixth month TANF is received, the recipient is still not cooperating, the local agency must complete a special review to determine if the case continues to be eligible in accordance with C.2 below.

2. Noncooperation After the Sixth Month of Receipt of Assistance - When noncooperation continues after the sixth month of receipt of assistance, the local agency must conduct a special review of the case. The purpose of the special review is to verify, through contact with DCSE, whether the recipient has begun to cooperate in establishing paternity or in fulfilling other child support requirements as outlined at 201.10A.

a. If the recipient has not begun to cooperate, but paternity has been established, the recipient will continue to be ineligible for assistance and the penalty imposed will continue until the individual cooperates or all children for whom the individual did not cooperate have left the home.

b. If the recipient has not begun to cooperate and paternity has not been established, the local agency must close the entire TANF case as soon as administratively possible and document the case record accordingly. The case is ineligible effective the following month and must remain closed until cooperation has been achieved, the information not previously provided is received from another source*, or all children for whom the individual did not cooperate have left the home. If the determination of noncooperation is based on the exclusion of the individual(s) named as the father based ·on genetic testing, the recipient cannot be considered to be cooperating until paternity has been established for the child or the recipient signs the Attesting to the Lack of Information (ATL) form.

* Code of Virginia, Section 63.2-602

3. Counting the Six Months of Receipt of Assistance - In counting the six months of receipt of assistance, count the month of entitlement as the first month of assistance when noncooperation began prior to case approval. If noncooperation occurred after approval, the six months are still counted from the date of entitlement.

Exception: For a child added to the grant subsequent to case approval, the six-month period begins with the first month of receipt of assistance for the child.

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

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

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

Example 4 - Ms. Bonnewit has been receiving TANF for several years. A child (not subject to the family cap), who had been residing elsewhere, comes to live with his mother, Ms. Bonnewit. His paternity has not been established. In determining the child's eligibility, Ms. Bonnewit refuses to name the father. At the same time the child is added to the grant, the mother's needs are removed. In this situation, the six-month period begins with the first month of receipt of assistance for the child, which is January 1. On April 15, Ms. Bonnewit requested that her case be closed. The case closes April 30. Ms. Bonnewit later reapplies and is determined eligible for TANF in June. Her six month period resumes in June. June will be her fifth month for the non-cooperation penalty.

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

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

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

   a. physical or emotional harm to the child; or

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

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

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

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

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

E. ADVISING THE CLIENT OF THE RIGHT TO CLAIM GOOD CAUSE - At the time of application or redetermination, the agency must advise each applicant or recipient of the right to explain all reasons for refusing to cooperate in establishing paternity or securing support. The agency must explain the provisions in the "Notice of Cooperation and Good Cause" (form 032-03-0036) to the applicant/recipient. The applicant/recipient and eligibility worker must sign the form indicating **for each absent parent** whether or not the client claims good cause for refusing to cooperate.

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

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

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

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

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

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

3. Physical Or Emotional Harm - Court, medical, criminal, child protective services, social services, psychological, law enforcement records, sworn statements from individuals other than the applicant or recipient with knowledge of the circumstances which provide the basis for the good cause claim, or a written statement from a domestic violence services program or sexual assault crisis center professional indicating that the putative father or noncustodial parent might inflict physical or emotional harm on the child or caretaker-relative.

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

While the applicant or recipient has the responsibility to provide the agency with the required documented evidence, the agency will, upon request, assist the applicant or recipient in obtaining the required evidence.

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

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

1. good cause does not exist, or

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

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

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

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

J. Referral to Support Enforcement **When the Client Has Claimed Good Cause** - When the recipient has claimed good cause for not cooperating, the local agency will **make the final decision regarding good cause. The worker will document the record explaining the approval or denial of the good cause claim.**

If the agency has determined that the client has good cause, the following information must be entered on the AEDEP1 screen in ADAPT: name, sex, race, the appropriate good cause code (codes 30 or above only). Additionally, the field regarding the AP's receipt of benefits must be completed on AEDEP2, the fields regarding crimes/convictions and probation/parole must be completed on AEDEP3. The worker can transmit through the other AEDEP screens to access AEMCAG where the absence reason must be entered. The good cause code entered on AEDEP1 will have populated the good cause field on AEMCAG. As long as the good cause code entered is 30 or above, no DCSE case will be opened.

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

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

L. Periodic Review **of Good Cause Claims** - The agency must review evidence used in making the determination of good cause at least as frequently as each redetermination. This review is to determine whether good cause for not cooperating continues to exist. If good cause no longer exists, the eligibility worker must notify the client of this determination using the Notice of Action. The eligibility worker must allow the applicant/recipient the opportunity to request termination of assistance, advise him of the cooperation requirement, and enter the new information on the Absence Deprivation/Paternity 501 series screens in ADAPT.

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

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

For applications on or after July 1, l995, the family cap provision applies to a child born after the ten full months following the month in which the initial TANF payment was issued for the case. For new applications, the issuance of the initial payment is the **date the payment shows on the TANF payment history under "PYMNT DT".** For reapplications, the EW will need to determine if there has been a break in the receipt of TANF assistance. A new ten-month period will begin at reapplication when there has been at least a one month break in assistance prior to the date the client reapplies for TANF. If the household has continuously received TANF benefits prior to reapplication, the previous ten-month period will resume. The ten-month period is a fixed period of ten calendar months and is not affected by suspensions. Months in which the household receives a VIEW Transitional Payment (VTP) will not count toward the ten-month period.

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

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

Example 2: Continuing with the previous example, Ms. Brown closes her case effective March 31st Ms. Brown reapplies and is approved for TANF on April 10th. As she has received a TANF payment each month since the original case approval the previous August, the original ten-month period will resume. Her tenth month will still be June. Additionally, if Ms. Brown's application was not approved until May, the original ten-month period would resume because Ms. Brown applied in the month (April) immediately following the month of the case closure (March).

Example 3: Ms. Solos has been a recipient of TANF for the past three years. She has two children, one of whom is capped. In March 1999 her case was closed. She reapplies in July 1999 and reports that she is pregnant. Ms. Solos' case is approved for herself and the older child. Her younger child continues to be ineligible due to his capped status. Two months later, she gives birth to her third child. This child is not capped, since the child was born during the 10-month period following issuance of her initial **payment**.

* Code of Virginia, Section 63.2-604

<u>Example 4</u>: Continuing the the previous example, Ms. Solos closes her case effective March 31st, 2008. Ms. Solos reapplies for TANF on May 5th, 2008. She is approved for TANF on May 10th. As she did not reapply for (or receive) TANF assistance in April, she will receive a new ten-month period. The first month of the ten-month grace period will be June. The tenth month is March. The family cap will apply to an additional child born to Ms. Solos on April 1, 2009 or later while she is eligible for TANF.

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

Any information entered on the Absence Deprivation/Paternity 501 series screens in ADAPT as part of the application process for the cap child WILL NOT be transmitted to DCSE. The applicant must complete an application for services at the local DCSE office if the applicant wishes to receive child support for a capped child.

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

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

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

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

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

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

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

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

In addition, applicants and recipients must sign and date the Notice of Personal Responsibility form. The form states that the local department has explained and that the individual understands the terms of the family cap provision. The form must **be** retained in the permanent document section of the TANF case record.

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

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

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

NONIMMIGRANT ADMISSION CODES

SYMBOL	CLASSES OF NONIMMIGRANTS
A-1, A-2	Foreign government officials, employees, and their families
A-3	Employees of A-1 or A-2 aliens and their families
B1, B-2	Visitor for business or pleasure
C-1, C-3	Alien in transit through the U.S.
C-2	Alien in transit to U.N. headquarters
TROV	Transit without visa
D-1, D-2	Crewmen discharged from vessel or aircraft
E-1, E-2	Treaty traders
F1, F-2	Students and their families
G1, G-2 G-3, G-4	Representatives of international organizations and their families
G-5	Employees of G-1, G-2, G-3, G-4 and their families
H-1	Temporary workers of distinguished merit
H-1A	Registered nurse
H-1B	Alien in a specialty occupation
H-2	Temporary worker
H-3	Trainee
H-4	Spouse and minor children, accompanying or following to join H-1, H-2, or H-3
I	Foreign information representatives and their families
J-1, J-2	Exchange visitors and families
K-1, K-2	Fiance orFiancee and their children
L-1	Intra-company transferees
L-2	Spouse and minor children accompanying or following to join L-1
NATO 1, NATO 2	NATO representative and families NATO 3, NATO 4

NONIMMIGRANT ADMISSION CODES

SYMBOL	CLASSES OF NONIMMIGRANTS
NATO 5, NATO 6 NATO 7	Employees of NATO representative and their families
N-8	Parent of alien classified as SK-3 (unmarried son or daughter of an employee of an international organization)
N-9	Child of N-8, retired employee of an international organization or spouse (SK-1, SK-2, or SK-4)
O-1	Aliens with extraordinary ability
O-2	An assistant to O-1
0-3	Spouse and minor child of O-1 or O-2
P-1	Internationally recognized athletic or entertainment groups
P-2	Reciprocal exchange program for individuals and groups
P-3	Artists and entertainers in a culturally unique program
P-4	Spouse and child of P-1, P-2 or P-3
Q	International cultural exchange program
R-1	Members of a religious denomination that have a bonafide non-profit religious organization in the United States
R-2	Spouse and child of R-1

DOCUMENTATION FOR QUALIFIED ALIENS BY ALIEN GROUP

All qualified aliens who entered the U.S. prior to 8/22/96 and whose status can be documented are eligible for assistance.

Certain qualified aliens (some refugee categories, aliens granted asylum, aliens whose deportation is being withheld, and Cuban-Haitian entrants) who entered the on or after 8/22/96 and whose status can be documented are eligible for assistance. If the status cannot be documented, the alien is ineligible for five years from date of entry into the U.S.

SECTION A - QUALIFIED ALIENS	
Lawful Permanent Resident Aliens	**Documentation**
Lawful Permanent Resident Aliens are aliens lawfully admitted for permanent residence under the Immigration and Nationality Act (INA) (without regard to the number of SSA qualifying quarters of work).	• Alien Registration Receipt Card I-551; or, • Unexpired temporary I-551 stamp on foreign passport or on I-94 • Note: Earlier versions of the I-551 are the I-151, the AR-3, and the AR-3a. If the alien has only an older version, refer him to USCIS to apply for the I-551.
Lawful Permanent Resident Aliens who are American Indians born in Canada and covered by Section 289 of the INA.	• Alien Registration Receipt Card I-551 with code “S13”; or, • Letter or other tribal document certifying at least 50% American Indian blood plus a birth certificate or other evidence of birth in Canada.
Aliens Granted Asylum	**Documentation**
Aliens granted asylum under Section 208 of the INA. ***Arrival on or after 8/22/96:*** *If the alien granted asylum under Section 208 arrived on or after 8/22/96, he must meet the requirements outlined; or, if his status is now LPR, verify that the alien was previously granted asylum by filing a G-845S Document Verification Request form along with a copy of the alien’s I-551.*	• Arrival Departure Record (I-94) with stamp showing grant of asylum under Section 208 of the INA; or, • Employment Authorization Card (I-688B) bearing “Provision of Law” citation 274a.12(a)(5); or, • Employment Authorization Document (I-766) annotated “A5”; or, • Grant letter from Asylum Office; or, • Order of an immigration judge granting asylum

Refugees	Documentation
Refugees admitted under Section 207 of the INA ***Arrival on or after 8/22/96:*** *If the refugee admitted under Section 207 arrived on or after 8/22/96, he must meet the requirements outlined; or, if his status is now LPR, verify admission as a refugee by code RE-6, RE-7, RE-8, or RE-9 on the I-551.*	• Arrival Departure Record (I-94) with stamp showing admission under Section 207 of the INA; or, • Employment Authorization Card (I-688B) bearing "provision of Law" citation 274.12(a)(3) or (4); or, • Employment Authorization Document (I-766) annotated "A3"; or, • Refugee Travel Document (I-571)
Refugees admitted as Amerasian immigrants ***Arrival on or after 8/22/96:*** *If the Amerasian immigrant admitted under Section 207 arrived on or after 8/22/96, he must meet the requirements outlined; or, if his status is now LPR, verify admission as a refugee by code RE-6, RE-7, RE-8, or RE-9 on the I-551.*	• An I-94 coded AM1, AM2, or AM3; or, • An I-1551 coded AM6, AM7; or • A temporary I-551 stamp in a foreign passport
Refugees admitted as victims of human trafficking	• Letter from the Office of Refugee Resettlement that certifies or documents the status
Paroled Aliens	**Documentation**
Aliens paroled into the U.S. for at least one year under Section 212(d)(5) of the INA	• Arrival Departure Record (I-94) with stamp showing admission under Section 203(a)(5). • Note: Periods of admission of less than one year cannot be added together to meet the one- year requirement.
Conditional Entrant Aliens	**Documentation**
Aliens admitted as conditional entrants Under Section 203(a)(7) of the INA	• Arrival Departure Record (I-94) with stamp showing admission under Section 203(a)(7) of the INA; or, • Employment Authorization Card (I-688B) bearing citation 274a.12(a)(3); or, • Employment Authorization Document (I-766) annotated "A3"

Aliens With Deportation Withheld	Documentation
Aliens whose deportation has been withheld under Section 241(b)(3) or 243(h) of the INA ***Arrival on or after 8/22/96:*** *If the alien's deportation is being withheld under Section 241(b)(3) or 243(h) of the INA, he must meet the requirements outlined; or, if his status is now LPR, verify previous deportation or removal withheld by filing a G-845S along with a copy of the alien's I-551.*	• Employment Authorization Card (I- 688B) annotated "274.a12(a)(10); or, • Employment Authorization Document (I-766) annotated "A10"; or, • Immigration Judge's Order showing deportation withheld under section 243(h) of the INA; or, • Immigration Judge's Order showing removal withheld under section 241(b)(3) of the INA
Cuban-Haitian Entrant Aliens	**Documentation**
Cuban-Haitian Entrants are defined by Section 501(e) of the Refugee Education Assistance Act of 1980 as: • An individual who has been granted parole by USCIS for humanitarian or public interest reasons, unless a final order of deportation or exclusion has been issued; or, • An individual who has an application for asylum pending with USCIS, unless a final order of deportation or exclusion has been issued; or, • Is subject to USCIS exclusion or deportatation proceedings, unless a final order of deportation or exclusion has been issued ***Arrival on or after 8/22/96:*** *If the Cuban-Haitian Entrant's arrival was on or after 8/22/96, he must meet the requirements outlined.*	• Alien Registration Receipt Card (I-551) with the code CU6, CU7, or CH6;, or • An unexpired temporary I-551 stamp in a foreign passport or on an I-94 with the code **CU6** or CU7; or, • An **I-94** with stamp showing parole as "Cuban/Haitian Entrant" under section 212(d)(5) of the INA • Note: Document that a Cuban-Haitian Entrant is subject to exclusion or deportation using letters or notices which indicate ongoing exclusion or deportation proceedings for that person. • Note: Contact USCIS if information indicates that a final order of exclusion or deportation has been issued.

Battered Aliens	Documentation
A battered alien is an alien parent and/or alien child who is battered or subjected to extreme cruelty while in the U.S. The alien must have a petition approved by or pending with the USCIS for: • Status as an immediate relative (spouse or child) of a U.S. citizen; or, • Classification changed to immigrant; or, • Status as the spouse or child of a lawfully admitted permanent alien (LAPR); or • Suspension of deportation and adjustment to LAPR status based on battery or extreme cruelty by a spouse or parent who is a U.S. citizen or LAPR alien Battery/cruelty criteria: • The perpetrator is a spouse, parent, or other household member of the spouse or parent's family who was residing in the home at the time of the incident but is no longer in the home. The alien must not now be residing in the same household as the person responsible for the battery or extreme cruelty, and • The alien was battered or subjected to extreme cruelty while in the U.S. by a spouse or a parent, or by a member of the spouse or parent's family residing in the same household as the alien, and the spouse or parent consented to or acquiesced in such battery or cruelty; or,	• Document the battery/cruelty situation using information from the applicant/recipient and other knowledgeable sources. • Examine documents provided by the applicant/recipient to determine if one of the USCIS status categories is met • Prior to the approval of benefits, the agency must determine that the situation meets the criteria outlined, the individual meets a USCIS status, and that there is a substantial connection between the battery or cruelty and the need for benefits; these findings must be documented

Battered Aliens	Documentation
• The alien's child was battered or subjected to extreme cruelty while in the U.S. by a spouse or a parent of the alien (without the active participation of the alien in the battery or cruelty), or by a member of the spouse or parent's family residing in the same household as the alien, and the spouse or parent consented or acquiesced to such battery or cruelty and the alien did not actively participate in the battery or cruelty, or • The alien child resides in the same household as a parent who has been battered or subjected to extreme cruelty while in the U.S. by that parent's spouse, or by a member of the spouse's family residing in the same household as the parent and the spouse consented or acquiesced to the battery or cruelty.	
Iraqi Special Immigrants	**Documentation**
• **Principal Iraqi applicant**	• **Iraqi passport with immigrant visa stamp noting IV (Immigrant Visa) Category SQ1 or DHS stamp or notation of passport of I-94 showing date of entry.**
• **Spouse of Principal Iraqi applicant**	• **Iraqi passport with immigrant visa stamp noting IV Category SQ2 or DHS stamp or notation of passport of I-94 showing date of entry.**
• **Unmarried child under 21 of Iraqi applicant**	• **Iraqi passport with immigrant visa stamp noting IV Category SQ3 or DHS stamp or notation of passport of I-94 showing date of entry.**
• **Principal Iraqi Applicant Adjusting Status in U.S.**	• **DHS Form I-551 ("green card") showing Iraqi nationality (or Iraqi passport), with IV code of SQ6.**

Iraqi Special Immigrants	Documentation
• **Spouse of Principal Iraqi Applicant Adjusting Status in U.S.**	• **DHS Form I-551 ("green card") showing Iraqi nationality (or Iraqi passport), with IV code of SQ7.**
• **Unmarried Child Under Age 21 of Principal Iraqi Applicant Adjusting Status in U.S.**	• **DHS Form I-551 ("green card") showing Iraqi nationality (or Iraqi passport), with IV code of SQ9.**
Afghan Special Immigrants	**Documentation**
• **Principal Afghan applicant**	• **Afghan passport with immigrant visa stamp noting IV (Immigrant Visa) Category SQ1 or SI1.**
• **Spouse of Principal Afghan applicant**	• **Afghan passport with immigrant visa stamp noting IV Category SQ2 or SI2.**
• **Unmarried child under 21 of Afghan applicant**	• **Afghan passport with immigrant visa stamp noting IV Category SQ3 or DHS stamp SI3.**
• **Principal Afghan Applicant Adjusting Status in U.S.**	• **DHS Form I-551 ("green card") showing Afghan nationality (or Afghan passport), with IV code of SQ6 or SI6.**
• **Spouse of Principal Afghan Applicant Adjusting Status in U.S.**	• **DHS Form I-551 ("green card") showing Afghan nationality (or Afghan passport), with IV code of SQ7 or SI7.**
• **Unmarried Child under 21 of Principal Afghan Applicant Adjusting Status in U.S.**	• **DHS Form I-551 ("green card") showing Afghan nationality (or Afghan passport), with IV code of SQ9 or SI9.**

SECTION B: EXCEPTIONS FOR ALIENS WHO ARE VETERANS OR ACTIVE DUTY SERVICE MEMBERS AND THEIR FAMILIES WITHOUT REGARD TO DATE OF ENTRY	
Aliens Who Are Veterans	**Documentation**

A qualified alien who is a veteran living legally in the state who served a minimum of 24 months, or other required period of active duty and who was honorably discharged (not for reasons of alienage), without regard to date of entry. This category includes veterans of the Philippine Commonwealth Army during WWII, veterans of the Philippine Scouts after the war.	• Document lawful alien status. (The status must be other than illegal).
	• Verify qualified alien status (Section A)
	• Verify military status using documents from the individual, or through military records (Form DD 214).
	• Document active duty in the Army, Navy, Air Force, Marine Corps, or Coast Guard
	• There is no minimum duty requirement if the original enlistment is prior to 9/7/80. If enlistment is on or after 9/7/80, two or more years of continuous active duty are necessary to meet the minimum duty requirement. (Form DD 214)
	• Document "Honorable Discharge." (A discharge "Under Honorable Circumstances" does not meet this requirement).
	• Refer aliens to VA office to determine status when:
	  o The individual has no papers showing service or discharge
	  o Service is in any other branch, or duty is other than "active" (e.g., "Active Duty for Training)
	  o When DD 214 shows active duty service of less than two years and original enlistment on or after 9/7/80, or
	  o When DD 214 is not available

Aliens Who Are On Active Duty	Documentation

A qualified alien who is on active duty (except for training) in the
U.S. Armed Forces – Army, Navy, Air Force, Marine Corps, or Coast Guard
- without regard to date of entry.
	• Verify qualified alien status (Section A)
	• Verify military status using documents from the individual, or through military records (Form DD 2 – Active)
	  o DD 2 must show an expiration date of more than one year from the date of determination
	  o If the DD 2 is due to expire within one year from the date of determination, verify active duty through a copy of the current military orders

Relatives of Alien Veterans or Active Duty Service Members	Documentation
The spouse, or unmarried dependent child of a qualified alien veteran or qualified alien service member as described above. The spouse, or unmarried dependent child does not have to be a qualified alien.	• Verify qualified alien status of veteran(Section A) • Verify military status as outlined above using documents from the individual, or through military records. (Form DD 214 or DD 2). • Verify relationship of the spouse or unmarried dependent to the veteran or active duty service member. • In the case of an unmarried dependent child, document the dependent status by the child's military ID card, and that the child is under age 18, or is under 22 if a full-time student.
The unremarried surviving spouse of a qualified alien veteran or qualified alien service member as described above who was: • married to the veteran or active duty alien within 15 years after the end of the period of service in which the injury or disease causing death was incurred or aggravated, and was • married to the veteran or active duty alien for one year or more, or	• Verify qualified alien status of veteran(Section A) • Verify military status as outlined above using documents from the individual, or through military records. (Form DD 214 or DD 2). • Verify relationship of the unmarried surviving spouse to the veteran or active duty service member.
• The unremarried surviving spouse of a qualified alien veteran or qualified alien service member as described above who was the parent of a child born of the relationship with the veteran or active duty service member either before or during the marriage.	• Verify qualified alien status of veteran(Section A) • Verify military status as outlined above using documents from the individual, or through military records. (Form DD 214 or DD 2). • Verify relationship of the unremarried surviving spouse to the veteran or active duty service member. • Verify the relationship of the unremarried surviving spouse and the veteran or active duty service member to the child born of the relationship.

EVIDENCE OF U.S. CITIZENSHIP AND IDENTITY

AN INDIVIDUAL IS A U.S. CITIZEN IF HE IS:

a. born in the United States, regardless of the citizenship of his parents (Note: A child born in the United States or U.S. jurisdiction to a foreign head of state or foreign diplomat does not automatically obtain U.S. citizenship); or

b. born outside the United States of a U.S. citizen parent or parents; or

c. born outside the United States of alien parents and has been naturalized as a U.S. citizen; or

d. born outside the United States of an alien parent/parents who are naturalized before he becomes 16 years of age.

A. DOCUMENTATION OF CITIZENSHIP AND IDENTITY FOR U.S. CITIZENS

An individual establishes citizenship and identity by providing one of the following documents that show a U.S. place of birth, or that the person is a citizen:

- U.S. Passport (unless the passport was issued with a limitation). The passport does not have to be currently valid to prove citizenship/identity.
- Certificate of Naturalization (N-550 or N-570)
- SAVE verification of naturalization
- Certificate of Citizenship (N-560 or N-561)

Client statement cannot be used to establish citizenship and identity.

B. DOCUMENTATION OF CITIZENSHIP FOR U.S. CITIZENS (ADDITIONAL DOCUMENTATION MUST BE PROVIDED TO ESTABLISH IDENTITY. SEE SECTION C. BELOW).

The following documents establish citizenship. Additional documentation must be provided to establish identity:

- U.S. Public Birth Record showing birth in
  - One of the 50 states
  - District of Columbia
  - Puerto Rico (if birth on or after 1/13/1941)
  - U.S. Virgin Islands (if birth on or after 1/17/1917)
  - Northern Mariana Islands (if birth on or after 11/4/1986)
  - American Samoa
  - Guam
- Consular Report of Birth Abroad of a Citizen of the United States of America (FS-240)
- United States Citizen Identification Card (I-197 or I-179)
- Final adoption decree showing child's name and U.S. place of birth
- Official military record of service showing U.S. place of birth

- Official written statement or record from the hospital at which the individual was born, or from the attending physician showing U.S. place of birth.

- Written affidavit attesting to citizenship or naturalization. (Note: A written affidavit is only acceptable if no other proof of citizenship can be provided. The affidavit must be signed by at least two individuals, at least one of whom is not related to the applicant, who have personal knowledge supporting the claim of citizenship. The individuals signing the affidavit must both have proof of identity and their own citizenship. The applicant must provide a separate affidavit explaining why evidence of citizenship does not exist or cannot be obtained).

Client statement cannot be used to establish citizenship.

NOTE: Medicaid enrollees who do not provide proof of citizenship at application but whose citizenship is subsequently verified by the Social Security Administration (SSA) will automatically be coded "CV" in ADAPT on the AEDEM5 screen. In the case of an individual who has not provided the required documentation of citizenship by the 90th day after application, and for whom citizenship remains unverified on AEDEM1, the EW will access AEDEM5 to determine if citizenship has been coded "CV" for Medicaid before taking action to remove the individual's needs from the grant.

If citizenship has been verified for Medicaid and the client is coded "CV", the EW will change the U.S. citizenship verification code for TANF on the AEDEM1 screen to "OT" and will document that verification was based on the Medicaid "CV" coding. If citizenship has not been verified for Medicaid and the client is not coded "CV", the individual is ineligible for TANF and his needs must be immediately removed from the grant. (See 201.7D)

C. DOCUMENTATION OF IDENTITY FOR U.S. CITIZENS (ADDITIONAL DOCUMENTATION MUST BE PROVIDED TO ESTABLISH CITIZENSHIP. SEE ACCEPTABLE DOCUMENTATION FOR CITIZENSHIP ONLY IN B. ABOVE. SEPARATE DOCUMENTATION OF IDENTITY DOES NOT HAVE TO BE PROVIDED IF CITIZENSHIP WAS VERIFIED BY U.S. PASSPORT, CERTIFICATE OF NATURALIZATION, OR CERTIFICATE OF CITIZENSHIP SINCE THESE SERVE TO VERIFY IDENTITY AS WELL AS CITIZENSHIP).

- A state photo driver's license
- A state issued photo ID card
- A school issued photo ID card
- U.S. Military ID card (active, reserve, retired)
- U.S. Military draft record
- U.S. Military dependent ID card
- U.S. Coast Guard Merchant mariner Card

Note: For a **minor** caretaker who is under 16 **and is not receiving TANF as an eligible child (PC) in the home of his/her parent**, the following can be used:

- Doctor, clinic, or hospital record
- School record
- Child care record

Client statement cannot be used to establish identity.

D. DOCUMENTATION OF IDENTITY ONLY FOR INDIVIDUALS WHO ARE NOT U.S. CITIZENS. IMPORTANT: THESE DOCUMENTS ARE USED TO ESTABLISH IDENTITY OF THE PARENT PRIOR TO ESTABLISHING RELATIONSHIP TO THE CHILD. THEY ARE USED ONLY FOR INDIVIDUALS WHO ARE NOT CITIZENS OR ELIGLBLE ALIENS. THESE DOCUMENTS DO NOT ESTABLISH CITIZENSHIP OR ALIEN STATUS.

- U.S. Military ID card (active, reserve, retired)
- U.S. Military draft record
- U.S. Military dependent ID card
- U.S. Coast Guard Merchant Mariner Card

- Identification card issued by the Federal, State, or local government that includes the individual's name and address, and incorporates a photo as an integral part of the card

- Three or more corroborating documents such as employer identification cards, high school or college diplomas, including GEDs, from accredited institutions, marriage certificates, divorce decrees, or property deeds/titles that together reasonably corroborate the identity of the individual. The agency must first ensure that no other evidence of identity is available to the individual prior to accepting such documents.

- Written affidavit attesting to identity. (Note: A written affidavit is only acceptable if absolutely no other proof of identify can be provided.) The affidavit must be signed by at least two individuals, at least one of whom is not related to the applicant, who have personal knowledge of the individual's identity. Examples of such individuals might include landlords, relatives or friends. The individuals signing the affidavit must both have proof of their own identities. The applicant must provide a separate affidavit explaining why proof of identity does not exist or cannot be obtained.

Client statement cannot be used to establish identity.

How To Add Months Beyond 60 On The TANF 60-Month-Clock In ADAPT

A TANF case may receive beyond 60 months of TANF if the client makes a request and verifies a mental or physical disability. The case may also receive more than 60 months of TANF if the client is providing care on a substantially continuous basis for a relative living in the home that is physically or mentally incapacitated. If it is a TANF-UP household, both adults must be disabled. The following instructions allows months to be added beyond 60 months on the TANF 60-month clock when the case is on-going, on a new application, or being rescinded, because the client is disabled or the client is providing care on a substantially continuous basis for a relative in the home that is disabled. Code ADAPT following the instructions below.

When the client has a disability, follow the steps 1-9 below. If the client is providing care for a relative, follow steps 6-9.

1. **From the ADAPT Main Menu Select Option 3-Application Entry. Transmit.**
2. **Select Option 4-Non Financial Application Menu. Transmit.**
3. **Select Option 26-Individual Disability. Enter "u" for update, case number and person number. Transmit.**
4. **Complete the Individual Disability (AEDIS) screen. Transmit.**
5. **Update the AEGNFS (ESPAS, VIEW, FSET) screen for the disabled person. Transmit. The 60-month counter screen should appear. If it does not, follow the remaining steps.**
6. **From the ADAPT Main Menu select Option 3, Option 4, Option 34- 60 month clock. Press f8, (help screen) and scroll until you come to the table TCLOCK.**
7. **Scroll down and select the appropriate code. Transmit.**
8. **Enter "Y" in the AESANC field at the bottom right hand side of the screen. Transmit. Review the AESANC screen for a Period of Ineligibility (POI) for the 60-month clock. If there is no POI completed for the 60-month clock, transmit.**
9. **Run EDBC.**

When the client submits a new application after the receipt of 60 months of TANF, follow the steps below:

1. **From the screen AEDEM4 (Individual Demographic Information 4) enter Y in the field for disability. This will queue the Individual Disability Screen AEDIS.**
2. **Complete the AEDIS screen. Transmit.**
3. **Complete the AEGNFS (ESPAS, VIEW, FSET) screen with the appropriate code. Transmit. Complete the AEVIPP screens.**
4. **On the AE60 month counter screen, Counter for 60-Month TANF Limit, enter " y" in the counter field.**
5. **For reason code, enter a question mark in the field or press f8, (help screen). Scroll down until you see the table TCLOCK.**

6. **Select the appropriate code and transmit.**
7. **Enter a "y" in AESANC field at the bottom right hand corner of the screen. Transmit. The AESANC screen will appear. (AESANC can also be accessed from the ADAPT Main Menu by selecting Option 3, Option 4, Option 16, "u " for update case # and person number.)**
8. **Enter the date for the end of the POI for the 60-month clock for everyone on the case in AESANC. Be sure to end the POI for the Sixty Month Clock and not an IPV.**
9. **For the End Reason, press F8 and select "END" End of Sanction. Transmit.**
10. **Run EDBC if there are no other screens to complete.**

Rescinding a closure after 60 months are already on the clock, because the client is physically or mentally incapacitated or a relative in the home is incapacitated for whom the caretaker is providing care on a substantially continuous basis. For this process, 60 months have to already be on the clock.

1. **Select Option 4 Case Utilities. Transmit.**
2. **Select Option 4, Rescind a Program.**
3. **Enter "U" for Access and case number. Transmit.**
4. **Enter "TA" for program.**
5. **Enter 63-Verified Physical Disability, 64- Verified Mental Disability, or 67-Caretaker of Disabled Relative. Transmit. This will put the case in pending.**
6. **From the ADAPT Main Menu select Option 3-Application Entry, Option 4, and Option 25.**
7. **Enter a "Y" in the field for Disabled for the person that is disabled. Complete the Individual Disability (AEDIS) screen. Transmit. The 60-month clock should appear.**
8. **Enter "Y" for Decrease/Increase Counter.**
9. **Use F8 for the help screen to select the appropriate disability code.**
10. **Enter "Y" for AESANC screen. Transmit.**
11. **End date the POI for the 60 month and enter a reason. Enter a question mark in the reason field. Select END. Be sure to end the POI for the Sixty Month Clock and not an IPV. Do this for everyone on the case who will be receiving benefits. Transmit.**
11. **Make sure information is correct on all other screens and transmit.**
12. **Run EDBC.**

OMB No. 1615-0101; Expires 06/30/08

Department of Homeland Security
U.S. Citizenship and Immigration Services

SAVE

G-845S, Document Verification Request

Section A. To Be Completed by the Submitting Agency

To: **U.S. Citizenship and Immigration Services (USCIS)**

From: Typed or Stamped Name and Address of Submitting Agency

Attn: **Immigration Status Verification Unit**

(USCIS may use above address with a No. 10 window envelope)

1. Alien Registration Number or Form I-94 Number
2. Applicant's Name (Last, First, Middle)
3. Nationality
4. Date of Birth (mm/dd/yyyy)
5. U.S. Social Security Number
6. Verification Number
7. Photocopy of Document Attached.
   (If printed on both sides, attach a copy of the **front and back**.)
   Other Information Attached *(Specify documents)*

8. *(Benefit)*	(Your Case Number)
☐ TANF	
☐ Education Grant/Loans/Workstudy	
☐ Food Stamps	
☐ Housing Assistance	
☐ Medicaid/Medical Assistance	
☐ Unemployment Insurance	
☐ Employment Insurance	
☐ **Other** *(specify)*	

9. Name of Submitting Official
10. Title of Submitting Official
11. Date (mm/dd/yyyy)
12. Telephone Number ( )

Section B. To Be Completed by USCIS

USCIS RESPONSES: From the documents or information submitted and/or a review of our records, we find that:

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

USCIS Stamp

Form G-845S (Rev.05/16/08) N

Comments

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

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

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

"PRUCOL"

For Purposes of Determining Only. If Alien Is Permanently Residing Under Color of Law!

☐ **16.** USCIS is actively pursuing the removal of an alien in this class/category.

☐ **17.** USCIS is not actively pursuing the removal of an alien in this class/category at this time.

☐ **18.** Other.

Instructions

1. **Submit copies (*front and back*) of alien's original documentation.**
2. **Make certain a *complete return address* has been entered in the "From" portion of the form.**
3. The Alien Registration Number (A-number) is the letter "A" followed by a series of seven, eight or nine digits. The number found on Form I-94 may also be recorded in the block. (Check the front and back of the Form I-94 document. If the A-number appears, record that number when requesting information, instead of the longer admission number, because the A-number refers to the most integral record available.)
4. If Form G-845 is submitted without a copies of the applicant's original documentation, it will be returned to the submitting agency without any action taken.
5. Address this verification request to the local office of U.S. Citizenship and Immigration Services.

Form G-845S (Rev. 05/16/08) N Page 2

EXAMPLE #1

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

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

$307.00	SOA for 3 persons
- 240.00	SOA for 2 persons
$67.00	Amount of SOA reduction

Step (2) Calculate 25% reduction:

.25 x **$307** = **$76.75**

Step (3) Calculate additional penalty amount:

$76.75	25% reduction
- 67.00	SOA reduction
$9.75	Additional penalty amount

Step (4) Net payment calculation:

$240.00	SOA for 2 persons/Grant amount
- 9.75	Additional penalty
$230.25	Net payment
$230.00	Actual Payment Amount

EXAMPLE #2

A family residing in **a** Group II **locality** has been receiving benefits in the amount of **$267** for two persons (the mother and one child). The mother is determined not to be cooperating, without good cause, and must be removed from the grant. The calculation of the new grant amount is as follows:

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

$267.00	SOA for 2 persons
- 182.00	SOA for 1 person
$85.00	Amount of SOA reduction

Step (2) Calculate 25% reduction:

.25 X **$267** = **$66.75**

EXAMPLE #2 - Continued

Step (3) Calculate additional penalty amount:

$66.75	25% reduction
- 85.00	SOA reduction
$0.00	Additional penalty amount

Step (4) - Net payment calculation:

$182.00	SOA for 1 person/Grant amount
- 0.00	Additional penalty
$182.00	Net payment

EXAMPLE #3

A family residing in **a** Group III **locality** is composed of the mother and her four children. The mother receives $120 monthly in countable unearned income. TANF benefits are currently **$444** (**$564 SOA** - $120 income). The mother is determined not to be cooperating, without good cause, and must be removed from the grant.

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

$444.00	**($564.00**	SOA for 5 persons - $120.00 Countable income)
- 354.00	**($474.00**	SOA for 4 persons - $120.00 Countable income)
$90.00		

Step (2) Calculate 25% reduction:

.25 X **$444** = **$111.00**

Step (3) Calculate additional penalty amount:

$111.00	25% reduction
- 90.00	SOA reduction
$21.00	Additional penalty amount

Step (4) Net payment calculation:

$474.00	SOA for 4 persons
- 120.00	Countable income
$354.00	Grant amount

$**354.00**	Grant amount
- 21.00	Additional penalty
$333.00	Net payment

EXAMPLE #4

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

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

$599.00	Maximum payment - SOA for 6 persons exceeds maximum
-564.00	SOA for 5 persons
$35.00	Amount of SOA reduction

Step (2) Calculate 25% reduction:

.25 X **$599** = **$149.75**

Step (3) Calculate additional penalty amount:

$149.75	25% reduction
- 35.00	SOA reduction
$114.75	Additional penalty amount

Step (4) Net payment calculation:

$564.00	SOA for 5 persons/Grant amount
-114.75	Additional penalty
$449.25	Net payment
$449.00	**Actual Payment Amount**

EXAMPLE #5

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

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

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

$240.00	SOA for 2 persons

EXAMPLE #5 - Continued

Step (2) Calculate 25% reduction:

.25 X **$240** = **$60.00**

Step (3) Net payment calculation:

$240.00	SOA for 2 persons/Grant amount
- 60.00	Penalty
$180.00	Net payment

If the caretaker provides her SSN while she is still subject to a penalty due to noncooperation with DCSE, the grant amount must be recalculated as follows:

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

$307.00	SOA for 3 persons
-240.00	SOA for 2 persons
$67.00	Amount of SOA reduction

Step (2) Calculate 25% reduction:

.25 X **$307** = **$76.75**

Step (3) Calculate additional penalty amount:

$76.75	25% reduction
- 67.00	Amount of SOA reduction
$9.75	Additional penalty amount

Step (4) Net payment calculation:

$240.00	SOA for 2 persons/Grant amount
- 9.75	Additional penalty
$230.25	Net payment
$230.00	Actual payment amount

EXAMPLE# 6

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

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

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

$182.00 SOA for 1 person

Step (2) Calculate 25% reduction:

.25 X **$182** = **$45.50**

Step (3) Net payment calculation:

$182.00	SOA for 1 person/Grant amount
- 45.50	Penalty
$136.50	Net payment
$136.00	Actual payment amount

EXAMPLE #7

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

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

$465.00 Maximum payment - SOA for 8 persons ($625) exceeds maximum
$465.00 Maximum payment - SOA for 7 persons ($557) exceeds maximum

Because the SOAs are above the maximum payment amount of **$465**, there is no reduction when the caretaker is removed.

Step (2) Calculate 25% reduction:

.25 X **$465** = **$116.25**

EXAMPLE #7 – Continued

Step (3) Calculate additional penalty amount:

$116.25	25% reduction
- 0.00	SOA reduction
$116.25	Additional penalty amount

Step (4) Net payment calculation:

$465.00	SOA for 7 persons **($557)** exceeds maximum. Use maximum.
-116.25	Additional penalty
$348.75	Net payment
$348.00	Actual payment amount

EXAMPLE #8

A family of four - a mother, her son, her daughter who is a minor caretaker, and the daughter's baby - apply for TANF. The family resides in a Group II locality and has no countable income. The mother cooperates with DCSE, but her daughter, the minor caretaker, refuses, without good cause, to cooperate in securing support for her child. (Note: The minor caretaker does not claim that the father of the baby is unknown, and so cannot sign the ATL.) She is ineligible to be included on the grant. (See 201.10.C regarding cooperation requirements for a minor caretaker). The mother, son, and the daughter's baby are eligible for benefits and the grant is calculated as follows:

Step (1) Calculate reduction by removing the minor parent's needs:

$401.00	SOA for 4 persons
-336.00	SOA for 3 persons
$65.00	Amount of SOA reduction

Step (2) Calculate 25% reduction:

.25 X **$401** = **$100.25**

Step (3) Calculate additional penalty amount:

$100.25	25% reduction
-65.00	SOA reduction
$35.25	Additional penalty amount

Step (4) Net payment calculation:

$336.00	SOA for 3 persons/Grant amount
35.25	Additional penalty
$300.75	Net payment
$300.00	**Actual payment amount**

EXAMPLE #9

A non-parent caretaker in a Group II locality receives TANF for one child. The non-parent caretaker is not in the AU. There is no countable income. The Eligibility Worker is notified of the caretaker's failure, without good cause, to cooperate with DCSE. Calculate the revised grant amount as follows:

Step (1) **$182.00** SOA for 1 person

Step (2) Calculate 25% reduction:

.25 X **$182** = **$45.50**

Step (3) Net payment calculation:

$182.00	SOA for 1 person/Grant amount
- 45.50	Penalty
$136.50	Net payment
$136.00	Actual payment amount

EXAMPLE #10

A non-parent caretaker in a Group II locality receives TANF for one child. The non-parent caretaker is not in the AU. The child receives $50 monthly in countable unearned income. The Eligibility Worker is notified of the caretaker's failure, without good cause, to cooperate with DCSE. Calculate the revised grant amount as follows:

Step (1) **$182.00** **SOA for 1 person**

Step (2) **Calculate grant amount:**

$182.00	**SOA for 1 person**
- 50.00	**Countable unearned income**
$132.00	**Grant Amount**

Step (3) **Calculate 25% reduction:**

.25 X $132.00 = $33.00

Step (4) **Net payment calculation:**

$132.00	**Grant amount**
- 33.00	**Penalty**
$ 99.00	**Net payment**

203.1 Emergency Assistance – Emergency assistance may be provided to needy families with children who are eligible for TANF or are receiving TANF (including recipients whose TANF case is currently suspended due to a VIEW sanction), when the family has experienced a natural disaster or a fire which has destroyed items necessary for maintaining the household or the home itself. Natural disasters may include, but are not limited to, a tornado, hurricane, or flood. The EW should note that the applicant does not simply declare an event a disaster.

The application for Emergency Assistance must be made no later than 30 days from the date the disaster or fire occurred. If the applicant has been hospitalized during the 30 day period following the disaster or fire, the application for emergency assistance must be made within 60 days from the date the disaster or fire occurred.

Conditions of Eligibility/Categorical Eligibility:
When the family has experienced a natural disaster or fire within the timeframes listed above, and all of the following conditions exist, EA must be granted immediately:

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

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

C. The child, and all members of his family for whom assistance is provided must be a citizen of the United States or, if an alien, meet requirements, specified in Section 201.7. A child may be eligible for or receive TANF or Emergency Assistance even when other members of the family are ineligible.

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

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

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

203.2 EMERGENCY ASSISTANCE FOR DISASTER OR FIRE

A. NEEDS COVERED - Emergency Assistance shall be used to cover an applicant's immediate needs resulting from a disaster or fire. The case record must include documentation that the disaster or fire occurred and the date of the event. The immediate needs which can be covered include items such as food, shelter items, clothing, repair or replacement of household equipment which has been destroyed or rendered unusable and moving or storage of household equipment.

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

To determine eligibility for Emergency Assistance, the case will be screened at 185% of the **Standard of Assistance** if the applicant is not currently a TANF recipient. (If the applicant is currently receiving TANF assistance, the screening is not necessary.) The EW will evaluate all income that is available to the AU to determine if the income will meet all of the AU's needs. If the available income will not meet all of the AU's needs, EA may be granted to meet the unmet needs, up to the $500 EA maximum.

Example 1: A case passes the 185% screening and is otherwise eligible. Current income is used to pay rent, utilities, etc., and there is $100 remaining to cover the emergency. In this case, EA will be issued for $400.

Example 2: A case passes the 185% TANF income screening and is otherwise eligible. Current income is used to pay rent, utilities, etc., and there is $00.00 remaining to cover the emergency. In this case, EA will be issued for $500.

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

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

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

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

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

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

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

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

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301.1 GENERAL PROVISIONS - The Code of Virginia, Section 63.1-110, provides that the "The State Board shall adopt rules and regulations governing the amount of assistance persons shall receive under the provisions of this law.

In making such rules and regulations, the Board shall give due consideration to significant differences in living costs in various counties and cities shall establish or approve such variations in monetary assistance standards for shelter allowance on a regional or local basis, as may be appropriate in order to achieve the highest practical degree of equity in public assistance grants.

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

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

302.1 DEFINITION OF THE STANDARD FILING UNIT - For purposes of ADAPT, the group of individuals whose income must be considered in determining the assistance unit's eligibility and grant amount is referred to as the standard filing unit. This includes children and parents required to be in the assistance unit; essential persons; individuals whose income is subject to deeming; and, when assistance is requested, a caretaker-relative other than the parent.

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

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

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

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

3. guidance at Section 302.8 A. regarding minor parents requires more than one caretaker; or

4. both natural or adoptive parents of at least one child are living in the home and the family is in financial need. Note: In households that include both natural parents and at least one child in common residing in the home, paternity must be established before the putative father can be included as a caretaker on the TANF grant (See Section 201.10 A.).

In situations where both parents are in the home and one parent is a **court** convicted offender **serving a sentence while living at home, both parents should be coded as "PR" on the AECOMP screen in ADAPT.**

302.4 DEFINITION OF PAYEE - In TANF, the payee is the parent or other relative who is responsible for supervision and care of the needy child(ren) but who is not included in the assistance unit. A relative would be a payee unless he/she meets the criteria in 302.7.E.

In situations where the parent of the eligible child(ren) is in the home and included in the assistance unit, another relative may be designated as the payee for the case if the local agency has determined that the relative, not the parent, is exercising primary responsibility for the care and control of the child(ren). (Refer to Section 502.4.A.1.c. concerning designation of payees.) In such situations, the relative may be included in the assistance unit only if he/she meets the requirements of an essential person (EWB) listed in Section 302.6.

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

302.6 PERSONS ESSENTIAL TO WELL-BEING (EWB) – A needy individual, **who is at least 18 years old, is** living in the home**, and** who is providing services which are essential to the well-being of the child(ren) on which TANF eligibility is based can be included in the assistance unit. Such individuals must be ineligible for assistance in a federal category in their own right.

A. Services which are considered essential are limited to:

1. Care for a disabled family member living in the home;

2. Provision of child care to enable the caretaker to:

a. Work outside of the home on a full-time basis (a minimum of 30 hours per week and earning at least minimum wage).

b. Participate in education or training full-time. With the exception of full-time high school attendance, participation must equal a minimum of 30 hours per week.

c. Participate in VIEW on a full-time basis as defined by the **program and** based on the specific VIEW assignment(s) and participation rate requirements. For job search/job readiness, EWB status based on the provision of child care will be limited to two payment months.

B. The client must request inclusion of an individual as an EWB. The EWB individual must be living in the same household as the assistance unit and must be providing an essential service which cannot be provided by any other individual in the household.

Note: The spouse of a caretaker who is not eligible for TANF assistance because he does not have an eligible child living in the home can be included in the assistance unit as an EWB if he provides an essential service and meets all other EWB criteria.

C. Eligibility for the EWB individual must be evaluated based on criteria at 302.7F and 302.8 which includes a requirement for citizenship or eligible alien status, and specifies that the individual be in need.

D. In the case of a disabled family member, the disability and the need for the EWB to be available on a substantially continuous basis (901.2) must be documented on a Statement of Required Presence of Caregiver form (032-03-0020) signed by a medical professional. A new Statement of Required Presence of Caregiver form must be completed annually, or at the end of the anticipated duration specified on the form, whichever occurs first.

If the disabled family member has been approved to receive Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI), a new Statement of Required Presence of Caregiver form must be completed annually.

E. Each case in which an applicant/recipient requests inclusion of an individual as a EWB must be reviewed by the Eligibility Supervisor. The worker must document the AECOMP comment screen with the full name and worker number of the supervisor and the date the supervisor approved an individual for inclusion as an EWB.

F. A EWB individual must be coded as an OA (Optional Adult-persons essential to well-being) on the AECOMP (Composition Grid) screen in ADAPT.

G. EWB individuals are exempt from VIEW participation and must be given a VIEW exemption code on the AEGNFS (VIEW/**SNAPET** Registration) screen in ADAPT.

- If the EWB individual is providing care for a child under 12 months, use exemption code V1.
- If a child 12 months of age or older needs care, use exemption code QQ (Exempt EWB).
- If the EWB is providing care for a disabled individual, use exemption code V7.

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

Individuals who must be included in the assistance unit: The TANF assistance unit will include the following individuals:

A. The natural or adoptive parent(s) who is living in the same home as the child for whom assistance is requested, unless otherwise indicated by **guidance** at 302.7.D.*

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

When the entire case is ineligible: If the agency is unable to determine categorical eligibility or payment amount due to the inability or refusal of the parent or caretaker to provide information about an individual required to be a member of the assistance unit, the entire AU must be found ineligible.

When the case is eligible but an individual must be excluded: In general, a case may be approved even though a condition of eligibility has not been met by a required member of the assistance unit. Sections 302.7C – 307.7F list individuals whose needs are not included on the grant, including individuals excluded for failure to meet a condition of eligibility. Those individuals will be assumed to be required members of the assistance unit and the following will apply:

1. In determining need for the assistance unit, the individual will be excluded.

2. In determining the amount of payment for the assistance unit, the income of the individual will be included.

The individual will continue to be excluded and the income will continue to be considered available to the assistance unit until both categorical eligibility and the conditions of eligibility are met. When both requirements are met, the needs of the individual will be included in the assistance unit. (Refer to Section 401.2.B.2.c.)

Exceptions: The entire household is ineligible for assistance, and the application must be denied, when an individual fails to sign the VIEW Agreement of Personal Responsibility (APR) when required to do so as a

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

condition of eligibility at reapplication. (See 901.5C). Also, when a case has been closed for non-cooperation with DCSE, a new application must be denied unless good cause for the non-cooperation can be determined, the applicant has cooperated, or the needed information has been received from another source. (See 201.10I)

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

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

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

Note: In some situations, it may be difficult to determine if family members live together or live separately but in the same dwelling. For example, a mother and her two children may live in the downstairs portion of a home while her ex-husband, his wife and child live upstairs. In determining whether the mother and her two children constitute a separate assistance unit, a determination must first be made that two separate mailing addresses, for example apartments A and B, or 1st and 2nd floors, exist. If separate mailing addresses exist, and other eligibility criteria are met, the mother and her child can be considered a separate TANF AU. If separate mailing addresses do not exist, the agency can consider the family a separate AU only if the mother can verify that the portion of the house in which she lives has an entrance separate from that of the other residents, and, at a minimum, separate bedroom, bathroom, and kitchen facilities.

Individuals who must be excluded from the TANF assistance unit.

C. **Children who are** not to be included in the assistance unit.

1. A child who is receiving SSI;

2. A child who is an alien whose needs are met by an individual sponsor or who has been in the U.S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.*

3. A child whose SSN has not been provided or application for an SSN has not been made. See 201.8 for the exception regarding a newborn child.

4. A child who receives an adoption assistance maintenance payment. **(Note: If adding the child and the adoption assistance maintenance payment will increase the TANF benefit amount, the child and the maintenance payment must be added.)***

5. A child who receives a foster care maintenance payment or **a child** whose needs are included in the foster care maintenance payment for his parent.*

6. A child whose citizenship or alien status has not been declared in writing according to Section 201.7 C.

7. A child subject to the family cap provision. (201.12)

8. A child not in compliance with the compulsory school attendance requirement. (201.3)

9. A child convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.**

10. A child fleeing to avoid prosecution or confinement or in violation of probation or parole.**

11. A child who is in a VIEW period of ineligibility.

12 A child whose caretaker is in a period of ineligibility due to the receipt of a diversionary assistance payment.

D. Parents who are not to be included in the assistance unit:

1. The parent(s), of an eligible TANF child(ren), who is receiving SSI and/or an Auxiliary Grant.

2. The parent who is not (1) a U. S. citizen or (2) an eligible alien.***

3. A parent who receives an adoption assistance maintenance payment on his own behalf up to age 21. Exception: A parent who receives an adoption assistance maintenance payment must be excluded when adding that parent to the assistance unit and counting the maintenance payment reduces the TANF benefit. However, that parent must be included in the assistance unit when the benefit will be increased by adding that parent and his income.***

* 45 CFR 233.51
** Public Law 104-193
*** Public Law 101-508 (OBRA 1990)

4. The parent who refuses to cooperate in identifying the noncustodial parent, establishing paternity, or obtaining support by failing to comply with any of the requirements defined in 201.10. This exception applies until compliance with the requirements of cooperation in 201.10 is met.

5. The parent who is a foster care child.

6. The parent whose SSN has not been provided or application for an SSN has not been made.

7. The parent who is an alien whose needs are met by the individual sponsor.

8. The parent who is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.*

9. The parent who is found to have committed an IPV and disqualified according to Section 102.3.

10. The parent whose citizenship or alien status has not been declared in writing according to Section 201.7.C.

11. The parent whose needs are met by her spouse, the stepparent of the eligible children, living in the home.

12. The minor parent not in compliance with the compulsory school attendance requirement in Section 201.3.

13. The parent convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or SNAP benefits in two or more states and it is within ten years of the date the individual was convicted.**

14. The parent convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.**

15. The parent that failed to report to the local agency in accordance with Section 401.2.B.2.a.3 after it became clear that the minor child would be absent from the home for 60 consecutive days.

16. The parent that is fleeing to avoid prosecution or confinement or that is in violation of probation or parole.**

17. **The putative father except in the following situations:**
when a court has ruled that a legal father is not the father of the child and the child's paternity has been established by DCSE, or

* 45 CFR 233.51
** Personal Responsibility and Work Opportunity Reconciliation Act of 1996

- **when a court has ruled that a legal father is not the father of the child and both the putative father and the child's mother have signed an Acknowledgement of Paternity.** See Section 201.10A.

E. A caretaker/relative (other than the parent) who requests assistance is not included when:

1. He is not in need.

2. He is receiving SSI and/or an Auxiliary Grant.

3. He is not (1) a U. S. citizen or (2) an eligible alien.*

4. His needs are met by a spouse living in the home.

5. He refuses to cooperate in identifying the parents, establishing paternity, or obtaining support by failing to comply with any of the requirements defined in 201.10. This exception applies until compliance with the requirements of cooperation of 201.10 is met.

6. He is ineligible for a specified period of time based on receipt of a lump sum. (See 305.4.C.)

7. The caretaker/relative's SSN has not been provided or application for an SSN has not been provided.

8. He is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.**

9. He is found to have committed an IPV and is disqualified according to Section 102.3.

10. His citizenship or alien status has not been declared in writing according to Section 201.7.C.

11. The caretaker/relative is convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or SNAP benefits in two or more states and it is within ten years of the date the individual was convicted.*

12. The caretaker/relative is convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.*

13. The caretaker/relative failed to report to the local agency by the end of the fifth day after it became clear that the minor child would be absent from the home for 60 consecutive days.

* Personal Responsibility and Work Opportunity Reconciliation Act of 1996
** 45 CFR 233.51

14. The caretaker/relative that is fleeing to avoid prosecution or confinement or that is in violation of probation or parole.*

Note: The spouse of the caretaker/relative cannot be included in the assistance unit as second caretaker unless the spouse is the parent of an eligible child residing in the home.

F. **An individual** for whom assistance is requested on the basis of providing services essential to the child's well-being (EWB) **is** not included when:

1. He is not providing a service identified in Section 302.5.

2. He is not in need.

3. He is receiving SSI and/or an Auxiliary Grant.

4. He is not (1) a U. S. citizen or (2) an eligible alien.*

5. The EWB's SSN has not been provided or application has not been made for such SSN.**

6. He is ineligible for a specified period of time based on receipt of a lump sum. (See 305.4 C)

7. He is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.***

8. He is eligible for assistance in a federal category.

9. He is found to have committed an IPV and is disqualified according to Section 102.3.

10. His citizenship or alien status has not been declared in writing according to Section 201.7.C.

11. He is not in compliance with the compulsory school attendance requirement. Refer to Section 201.3.

12. The EWB is convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or SNAP benefits in two or more states and it is within ten years of the date the individual was convicted.*

* Personal Responsibility and Work Opportunity Reconciliation Act of 1996
** 45 CFR 205.52
*** 45 CFR 233.51

13. The EWB is convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.*

14. The EWB is fleeing to avoid prosecution or confinement or is in violation of probation or parole.*

G. In Emergency Assistance - The assistance unit includes:

1. In cases of natural disaster or fire, any member of the child's family living in the home and other nonrelated member of the household.

2. In cases of total loss of earnings, those persons who are living in the home related to the child by birth, marriage, or adoption, provided they meet the citizenship or alienage requirements.

302.8 FORMING THE COMPLEX ASSISTANCE UNIT - The most common type of assistance unit consists of one caretaker/relative and child(ren) living in a household. The following guidelines have been established to aid in determining who shall be included in an assistance unit when the household contains complex family situations:

A. Minor Parent(s) - A minor parent is an individual under 18 years of age who is the natural parent of a child. A senior parent is a parent of the minor parent. Minor parents must meet school attendance requirements in order to have their needs included in the grant.

An unmarried minor parent, for purposes of TANF policy, is a minor who is single, separated, or divorced. A married minor parent is a minor who is married and living with his/her spouse.

*Personal Responsibility and Work Opportunity Reconciliation Act of 1996

See Section 201.10 and 201.10.C.2. regarding cooperation with DCSE, Section 901.2 regarding the VIEW exemption criterion of caring for a child under 12 months of age and Section 401.1D regarding who must complete the application in a minor caretaker household.

In all instances when assistance is requested for the child of a minor parent, the minor parent must also be included in the assistance unit. (Note: the child of a minor parent does not have to be included in the assistance unit if assistance is requested only for the minor parent and siblings of the minor parent, if any).

When the minor parent and her child are the only children in the assistance unit, the case must be closed effective the month following the month the minor parent turns 18. (Exception: If the minor parent turns 18 on the first of the month, the case must be closed for the birthday month.) The 18 year-old may then apply for assistance for herself and her child, and, if approved, will be the caretaker on the new case and the TANF benefits will be issued in her name.

An assistance unit in which the minor parent is included as the only child on the case, but which does not include the minor parent's child, will be closed effective the month following the month the minor parent turns 18 (unless the case must be closed for the birthday month because the minor parent turns 18 on the first day of the month). Exception: If the minor parent is enrolled in secondary school or a vocational/ technical program which she is expected to complete prior to, or in the same month as, her 19th birthday, the case may remain open until that time. (See 201.2)

1. Unmarried Minor Parent Living with Needy Parent(s) or Other Relative(s)

   a. Minor Parent Living With One Needy Parent or Other Relative

      1. Cases in which the minor parent and her child live with a needy senior parent (including a step-parent), or other relative, will be formed with the needy parent or other relative as caretaker, and the minor and her child as children. (Senior Parent/Other Relative = PR; Minor Parent = PC; Minor's Child = PC). The TANF **payment** will be in the name of the senior parent or other caretaker relative. Any siblings who have applied for or are receiving assistance will be part of the same assistance unit.

      2. Cases in which assistance is requested for the minor parent, but not for the minor parent's child, and the senior parent (including a step-parent) or other relative is needy, will be formed with the senior parent or other relative as the caretaker and the minor parent as a child. (Senior Parent/Other Relative = PR; Minor Parent = PC). The minor's child does not have to be included in the assistance unit. The TANF **payment** will be in the name of the senior parent or other relative. Any siblings of the minor parent who have applied for or are receiving assistance will be part of the same assistance unit.

3. When assistance is requested for the minor's child, but not for the minor parent, and the minor parent is living in the home, both must be included in the assistance unit. The case will be formed with the needy senior parent (including step-parent) or other relative as caretaker and the minor and minor's child as children. (Senior Parent/Other Relative = PR; Minor Parent = PC; Minor's Child = PC). The TANF benefits will be in the name of the senior parent or other relative. Any siblings of the minor parent who have applied for or are receiving assistance will be part of the same assistance unit.

b. Minor Parent Living With Both Needy Parents

When assistance is requested for an unmarried minor parent and the minor's child, and both senior parents are in the household and are needy, form the case with both needy senior parents as caretakers and both the unmarried minor parent and the minor's child as children. (Senior Parent = PR; 2nd Senior Parent = PR; Minor Parent = PC; Minor's Child = PC). The TANF benefits will be in the name of one of the senior parents. If the second senior parent is a step-parent, he/she can be included in the assistance unit as a PR only when he/she is the parent of an eligible child residing in the home.

Note: If the natural senior parent is disabled, a step- parent may be included in the home as an OA if he/she meets EWB criteria (and he/she is not the parent of an eligible child residing in the home).

c. Minor Parent Living With Needy Relative and Relative's Spouse

When assistance is requested for an unmarried minor parent and the minor's child living with a relative and relative's spouse, and both the relative and spouse are needy, form the case with the needy relative as the caretaker. The spouse of the needy relative cannot be included as a PR, but can be included as an EWB if he/she meets EWB criteria. (Other Relative = PR; Minor Parent = PC; Minor's Child = PC). The TANF check will be in the name of the caretaker relative.

2. Unmarried Minor Parent Living with Parent(s) or Other Relative(s) Who is Not Needy or is Not Requesting Assistance

a. Minor Parent Living with Parent Who is Not Needy or is Not Requesting Assistance

When assistance is requested for an unmarried minor parent and the minor's child, and the senior parent is not needy or does not request assistance, form the case with the senior parent as an excluded caretaker and both the minor parent and the minor's child as children. (Senior Parent = XA; Minor Parent = PC; Minor's Child = PC). The TANF benefits will be in the name of the excluded senior parent. A senior parent cannot be treated as an excluded adult if any siblings of the minor parent have applied for or are receiving assistance.

b. Minor Parent Living with a Relative Who is Not Needy or Who is Not Requesting Assistance

When assistance is requested for an unmarried minor parent and the minor's child, and the relative is not needy or does not request assistance, form the case with the relative as a caretaker not requesting assistance. The minor parent will be included as a child. The case will be formed with the relative as NR and protective payee, the minor parent as a child, and the minor's child as a child. (Minor parent, coded as child = PC; Minor's Child = PC; Caretaker Relative = NR). The TANF benefits will be in the name of the protective payee, the NR relative.

3. Unmarried Minor Parent Living with a Person Standing In Loco Parentis (See Definitions of *in loco parentis* at 201.5A and 201.5D).

When assistance is requested for an unmarried minor parent and the minor's child by a person standing in loco parentis, form the case with the minor as the parent, and the minor's child as a child. (Minor parent = PR; Minor's Child = PC). The person standing in loco parentis will not be part of the assistance unit. The TANF benefits will be issued in the name of the protective payee, the person standing in loco parentis.

4. Married Minor Parents

A married minor parent is a minor who is married and living with his/her spouse. A married minor parent living with a spouse is not eligible for assistance as a minor caretaker. If the minor parent and spouse are eligible for assistance, the case will be established as a regular TANF or TANF-UP case.

Note: If a married minor parent, spouse, and child are living with the parent of the minor parent, that parent's income is not counted when determining the eligibility of the minor parent's TANF or TANF-UP household.

B. Households with Multiple Groups of Children - A group of children can be a single child, or natural or adoptive siblings, or other children in a household. When the household consists of more than one group of children the determination of which children will comprise one assistance unit is based on legal responsibility. A natural or adoptive parent is the only person who has legal responsibility for a child.

Children for whom the applicant has legal responsibility will make up one assistance unit. All other children in the home for whom assistance is requested will make up a second assistance unit. If the applicant does not have legal responsibility for any of the children, there will be only one assistance unit. (Exception: While a senior parent has legal responsibility for the minor parent, a household consisting of a needy senior parent, a minor parent, and the minor parent's child will make up one assistance unit. If the needy senior parent requests assistance for siblings of the minor caretaker, those children, if eligible, will be included in the same assistance unit).

When the household consists of a married couple who each have a child(ren) of their own by a previous relationship and both parents request assistance for their child(ren), there will be one assistance unit with two caretakers. In the event there is a child(ren) born to the union of this couple, that child(ren) must be included in the assistance unit.

When a household consists of a man and woman cohabiting, each who have a child(ren) by previous relationships, there will be two separate assistance units. Should they have a child together, for whom paternity has been established, the child must be included in the assistance unit. The units must be merged as the new child is a sibling to both sets of children.

Note: When the woman is married to another man at the time of this child's birth, both of the men will be referred to DCSE. The man to whom she **is** married is the legal father and is considered the child's father until a court has determined that he is not. After the court has excluded the husband as the father, DCSE can proceed to determine the paternity status of the man named by the mother. The units must not be merged until paternity has been established by the court for the child in common.

When the household consists of a caretaker, his/her child(ren), and a child who is biologically related to the caretaker but has been adopted by someone other than the caretaker, there will be two separate assistance units. In order for the caretaker to receive assistance for the child who has been adopted, the child's adoptive parents cannot be in the home.

The requirement in 302.7 that all siblings of a child for whom assistance is requested must be included in the assistance unit applies to the multiple group households also.

EXAMPLE

A grandmother has two grandchildren who are siblings and a niece living with her. She states she needs assistance for one of the grandchildren. Because the children are siblings, however, application must be made for both of them. The niece is not required to be part of the assistance unit.

If the grandmother requests assistance for the niece, however, the niece will be included in the same AU provided she meets the eligibility requirements. If the niece has income, that income will be counted in determining eligibility for the entire TANF AU.

Only one AU can be established for the two groups of children because the grandmother does not have legal responsibility for any of the children.

303 – RESOURCES AFFECTING ELIGIBILITY – Repealed effective December 1, 2003.

304.1 STANDARDS OF ASSISTANCE - The State Board has established standards of assistance*, based on the size of the assistance unit, to be used in TANF cash payment cases.

Because of wide variation in shelter cost within the State, three groups of standards have been established reflecting this variation. Appendix 1 to Section 304 lists the localities in the State according to the group in which they fall.

The monthly standards of **assistance**, based on the number of eligible persons in the assistance unit and the locality group in which the assistance unit resides, are shown in Appendix 2 to Section 304.

The appropriate standard of assistance, less all countable income of the assistance unit, as specified in Section 305, is the amount of the monthly cash payment for an otherwise eligible assistance unit, except that the State Board has established a maximum payment. The maximum reimbursable payment for each locality group is shown in Appendix 2 to Section 304. Any locality wishing to meet the full budgetary deficiency, when this is in excess of the maximum reimbursable payment, may do so provided (a) the deficiency is computed on the basis of established standards, (b) the excess is paid from local funds and (c) the full deficiency is met in all TANF cases in the locality.

304.2 TOTAL ALLOWABLE INDIVIDUAL NEED - When it is necessary to determine whether one individual included in the TANF assistance unit is in need, the total amount allowed for his needs must be identified. This amount is his pro rata share of the appropriate standard of assistance for the assistance unit. The same procedure is used to determine whether or not a caretaker-relative other than the parent or an essential (EWB) person living in the home is in need and eligible for inclusion in the assistance unit. Once the caretaker- relative other than the parent is included in the assistance unit, he may continue to be eligible for TANF as long as his countable income (gross income less a standard deduction) is less than the current poverty level for one person. If his countable income exceeds the current poverty level for one person, he must be removed from the assistance unit.

When an individual is removed from the assistance unit, the TANF grant is recomputed on the basis of the standard of assistance specified for the number of persons remaining in the unit.

Code of Virginia, Section 63.1-110

304.3 MEDICAL EXAMS FOR TANF/VIEW RECIPIENTS – In some situations, it may be necessary to have a medical exam completed in order to determine if a client should be exempted from VIEW, or to assess the client's ability to work or participate in the program. The Medical Evaluation (form 032-03-0654) is used to secure this information. The medical examination must have been made no more than 90 days prior to the date the Medical Evaluation form was signed.

The Medical Evaluation form can be completed by a medical doctor, including a psychiatrist, or doctor of osteopathy, or by a licensed physician's assistant or nurse practitioner working under the auspices of a medical doctor or doctor of osteopathy. The form is to be completed by a medical professional with thorough knowledge of the condition(s) that are believed to limit or prohibit the client's ability to work or participate in VIEW. Typically, this is the doctor or other medical professional who is currently treating the client for the condition. If, however, in the opinion of the agency, the client's condition is such that it should be evaluated by a specialist, then the specialist should make the evaluation and complete and sign the form.

Medical exams necessary to determine exemption status for VIEW or to assess a VIEW participant's ability to work or participate in the program will be arranged through Medicaid when possible. When Medicaid coverage does not exist, the medical exam can be paid for with VIEW funds. The agency will pay for the first medical exam; the agency may pay for additional exams, but is not required to do so.

The agency may choose to request and pay for a 2nd evaluation from a medical professional whenever the 1st evaluation is deemed by the agency to be inadequate to determine the client's exemption status, or ability to work or participate, or is otherwise questionable.

TANF Match Payments – Removed Effective July 1, 2011

GROUPING OF LOCALITIES

GROUP I

Counties

Accomack
Alleghany
Amelia
Amherst
Appomattox
Bath
Bedford
Bland
Botetourt
Brunswick
Buchanan
Buckingham
Campbell
Carroll
Charles City
Charlotte
Clarke
Craig
Culpeper
Cumberland
Dickenson
Dinwiddie
Essex
Floyd
Fluvanna
Franklin
Frederick
Giles
Gloucester
Goochland
Grayson
Greene
Greensville
Halifax
Hanover
Henry
Highland
Isle of Wight
King & Queen
King William
Lancaster
Lee
Louisa
Lunenburg
Madison
Mathews
Mecklenburg
Middlesex
Nelson
New Kent
Northampton
Northumberland
Nottoway
Orange
Page
Patrick
Pittsylvania
Powhatan
Prince Edward
Prince George
Pulaski
Rappahannock
Richmond County
Rockbridge
Russell
Scott
Shenandoah
Smyth
Southampton
Surry
Sussex
Tazewell
Washington
Westmoreland
Wise
Wythe

Cities

Bristol
Buena Vista
Clifton Forge
Danville
Emporia
Franklin
Galax
Norton
Suffolk

GROUP II

Counties

Albemarle
Chesterfield
Henrico
Loudoun
Roanoke
Rockingham
Warren

Cities

Chesapeake
Covington
Harrisonburg
Hopewell
Lexington
Lynchburg
Martinsville
Norfolk
Petersburg
Portsmouth
Radford
Richmond
Roanoke
Virginia Beach
Williamsburg
Winchester

GROUP III

Counties

Arlington
Augusta
Caroline
Fairfax
Fauquier
James City
King George
Montgomery
Prince William
Spotsylvania
Stafford
York

Cities

Alexandria
Charlottesville
Colonial Heights
Falls Church
Fredericksburg
Hampton
Manassas
Manassas Park
Newport News
Poquoson
Staunton
Waynesboro

ASSISTANCE STANDARDS

GROUP I

Size of Assistance Unit	Standard of Assistance
1	**$151**
2	**240**
3	**307**
4	**372**
5	**439**
6	**494**
7	**557**
8	**625**
9	**683**
10	**748**
Each person above 10	**$65**

MAXIMUM REIMBURSABLE PAYMENT **$465**

ASSISTANCE STANDARDS

GROUP II

Size of Assistance Unit	Standard of Assistance
1	**$182**
2	**267**
3	**336**
4	**401**
5	**474**
6	**530**
7	**592**
8	**661**
9	**720**
10	**784**
Each person above 10	**$65**

MAXIMUM REIMBURSABLE PAYMENT **$503**

ASSISTANCE STANDARDS

GROUP III

Size of Assistance Unit	Standard of Assistance
1	**$254**
2	**339**
3	**409**
4	**474**
5	**564**
6	**617**
7	**682**
8	**751**
9	**810**
10	**873**
Each person above 10	**$65**

MAXIMUM REIMBURSABLE PAYMENT **$599**

305.1 INCOME ELIGIBILITY

In order to meet the income requirements for the TANF Program, the assistance unit's countable income must be screened at 185% of the standard of **assistance** (prospective determination) to determine the assistance unit's need. Once the assistance unit is determined to be in need, the eligibility worker must calculate the TANF payment to determine if eligibility exists for the assistance unit. In screening countable income at 185% and the standard of assistance in the prospective determination and in calculating the amount of the TANF payment, anticipated income arrived at by one of the method's listed in Section 305.1.B.2.a. is to be used.

A. Prospective Determinations (Screening at 185% and Standard of Assistance)

Income eligibility for all cases is based on a prospective determination which anticipates the total gross countable income of the assistance unit. The total gross countable income of the unit is screened at 185% of the standard of **assistance**. (Refer to Maximum Income Chart, Appendix 1 to Section 305.) If the income of the assistance unit is equal to or less than the maximum income level, income is screened at the standard of assistance, allowing income disregards when appropriate.

A prospective determination must be conducted on applications/reapplications and ongoing cases whenever a change becomes known to the agency.

The gross income anticipated to be received during the month following the month the change became known to the agency must be screened at both 185% and the standard of assistance to determine if eligibility for the next payment exists. If the prospective determination of anticipated income represents less **or** more than a full month's income, the second month following the month the change became known to the agency must also be screened prospectively at both 185% and the standard of assistance.

1. 185% Screening

Total gross countable income for this purpose includes all gross earned income of both adults and children in the unit; unearned income, such as net countable support, benefits, etc.; income of an excluded individual required to be in the unit; and any income deemed available to the assistance unit. The following income is disregarded when income is screened at 185%:

a. all income specifically disregarded in 305.4.A;

b. for TANF-UP, unemployment compensation benefits;

c. the earned income of a child (under age 18 or, if age 18, is scheduled to graduate no later than the month he/she turns 19) who is a full or part-time student.

If the income of the assistance unit exceeds 185%, the case is ineligible for a payment.*

Screening at the Standard of Assistance

The following procedures are applicable to the standard of assistance screening:

a. Applications, Including Persons Being Added to An Existing Assistance Unit

Once the total gross countable income of the assistance unit is determined to be less than or equal to 185% of **the standard of assistance**, income must then be screened at the standard of **assistance in order to allow** earned income disregards where applicable.

b. All AUs will be allowed the following deductions from earned income:

The standard deduction**, the same amount used in the standard deduction for the SNAP program, and 20% of the remainder is deducted from the gross earnings.*** (Refer to Section 305, Appendix 3, Step 2, and to Section 305.3.B.)

Assistance Unit	Standard Deduction
1-3 members	$155
4 members	$168
5 members	$197
6 or more members	$226

c. Ongoing Cases

Once the total gross countable income of the assistance unit is determined to be less than or equal to 185% of **the standard of assistance**, income must then be screened at the standard of assistance **in order to allow** earned income disregards where applicable.

d. The following income is disregarded when income is screened at the standard of assistance:

1) all income specifically disregarded in 305.4.A;

* 45 CFR 233.20(a)(3)(xiii)
** 22 VAC 40-295-60
*** 22 VAC 40-295-60

2) the earned income of a child **(under age 18 or, if age 18, is scheduled to graduate no later than the month he/she turns 19)** who is a full or part-time student.

If the assistance unit has income below the standard of assistance, the payment is calculated based on prospective budgeting.

B. Prospective Budgeting*

1. Budgeting Concept

In order to be eligible for TANF, a case must be eligible under income requirements. The amount of the payment which an assistance unit is eligible to receive will be calculated based on prospective budgeting.

Prospective budgeting is calculating the TANF payment using the anticipated income of the members of the assistance unit and the excluded persons required to be included in the assistance unit in the budget month. For purposes of determining the amount of the TANF payment and the amount of income to be counted, the payment month and budget month are the same.*

2. Income To Be Counted In Calculating the Payment

The payment is to be calculated using the methods listed below. The assistance unit's circumstances must be evaluated to determine which method(s) will provide the amount of income anticipated (best estimate) to be received in the payment month.

For purposes of determining the amount of income to be counted in calculating the payment, anticipated income means any income the applicant/recipient and local agency are reasonably certain will be received during the payment month. If the amount of income or when it will be received is uncertain, that portion of the assistance unit's income that is uncertain shall not be counted by the local agency.

"Reasonably certain" means that the following information is known:

- who the income will come from,
- in what month it will be received, and
- how much it will be (i.e., rate, frequency and payment cycle).

* 45 CFR 233.33

a. Methods Used To Anticipate the Income

For applications and reapplications, the income generally to be counted is the income verified for the calendar month prior to the month of application. For redeterminations, the income generally to be counted is the income verified for the month prior to the month of review. However, if the income for the prior month is not the amount anticipated to be received in the payment month, the Eligibility Worker must work with the assistance unit to determine how the correct amount can be anticipated. For changes, the Eligibility Worker must work with the assistance unit to determine the correct amount of income that can be anticipated for the payment month.

The following methods are to be used to anticipate the assistance unit's income when the prior month's income does not reflect the income anticipated for the payment month:

1) The Eligibility Worker shall take into account the income already received by the assistance unit during the application process and any anticipated income the assistance unit and local agency are reasonably certain will be received during the payment month. During the approval process, when calculating the grant amount for prior months, the Eligibility Worker shall use converted income which has been received by the assistance unit, to determine the correct amount of the grant, unless the income is for a partial month. If the household received less than a full month's pay, or if less than a full month's pay is to be counted, the exact amount of income is to be used.

2) If income fluctuates so much that the prior calendar month cannot by itself provide an accurate indication of anticipated income, a longer period of past time may be used if it will provide a more accurate indication of fluctuations in future income. If income is ongoing, anticipate by averaging income from the past pay periods.

   The Eligibility Worker may average income received in any number of pay periods immediately prior to application/review, using pay periods still appropriate to the customer's circumstances. The worker should select only the pay periods that will yield the most realistic estimate of income to be received.

If the assistance unit's income fluctuates seasonally, it may be appropriate to use the most recent season, rather than the calendar month prior to the month of application, as an indicator of future income. However, the Eligibility Worker should use caution in using income from a past season as an indicator of income now, since in many cases of seasonally fluctuating in-come, the income also fluctuates from one season in one year to the same season in the next year.

3) For migrant and seasonal farm worker assistance units, the judgment of the Eligibility Worker that income is reasonably certain to be received is to be based on formal or informal commitments for work for individual assistance units, rather than on the general availability of work in an area. Also, income should not be based on an assumption of optimum weather or field conditions.

4) Profit from the sale of livestock or cash crops, such as tobacco or peanuts, or from small businesses, such as but not limited to, vending stands, home beauty shops, or small grocery stores, is prorated on an annual basis or over the number of months in which the income is earned, whichever is appropriate. Federal farm subsidies are prorated over a 12- month period.

Guaranteed salaries paid under contract will be prorated over the period of the contract even though the employee elects to receive such payments in fewer months than are covered by the contract. When the contract earnings will be received monthly over a period longer than that of the contract, the earnings must be prorated over the number of months the income is anticipated to be received. Contract earnings are defined in 305.3.

Examples:

(a) A contract period is September 1993 - August 1994 (12 months). The customer chooses to receive the contract income over a 10-month period. The contract amount is divided by the contract period of 12 months to arrive at the monthly gross income.

(b) A contract period is November 1993 - June 1994 (8 months). The customer chooses to receive the contract income over the eight-month period. The contract amount is divided by eight months to arrive at the monthly gross income.

(c) A contract period is September 1993 - August 1994 (12 months). The customer receives the contract income over the 12-month period. The contract amount is divided by 12 months to arrive at the monthly gross income.

(d) A contract period is September 1993 - January 1994 (5 months). The customer receives the contract income monthly over a 12-month period. The contract amount is divided by the number of months in which the income is received (12).

In those cases where a contract specifies a set amount over the contract period, plus additional monies of an uncertain amount if additional work is available and done, only the base contract is prorated. Additional monies earned over and above the base contract are counted as income when they can be anticipated.

In those cases where a contract calls for no pay for those days not worked, the salary for those days should not be counted if it can be anticipated at the time that the prospective determination is made that certain days will be missed. Otherwise, the income calculation is to be based on the maximum salary. The client may then inform the local agency as days are missed. If the client reports a decrease in income within the month of the decrease, a supplemental payment is to be issued.

If the contract amount changes during the contract period, adjust the remaining months of the contract period. To determine the new monthly income amount, divide the new contract amount by the number of months used in the original calculation.

Example 1: A school bus driver's contract states that she will receive $1250 for the year, but that she will not be paid for days the school is closed or for days she is sick. When she applies on February 10, she has already missed three days for snow in the contract year and she was sick for two days. The contract reads that $10 will be deducted for each day not worked. The case is approved with income of $100 per month.

(1250 - 50 = 1200 1200 / 12 = $100)

Example 2: On April 5 the client reports that she missed April 3 and 4, which were not anticipated at the time of approval. The worker issues a $20 supplement for April.

Example 3: On December 11, the school bus driver reports that her contract will be increased by 10% effective January 1. The prospective income is recalculated for January's grant using the increased figure of $110. (1,200 X 1.1 = $1,320 $1,320 / 12 = $110)

b. How To Calculate the Monthly Amount

1) Whenever income is anticipated for each pay period in a given month, and is received on a weekly or bi-weekly basis, the Eligibility Worker shall convert the income to a monthly amount by:

(a) multiplying average weekly amounts by 4.3 and average bi-weekly amounts by 2.15; or,

Example 1:

The client's weekly pay for the prior month was:

$220.40
$175.80
$210.00
$195.70

To obtain a monthly amount, the Eligibility Worker multiplies the weekly average by 4.3.

$801.90 (total of the pay stubs) divided by 4 (number of paystubs) equals $200.48.

$200.48 x 4.3 = $862.06 monthly income. Example 2:
The client's bi-weekly pay for the prior month was:

$185.40
$209.50
$394.90

To obtain a monthly amount, the Eligibility Worker multiplies the bi-weekly average by 2.15.

$394.90 (total of the pay stubs) divided by 2 (number of pay stubs) equals $197.45.

$197.45 x 2.15 = $424.52 monthly income.

(b) using the exact monthly figure or an average per pay period times the actual number of pays if the assistance unit will receive less than a full month's pay. If actual income is used in any given calculation, it is the Eligibility Worker's responsibility to adjust the figure for subsequent months if the actual income varies.

Example:

The client's salary is $100 weekly. The pay does not vary. The client is paid every Friday.

The client reports she quit her job and will receive a final weekly paycheck on September 3. Since the client was paid for a partial month, the exact amount of $100 will be used.

Example:

The client reports she quit her job on June 21. She will receive a final bi-weekly paycheck on July 5.

For the month of May, she received $190 and $220 for a total of $410. This amount is divided by two (the number of pays) to determine the average bi-weekly pay of $205. $205 is used to calculate her July TANF payment.

2) Assistance units receiving monthly or semi-monthly income, such as state or federal payments or semi-monthly pay checks, must have the income assigned to the normal month of receipt, even if mailing cycles, weekends or holidays cause the income to be received in a different month.

For example, the applicant/recipient is employed and is paid semi-monthly on the first and sixteenth. Because June 1 falls on a Saturday, the client receives her June 1 paycheck on May 31. The Eligibility Worker will count the paycheck received May 31 as income for June.

3) For the on-line systems used to verify child support or unemployment benefits, mailing and processing days must be added to the payment dates shown to properly reflect the period of receipt for TANF purposes. Checks are prepared and mailed on the business day following the APECS disbursement date or the VEC warrant date. **Allow two mail days to determine the payment date and month of receipt. Allow two business days for electronic funds transfer payments to reach the designated debit card bank account to determine the payment date and month of receipt.**

Once the income has been verified, the payment is then calculated based on the anticipated income. (Refer to Appendix 3 to Section 305, Steps 3 and 4.) Ongoing payments will continue in the same amount until a change is reported or becomes known to the agency.

The case must be documented to reflect the method used to arrive at the anticipated income.

Eligibility must be determined for each month of the application period. Applicants may be ineligible for the month of application and eligible for the month following the month of application. Benefits must be denied for the month of application in ADAPT and granted for the month following the month of application.

Example #1: - On November 17, the worker processes an application dated October 29. The case is denied for October and November due to excess income; however, the case will be eligible for a December payment as the income ended in November. Therefore, the case is to be approved effective December 1.

Example #2: - On July 14, the worker processes an application dated June 1. The application was not processed within the 30-day application processing time frame due to the applicant being admitted to the hospital as a result of a stroke on the 28th day. Verification is received July 13. The worker determines that the case is eligible. The worker approves the case with July 1 as the beginning date of assistance.

Example #3: - On December 1, the worker processes an application dated November 13. The case is eligible for a payment for November and December but ineligible for a January payment as a result of full-time employment. A payment is to be issued for November and December, and the case is to be closed effective December 31.

C. Verification of Income (Earned and Unearned)

In order to establish income eligibility, verification of all income received or anticipated to be received monthly by the assistance unit is required at the time of application/reapplication, when adding individuals with income, at renewals, and when a change becomes known to the agency. When verification is required, the agency must notify the applicant/recipient of the necessary verification and allow the assistance unit 10 days to respond. The assistance unit has primary responsibility for verifying income; however, if needed, the worker must assist the household in obtaining any necessary verifications.

The assistance unit is not responsible for providing verification of reported unearned income for which verification is accessible to the local agency through systems of records. These records include SDX, SVES, SOLQ- I, and VEC inquiry of unemployment benefits. **The EW should** document **the date and results of the** searches **on comment screens within ADAPT**. **If the inquiry confirms that the individual does not have unearned income, the EW should document the results on the AEAUTA comment screen.** If the applicant/recipient fails to verify income either verbally or in writing**,** within 10 days of notification, guidance at 401.2.B.1. and 2. regarding substantiation of eligibility factors is to be followed.

If an individual has a disability that limits his ability to provide verification, the worker must inform such individual that the worker can help obtain any necessary verification, and if the individual requests help, or help was needed but not offered or provided, the agency cannot thereafter impose adverse actions related to the particular incident, on the basis that the individual failed to provide the verification in a timely fashion.

When verbal verification is obtained, the case record documentation should include the name and telephone number of the individual who provided the information, the date of contact, and the information obtained.

At each renewal, all income of the assistance unit must be verified, regardless of whether a change has been reported. If a change is identified, a prospective determination must be conducted in accordance with Section 305.1.A. to establish ongoing eligibility.

When a change in income occurs between renewals, a prospective determination must be conducted to establish ongoing eligibility.

When attempts to verify countable income prove to be unsuccessful because the person or organization that is to provide the verification fails to cooperate with the assistance unit and the local agency, and there are no alternate sources of verification available, the Eligibility Worker shall determine an amount to be used for TANF purposes based on the best available information. The case record must be documented to reflect the method used to arrive at the anticipated income.

In the above situation, the following verification will be considered the best available information:

1. a third party statement,
2. a collateral contact, or
3. as a last resort, the applicant's/recipient's written statement of the amount of income anticipated to be received in the payment month.

D. Handling Changes in Income (Earned and Unearned)

1. The assistance unit must report increases in income that place the assistance unit's monthly income above 130 percent of the federal poverty level based on assistance unit size.

The income limits are as follows:

Report Income Change When Household Income Exceeds These Amounts				
Household Size	Monthly Amount	Weekly Amount	Bi-Weekly Amount	Semi-Monthly Amount
1	**$1,276**	**$ 296.74**	**$ 593.48**	**$ 638.00**
2	**1,726**	**401.39**	**802.79**	**863.00**
3	**2,177**	**506.27**	**1,012.55**	**1,088.50**
4	**2,628**	**611.16**	**1,222.32**	**1,314.00**
5	**3,078**	**715.81**	**1,431.62**	**1,539.00**
6	**3,529**	**820.69**	**1,641.39**	**1,764.50**
7	**3,980**	**925.58**	**1,851.16**	**1,990.00**
8	**4,430**	**1,030.23**	**2,060.46**	**2,215.00**
Each additional Person	**+ $451**	**+ $104.88**	**+ $209.76**	**+ $225.50**

2. When a change in income is reported or becomes known, including changes not required to be reported to the agency, the worker must take the following steps:

   a. Document the case record regarding the rate and frequency of payment (i.e., weekly, biweekly, semi-monthly, monthly, etc.) and the payment cycle (i.e., on what day the client is paid). If, based on the information provided by the client, there is a decrease in benefits, income must be verified by the next renewal.

   b. When an increase in income occurs, conduct a prospective determination per Section 305.1.A based on information provided. If the prospective determination renders the case ineligible, close the case as soon as administratively possible, or if ineligibility is expected to exist for only one month the payment may be suspended.

      If the case continues to be eligible, calculate the payment reflecting the new or increased income. If the income anticipated to be received during the month following the month the change became known to the agency represents less/more than a full month's income, then the second month following the month the change became known to the agency must be calculated based on the amount of income anticipated to be received in that month.

      For increases in contract income, refer to Section 305.1.B.2.a.4.

   c. If a decrease in income occurs, the change must be reflected, based on information provided, in the following payment month. Verification must be provided by the second month after the change becomes known. (Refer to Section 503.9 for further guidance concerning underpayments.)

      For decreases in contract income, refer to Section 305.1.B.2.a.4.

E. Adding and Deleting Persons With Income

1. When adding/deleting a person with income, conduct a prospective determination per 305.1.A. If eligible, verify anticipated income and reflect the change in the appropriate payment month.

2. When deleting persons with income, income of persons being removed from the assistance unit will be deleted from consideration at the same time the individual is removed from the unit. Additionally, any income of a stepparent or parent (including the parent of a minor caretaker) who is not included in the assistance unit will be deleted for the month following the month the person leaves the home. In the case of a minor caretaker, income deemed from the minor's parent(s) will be deleted for the month following the month the minor caretaker attains the age of 18.

   Example #1 - One of three children is removed from the home by the court on July 15. This child receives Social Security of $75 per month. The August payment should not reflect the income and needs of the child who was removed.

   Example #2 - A stepparent moves out of the home on the 23rd of September. Any income deemed available to the unit should be deleted from the October grant calculation. A supplemental payment must be made if the income cannot be deleted from the October 1 payment.

3. When adding/deleting the income of excluded individuals required to be in the assistance unit, the income of any excluded individual required to be in the assistance unit will be treated the same as individuals who are included in the assistance unit and, in the case of earned income, earned income disregards are applicable.

   a. The income of an excluded individual will be deleted the month following the month that the person leaves the home or is no longer required to be in the unit.

   b. When an excluded individual gets an increase or decrease in income, the increase or decrease will be handled in accordance with Section 305.1.D.

F. Applicant's/Recipient's Reporting Responsibilities

The applicant/recipient must be advised according to Section 401.2.B.1. and 2. regarding verification requirements and action that may be taken if verification is not provided. Additionally, the worker must provide the applicant/recipient with information concerning:

1. Documents that constitute acceptable types of verification.

2. Changes that must be reported.

3. Time standards for reporting and acting on changes.

a. All required changes must be reported timely, within 10 calendar days from the date the change becomes known to the assistance unit but is reported timely if reported by the tenth day of the month after the change occurs.

If the recipient is uncertain of the exact date or amount of the change, then the 10-day reporting period begins the day the change occurs. The recipient is not required to have full knowledge of the change when reporting it to meet the 10-day requirement for timely reporting. For new employment, the 10-day period may begin as late as the first day of employment. Once the recipient reports a change, the EW must evaluate the information within 10 days for potential impact and request additional information and necessary verifications that address rate of pay, number of hours, and how often paid.

1. When a change will increase benefits, the verification required must be obtained prior to the second month following the change in order to reflect the change in that month. If the assistance unit does not provide verification, the assistance unit's benefits will revert to the original amount unless a refusal to cooperate is documented, in which case an advance notice must be sent to terminate the case. An advance notice is not required if benefits are reverted to the original level because verification was not received, and the assistance unit was so advised at the time of increase.

2. Whenever a change will decrease benefits, verification must be obtained prior to or at renewal.

3. When a change neither increases nor decreases benefits, required verifications must be obtained prior to or at renewal.

b. The worker is responsible for notifying the applicant/recipient when **income** must be verified. Income verification must be provided within 10 days of notification.

c. The worker must advise the applicant/recipient on the appropriate notice of the amount of gross income anticipated to be received, the net income counted in determining the payment, the payment month the net income will begin to be counted, and the changes that must be reported.

G. Timely Reporting Examples

Example 1: Mrs. Smith called the agency on April 27 to report that she accepted a job on April 22. She will begin this job on April 29; however, she does not know the number of hours she will work nor how much she will earn hourly. The worker informs Mrs. Smith on May 5 that she needs to provide the number of hours she will be working, the rate of pay and how often she will be paid to determine continued eligibility.

Did the recipient report timely? Yes. Mrs. Smith accepted the job on April 22, however, she will begin work on April 29. The latest this information could be reported timely is May 9.

Did the worker meet the 10-day time frame to act on the change (evaluate the information received and request additional information/verification)? Yes. The worker informed the recipient on May 5 of the information necessary to determine continued eligibility. The client has 10 days from the date requested to provide the information. The client provides the information on May 15. The worker must take action for the June 1 payment. If the information is submitted after May 15, the case must be suspended/closed.

Example 2: Mrs. Johnson calls the agency on September 25 to report that she began working a second job on that date. Mrs. Johnson knows she will work 15 hours a week at $5.15 an hour and will be paid every week. The worker tells Mrs. Johnson that she will need verification of this information by October 5. The case record is documented and the anticipated income entered in ADAPT.

Did the recipient report timely? Yes.

Did the worker meet the 10-day time frame to act on the change (evaluate the information received and request additional information/verification)? Yes. The worker requested verification of the reported change. Increased income may cause either a decrease in payment or termination. This change causes a decrease. The recipient has until the next renewal to provide verification. Once the worker has sufficient information, action must be taken to decrease the benefits using the recipient's information.

Example 3: Ms. Smith accepted a new job on September 10 and started working on September 13. She received her first pay check on September 22. On September 23, she comes into the agency to bring her first paycheck to her worker. Ms. Smith told her worker she did not know what her income would be until she received this check.

Did the recipient report timely? Yes. Changes must be made as soon as they are known to the recipient. For income, the change becomes known when the customer can give the worker sufficient information. At the latest, the 10-day time frame begins the day the recipient begins working. The recipient began working on September 13. Ten days from her first date of employment is September 23. The worker must evaluate the income and impact the November 1 payment.

305.2 INCOME TO BE COUNTED - For the purpose of determining the amount of payment for an assistance unit, it is necessary to deduct the net countable income from the monthly standard of assistance applicable to the assistance unit. Net countable income is all income, both earned and unearned, which is available or expected to be available to members of the assistance unit, except for that portion specifically disregarded.

EXCEPTIONS:

(1) Reimbursements for out-of-pocket expenses shall not be considered countable income. These expenses may include reimbursement for travel expenses, such as mileage; reimbursement to the caretaker of a child for child care expenses; reimbursements for expenses incurred as a volunteer, etc.

(2) Money which belongs to another person that is handled by the client to pay expenses for that person is not considered available to the assistance unit. Example: Mrs. C. has a son in the Army who is currently in Germany. He sends her $250 a month to pay his car payment of $250 a month. None of this money is to be considered as income to Mrs. C.

Example:

Mrs. X and Mrs. Y live in the same house which is rented in Mrs. X's name. Mrs. Y gives Mrs. X an established portion of the rent each month. Mrs. X adds her portion to Mrs. Y's and pays the rent. Since this is a "shared shelter" arrangement, Mrs. Y's portion of the rent is not considered income to Mrs. X.

Note: This **guidance** is not intended to replace roomer/boarder and property rental situations.

(3) The first $30 received by each individual in the assistance unit per calendar quarter for special occasions, such as birthdays, Christmas, etc., will be disregarded. Calendar quarters are January through March, April through June, July through September, and October through December. Any amount in excess of the $30 per quarter anticipated to be received will be counted as income in the payment month in which it is anticipated to be received.

There is some income that is not currently being received by the assistance unit but is considered available:

A. Support from a spouse or parent (natural, adoptive, or stepparent) living in the home is assumed to be available to the spouse and dependent children under 21 who are also living in the home** (305.4 E. and F.) except

* 45 CFR 233.20(a)(3)(iv)
** 45 CFR 233.20(a)(3)(vi)

that no part of an SSI or Auxiliary Grant payment or any income of a recipient of either program can be counted in determining the amount of an TANF payment, even though the applicant/recipient is the spouse of the needy caretaker or the parent of the eligible children.* When living together, the income of a minor caretaker's parent(s) will be deemed available to the minor caretaker's assistance unit until the minor care-taker reaches the age of 18, regardless as to whether the minor caretaker is excluded from the assistance unit, due to SSI receipt, or for any other reason.**

B. If an individual receives income or benefits such as, but not limited to, RR Retirement, other retirement benefits, Unemployment Compensation, Veterans' benefits, or Social Security benefits, the actual amount of the income or benefit received by the individual may differ from the gross amount to which the individual is eligible. Whether the gross or actual amount is counted for TANF purposes is based on the type of income or benefit reduction.

1. The gross amount of income or benefit, not the actual amount received by the individual, will be counted when:
- **the individual is clearly entitled to the benefit but chooses not to accept it;**
- **the income is from wages or benefits garnished by a third party; or**
- **a court has ordered that child support be withheld from the income or benefit (Note: Benefits from which child support can be withheld include, but are not limited to, Social Security benefits, Veteran's benefits, Unemployment benefits, and Worker's Compensation benefits. Supplemental Security Income (SSI) and public assistance benefits are exempt from child support claims based on federal and state law.)**

Example 1:
Mother applies for TANF for herself and one child. Mother is disabled and receives SSA. Mother's SSA check is reduced each month to pay a court-ordered child support obligation (court order states that the child support will be deducted from the SSA check). Mother is entitled to receive $200.00 but only receives $100.00. The agency will count the full $200.00 as income for the TANF AU.

Example 2:
Mother applies for TANF for herself and one child. Mother is disabled and receives SSA. Mother's SSA check is reduced each month to pay an IRS tax debt. Mother is entitled to receive $200.00 but only receives $100.00. The agency will count the full $200.00 as income for the TANF AU.

2. The actual amount of income or benefit received, not the gross amount for which the individual is eligible, will be counted as income when:
- **some, or all, of the income or benefit has been retained by the issuer due to overpayment or program non-compliance; or**
- **the TANF child is the beneficiary of the income but only a portion of the income is available to the caretaker.**

* Social Security Act, Section 402(a)(24)
** 45 CFR 233.20(a)(3)(xviii)

Example 1:
Mother applies for TANF for herself and one child. Mother has applied for Unemployment Insurance (UI)and is eligible for $100.00 per week. Mother is not receiving the UI payment because she has failed to complete the required weekly job search contacts. The agency will count $0 income per week as income for the TANF AU.

Example 2:
The mother applies for TANF for herself and a child who receives a SSA check in the amount of $500. The check goes to the father who does not live with the TANF assistance unit. He keeps $300 of the check and gives the balance to the mother. The $300 retained by the father is inaccessible to the child. The agency will count $200, the amount actually received by the mother, as income.

The agency has a responsibility to explore potential income sources and assist the applicant/recipient in developing them to a state of availability whenever possible.*

It is the responsibility of the recipient to report required changes to the agency within 10 calendar days from the date the change becomes known to the assistance unit. Changes required to be reported by the applicant, which occur after the interview but before the date of the Notice of Action to approve the case, must be reported by the assistance unit within 10 days.

There are some differences in the provisions for counting earned and unearned income. Therefore, when income is from property, the eligibility case record must clearly indicate the basis for determining whether it is earned or unearned income, that is, whether the individual produces it by his own efforts or is actively engaged in management. For example, income from room and board is considered earned income only when the individual is engaged in a commercial enterprise for profit. Regardless of whether the income is earned or unearned, it is the profit which is considered the gross income.

* 45 CFR 233.20(a)(3)(ix)

305.3 EARNED INCOME – Earned income is defined as income earned by an individual through the receipt of wages, salary, and/or commissions, or through profit from activities in which he is engaged as a self-employed individual.* Earned income includes pay for jury duty, severance pay, and vacation pay. Sick/disability pay from the employer or from employer obtained insurance is counted as earned income as long as the payment is made directly from the employer to the employee. If the payment is made from the insurance company to the employee, the income is counted as unearned income.

Note: income received from a supplemental sickness or disability insurance policy that was obtained solely by the employee (and payments are issued directly from the insurance company to the employee) will be counted as unearned income.

Self-employment is defined as a business, farming or commercial enterprise in which the individual receives income earned by his own efforts, including his active engagement in management of property. Income from property when the individual is not actively engaged or when no managerial responsibilities are involved is not considered earned income.** In addition, for TANF purposes, self-employment situations include, but are not limited to, domestic workers, companion service providers, and child care providers.

Contract earnings are defined as wages guaranteed by a contract. This does not include work on an hourly or piecework basis or self-employment. A guaranteed wage is one which is received by an individual employed on a contractual basis and paid over a period of time. Earnings of this nature will be prorated according to 305.1.B.2.a.4).

When income is received from property, the eligibility case record must clearly indicate the basis for determining whether or not the individual produces it by his own efforts or whether or not he is actively engaged in management.

A. **Definitions of Gross Earnings and Profit**

1. Gross earned income from wages, salary or commissions means the total amount of pay, irrespective of deductions, withholding or work expenses.*** It is not the "take home" pay. Exception: Money advanced from an employer prior to the regular pay date must be counted as part of the gross income in the month of receipt. Any amount withheld to repay an advance in salary received prior to the that month shall be deducted from gross earnings or profit for the month in which it is withheld.

2. Gross earned income of child care providers means the income of a TANF recipient who provides child care in her home minus an allowance for the cost of meals and snacks that are provided. The allowance is not given for children included in the child care provider's TANF AU or for children excluded from her AU. The allowance is the same as those in the Supplemental Nutrition Assistance Program (SNAP) formerly Food Stamp Program Manual, at Part XII.A.7, under Allowable Costs of Producing Income for Child Care Providers.

* 45 CFR 233.20 (a)(6)(iii)
** 45 CFR 233.20(a)(6)(vii)
*** 45 CFR 233.20(a)(6)(iv)

3. Profit from self-employment means the total income received, less the business expenses directly related to producing the goods or services and without which the goods or services could not be produced.*** However, business expenses do not include:

   a. net losses from previous periods;

   b. federal, state, and local taxes;

   c. money set aside for retirement purposes;

   personal expenses, entertainment expenses, and personal transportation;

   d. depreciation of equipment, machinery, or other capital investments necessary to the self-employment enterprise.

   Note: If an individual who was self-employed incorporates his business, either by himself or with another individual, he is no longer considered self-employed. His wages or salary will be paid by the corporation and will be considered regular earned income, not self-employment income.

B. Disregarded Earned Income - As specified below, certain earned income of members of the assistance unit and excluded individuals required to be in the assistance unit must be disregarded in determining need of the assistance unit and amount of assistance to which the assistance unit is entitled. In addition, income disregarded under the provisions of other federal assistance programs must not be counted as income to the TANF assistance unit*. The items listed below are disregarded during the 185% screening. Income disregards are to be applied to gross earned income in the order listed below.

1. All payments issued under the Workforce Investment Act of 1998 (WIA), including Job Corps payments,** **to a student who is under age 18 or, if age 18, is scheduled to graduate no later than the month he/she turns 19.**

2. Other earned income of any eligible child who is a student*** must be disregarded in the 185% screen, determination of need (for applicants) and grant computation.

* 45 CFR 233.20(a)(4)(iii)
** Public Law 105-220
*** 22 VAC 40-295-60

3. Standard Deduction***** - A standard deduction is **subtracted from the** gross earned income for the assistance unit whose income is not otherwise exempt.**
Individuals not included in the AU will not be considered when determining the appropriate standard deduction.

4. 20% Deduction of the Remaining Earned Income* - After applying the disregards in items 1-3, deduct 20% of the remaining earned income, including profit produced by self-employment.**

* **22 VAC 40-295-60**
**45 CFR 233.20(a)(11)(i)(B)
*** **22 VAC 40-295-60**

5. Incapacitated Adult/Child Care Disregard - Anticipated child care expenses, up to the appropriate maximums, must be disregarded in determining initial eligibility and determining the amount of payment (Step 2 and 3 of Appendix 3 to Section 305). The appropriate disregard will be based on the employment status of the client. The cost of child care may be paid for by a service vendor payment, by the client, or a combination. The child care expenses paid by the client are to be disregarded from earned income up to the maximum. Prior to allowing the child care disregard, it must be verified that a service vendor payment is not being issued concurrently.

The child care expenses can be incurred when an employed VIEW participant pays the difference in the above market rate and the amount paid by VIEW child care, or when an employed TANF applicant/recipient is paying her own child care costs. If the recipient is referred to VIEW the disregard may be given until VIEW child care begins to pay for the care. If the VIEW participant continues to pay her own child care expense, the disregard can continue to be allowed.

Anticipated incapacitated adult care expenses, up to the appropriate maximum, will be disregarded in both the initial eligibility determination and determining the amount of payment. The appropriate disregard will be based on the employment status of the client. Incapacity must be supported by the Medical **Evaluation** form (032-03-654) unless incapacity is established by receipt of Social Security Disability **(SSDI)** benefits or **Supplemental Security Income (SSI)**.

Adult care expenses can be incurred when the applicant/recipient pays a provider to care for the incapacitated adult.

a) Employment status refers to:

1) Full-time Employment - Employed to work 30 hours or more per week on an on-going basis;

2) Part-time Employment - Employed to work less than 30 hours per week on an on-going basis;

3) Not Employed Throughout A Month - Applicable when an individual begins or terminates employment.

b) To determine the employment status of an individual who is not employed to work a specific number of hours on an on-going basis, such as a person employed on an on-call basis, as needed basis, or fluctuating basis, the following criteria should be used:

1) Full-time Employment - Working, or expected to work, 120 hours or more per month;

2) Part-time Employment - Working, or expected to work, less than 120 hours per month.

Verification of an individual's employment status should be provided by either an employer's statement of the number of hours employed to work, or actually worked, or by pay stubs. For self- employed individuals, the agency will be required to accept the client's statement concerning the number of hours worked, unless the agency has reason to question the validity of the statement.

Note: When verification of the appropriate employment status is being established for a prospective determination, it may be necessary for the eligibility worker to use his/her best estimate of the circumstances that will exist during that month.

The applicant/recipient is required to verify his/her employment status initially, at each redetermination and whenever a change in the number of hours worked is reported to the agency.

c) Based on an applicant/recipient's employment status, the following disregards will be applied: (See exceptions to allowing the disregards in item 7.)

1) For full-time employment, deduct an amount equal to the anticipated cost, not to exceed $175 per month, for care of each child, age 2 and older and/or incapacitated adult in the assistance unit. In the case of child care for a child under 2 years old, deduct the anticipated cost not to exceed $200 per month.

2) For part-time employment, deduct an amount equal to the anticipated cost, not to exceed $120 per month, for care of each child and/or incapacitated adult in the assistance unit.

3) If an individual is not employed throughout a month but:

a) has worked, or is expected to work, 120 hours or more in that month, deduct an amount not to exceed the full-time disregard.

b) has worked, or is expected to work, less than 120 hours in that month, deduct an amount not to exceed the part-time disregard.

If child care/incapacitated adult care is payable on a weekly or bi-weekly basis, the amount of the monthly expense may be calculated using the 4.3 (weekly) or 2.15 (bi-weekly) conversion factors.

The disregard for child care is limited to children in the assistance unit, and the disregard for incapacitated adult care is limited to adults in the assistance unit.* Verification of the child/incapacitated adult care paid or anticipated to be paid must be obtained and submitted initially, at redetermination and whenever a change in the amount to be paid is reported in order to allow the disregard in determining the amount of payment. Acceptable methods of verification include written statements from the provider, receipts or cancelled checks, or verbal statements from the provider. When verbal verification is obtained, the case record documentation should include the name and telephone number of the individual who provided the information, the date of contact, and the information obtained.

* 45 CFR 233.20(a)(11)(i)(D)

Failure or refusal of the applicant/recipient to submit verification of the expense will result in the amount of the payment being determined without the expense being disregarded. If the verification is subsequently provided, eligibility will be re-evaluated, and a supplement issued for the month for which the disregard was not allowed. If termination or denial results from not allowing the disregard, follow **guidance** in Section 401.3.F.5. This disregard, when applicable, is to be deducted from budget month income. Additionally, the disregard cannot be applied if the provider of care is a member of the assistance unit.

Budgeting adult/child care (if chosen):

Example 1: In December, the income and adult care/child care (if chosen) expenses anticipated for January, using appropriate maximums, are verified and used to determine the amount of the January payment.

Example 2: Budgeting the child care disregard of a child turning 2 years old when employment is full-time:

The child turns 2 on February 5. In calculating February's payment, anticipated income and child care expenses, not to exceed $200, are verified and used to determine the amount of the payment because the child was under 2 during that month. For March, anticipated income and child care expenses, not to exceed $175 (child now 2), are used to determine the amount of the March payment.

Example 3: An ongoing recipient works part-time and has chosen to have child care costs disregarded. In May she reported that her job changed to full-time on May 15. The prospective for June must reflect the appropriate maximum disregard for full-time employment. If eligible, the June payment will be calculated using the full-time maximum.

NOTE: Earned income cases that become ineligible may be eligible for transitional child care benefits. See Section 401.8.

* 45 CFR 233.20(a)(11)(iii)

C. Countable Earnings - The amount of monthly earnings remaining after the appropriate disregards have been deducted is the countable earned income to be used in computing need and amount of assistance.

305.4 OTHER INCOME - In determining the amount of assistance, all other regular income received or anticipated to be received by members of the assistance unit or used in determining eligibility must be counted in the month in which it is received, except that specifically disregarded under A.

A. Other Income Disregards - The following income of members of the assistance unit, a parent not included in the assistance unit or anyone whose income is used in determining eligibility or the amount of assistance must be disregarded.

Income which is disregarded under the following provisions must not be counted in determining the need for assistance of any individual under any other federal assistance program:*

1. Home produce of the assistance unit utilized for their own consumption.

2. The value of **SNAP benefits**.

3. The value of foods donated under the U.S.D.A. Commodity Distribution Program, including those furnished through school meal programs.

4. Any payment received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.

5. Any benefits received under Title VII, Nutrition Program for the Elderly, of the Older Americans Act of 1965, as amended.

6. Money received for educational purposes** **including income received from college work study programs.**

7. Training allowances (transportation, books, required training expenses and motivational allowances) provided by Vocational Rehabilitation for persons participating in Vocational Rehabilitation Programs.***

   The disregard is not applicable to the allowances provided by VR to the family of the participating individual.

* 45 CFR 233.20 (a)(4)(iii)
** 45 CFR 233.20 (a)(3)(iv) (B) and (vii), and (a)(4)(ii)(d), and Public Law 102-325
*** 45 CFR 233.20 (a) (4) (vii)

8. Any portion of an SSI payment and/or Auxiliary Grant.*

9. Payments to VISTA Volunteers under Title I, when the monetary value of such payments is less than minimum wage as determined by the Director of the action office,** and payments for **supportive** services **or** reimbursement for out-of-pocket expenses made to individual volunteers serving as foster grandparents, senior health aides, or senior companions, and to persons serving in the Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE) and other programs pursuant to Titles II and III, of Public Law 93-113, the Domestic Volunteer Service Act of 1973, including AmeriCorps VISTA.*** The worker must contact the Action Office at the following address or telephone number when VISTA payments are reported; Action Office, 400 N. 8th Street, Richmond, Virginia 23219, (804) 771-2197.

   Exception: This disregard does not apply to payments to participants **funded by state or national AmeriCorps grants or to participants in the AmeriCorps National Civilian Community Corps (NCCC). Stipends paid to AmeriCorps volunteers in these programs are counted as earned income unless the participant is a student who is an eligible child (see 305.3B(2)).**

10. The Veterans Administration educational benefit for the caretaker 18 or older is disregarded in its entirety when it is the veteran's only source of assistance for education. No verification beyond the award letter or benefit payment check is needed.

    If the veteran receives additional assistance in the form of a grant, loan, or scholarship, the VA educational benefit is to be disregarded in its entirety as long as any portion of the benefit is used to pay for tuition, books, fees, equipment required by the education/training program, transportation if the education/training institution is more than one mile from the veteran's residence, and/or child care services necessary for school attendance.

    Exception: Any funds included in the benefit amount specifically for dependents are to be counted as income to the assistance unit.

    Exception: Any separate housing allowance, including an allowance authorized under the Post 9/11 GI Bill, is to be counted as income to the assistance unit.

11. Foster care payments, including payments for Independent Living Assistance, received by anyone in the assistance unit.

12. All payments for supportive services under the Workforce Investment Act of 1998 (WIA).

    Additionally, all payments issued to a student under age 18 or, if age 18, scheduled to graduate no later than the month he/she turns 19 under the Workforce Investment Act of 1998 (WIA), including Job Corps payments. (Note: Wages paid to an adult WIA participant are counted as earned income.)

* 45 CFR 233.20(a)(3)(x)
** 45 CFR 233.20(a)(4)(ii)(h)
*** 45 CFR 233.20(a)(4)(ii)(g)

13. Income tax refunds (including Earned Income Tax Credit payments and refunds). These exempt tax credits include federal earned income tax credits and state earned income tax credits.

14. Any payment made under the Fuel Assistance Program.

15. The value of supplemental food assistance received under the Child Nutrition Act of 1966. This includes all school meal programs; the Women, Infants, and Children (WIC) Program; and the child care food program. Money paid to day care providers under the National School Lunch Act to serve meals to children, other than their own, is countable.

16. All federal, state, or local government rent and housing subsidies and utility payments.*

17. Any funds distributed to, or held in trust for, members of any Indian tribe under Public Law 92-254, 93-134, 94-540, 98-64, 98-123, 98-124 or 97-458. Additionally, interest and investment income accrued on such funds while held in trust, and purchases made with such interest and investment income are disregarded.**

18. The following of distributions received from a Native Corporation under the Alaska Native Claims Settlement Act (Public Law 100-241):

    a. Cash (including cash dividends on stock received from a Native Corporation) to the extent that the total received does not exceed $2,000 per individual per calendar year;

    b. Stock (including stock issued or distributed by a Native Corporation as a dividend or distribution on stock);

    c. A partnership interest;

    d. Land or an interest in land (including land or an interest in land received from a Native Corporation as a dividend or distribution on stock); and

    e. An interest in a settlement trust.

* 45 CFR 233.20(a)(3)(xii)
** 45 CFR 233.20(a)(4)(ii)(e)

19. Income derived from certain submarginal land of the United States which is held in trust for certain Indian tribes (Public Law 94-114).

20. In determining eligibility for assistance, the first $100 of total child or child and spousal support payments received by the assistance unit is to be disregarded.* In calculating the initial month's payment(s) the $100 disregard is only to be applied if it is anticipated that $100 will not be collected by DCSE subsequent to case approval (the date that the approval action is keyed into ADAPT). If it is anticipated that at least $100 will be collected, the support disregard is not to be applied when calculating the initial payment since the unit will receive a disregard payment from DCSE. If the amount that is anticipated to be collected by DCSE after case approval is less than $100, disregard an amount from the support received prior to case approval that will ensure the total support disregard for the month does not exceed $100. For ongoing cases, DCSE will send each assistance unit a disregard payment of the first $100 of child support received each month. The $100 disregard is only applicable to current child/spousal support payments received each month.

21. Payments sent to the recipient by the State which are identified as disregarded support.

22. Federal major disaster and emergency assistance provided under the Disaster Relief and Emergency Assistance Amendments of 1988 and disaster assistance provided by state and local governments and disaster assistance organizations (Public Law 100-707).

23. Payments received by individuals of Japanese ancestry under the Civil Liberties Act of 1988, and by Aleuts under the Aleutian and Pribilof Islands Restitution Act (Public Law 100-383).

24. Payments by VIEW for support services such as transportation, uniforms, child care, etc.

25. Any payment received from the Agent Orange Settlement Fund or any other fund established in response to the Agent Orange product liability litigation.** To verify whether a payment is an Agent Orange payment, use documents in the individual's possession. If the individual cannot pro-vide verification or the situation is unclear, write to the Agent Orange Veteran Payment Program, P.O. Box 110, Hartford, CT 06104, Attention: Agent Orange Verification. Include in the request the veteran's name and social security number. If a survivor of a qualifying veteran was paid, also provide the survivor's name and social security number.

26. Payment received by individuals under the Radiation Exposure Compensation Act (Public Law 101-426).

* Public Law 109-171
** Public Law 101-239

27. Funds received pursuant to the Maine Indians Claims Settlement Act of 1980 (Public Law 96-420); and the Aroostook Band of Micmacs Settlement Act (Public Law 102-171).

28. Funds paid to an escrow account established under the Family Self- Sufficiency Program of the Department of Housing and Urban Development.

29. Student financial assistance received under Bureau of Indian Affairs student assistance programs.*

30. Interest earned or appreciation in value on a savings or investment account for the purpose of self-sufficiency.

31. Up to $2,000 per year of income received by individual Indians, which are derived from leases or other uses of individually-owned trust or restricted lands.**

32. All bona fide loans, regardless of the intended use.* This includes loans obtained for any purpose, and may be from a private individual as well as from a commercial institution. A simple statement signed by both parties indicating that the payment is a loan and must be repaid is sufficient to verify that a loan is bona fide. If the customer indicates that money received was a loan but does not provide required verification, the money is to be treated as unearned income in the month received. Interest earned on the proceeds of a loan while held in a savings account, checking account, or other financial instrument will be counted as unearned income in the month received.

33. Income, including support, received by or on behalf of a child ineligible for TANF due to the family cap provision.***

34. Payments received by victims of Nazi persecution under Public Law 103-286.

35. Matching contributions deposited in an individual development account (IDA) or on the applicant/recipient's behalf in a parallel account maintained by the organization administering the IDA program.

36. Income received by children who are in a VIEW period of ineligibility.

37. Interest income of less than an average of $10 per month.

* Public Law 102-325
** Public Law 93-134
*** Code of Virginia, Section 63.2-604

38. Any veteran benefits received by children born with spinal bifida, who are natural children of individuals who served in Vietnam during the period beginning January 9, 1962, and ending on May 7, 1975.

39. Payments received from the Ricky Ray Hemophilia Relief Fund established under Public Law 105-369.

40. Any amount received by or made available to household members for deployment or service in a combat zone will not count as income for TANF purposes unless the payment was received before the deployment. This exclusion includes items such as, but not limited to, incentive pay for hazardous duty, special pay for imminent duty or hostile fire duty or certain reenlistment bonuses, or special pay for certain occupational or educational skills.

41. Support sent to clients from DCSE in a month the TANF case is reinstated and a supplemental payment issued. The disregard applies only to the month the case was reinstated.

42. A one-time cash payment, identified as a Reception and Placement(R&P) Program payment, made to help a newly arrived refugee meet basic needs during the first 30 days in the country. (Note: An R&P payment is separate from any cash allowances which may be made to a refugee through the Matching Grant (MG) Program. Matching Grant allowances are counted as income for TANF).

B. Income From Social Security and Other Benefits - Monthly benefits received or anticipated to be received by members of the assistance unit, or individuals required to be in the assistance unit, must be counted as income.

Exceptions:

1. **Educational benefits** received from Veterans Administration. (See 305.4.A.10.)

2. Medicare Part B premium deducted from the Social Security or Railroad Retirement benefits of an individual who is also receiving Medicaid. **In that case, the** amount of benefits actually received, plus the amount of the Part B premium, is counted as income since Medicaid will pay the premium during the time the individual receives Medicaid.

See 305.2.B. to determine whether the gross monthly benefit or the actual benefit received should be counted for Social Security, Veterans' benefits, Railroad Retirement or other retirement benefit, or Unemployment Compensation.

C. Lump Sum Payments – A lump sum is a nonrecurring payment which is received by a member of the assistance unit, or by an individual such as a stepparent or a parent of a minor caretaker, whose income must be considered in determining the eligibility of the AU.

Lump sum payments include payments for the accumulation of benefits for a prior period, including Social Security and Workers' Compensation benefits; payments in the nature of a windfall, e.g., inheritances or lottery winnings; personal injury awards; a life insurance settlement; or income from any other nonrecurring source. Money received from the sale of a resource is not considered a lump sum.

Lump sum payments for casualty property losses for the repair or replacement of damaged/lost property will not be considered as countable income since the payment is designated to replace or repair the property. A casualty property loss is a loss caused by a sudden, unexpected event such as a car accident, fire, flood, or earthquake.

A lump sum payment which exceeds 130% of the federal poverty level for the household (AU plus other required members; see 401.2), or which causes the total income for the household to exceed 130%, must be counted as income. If the amount of the lump sum and the date it is to be received are reported in advance, the lump sum will be counted in the month it is to be received. Otherwise, the lump sum will be counted in the month following receipt or as soon as administratively possible following the report of the payment.

A lump sum received in the month of application is treated as income for that month. A case which is denied due to excess income based on the lump sum payment may be eligible in the second month.

Calculating a lump sum payment:

1. **Determine that the non-recurring payment meets the definition of lump sum above and that the payment is not for a casualty property loss. Then, d**etermine the amount of **the** lump sum to be considered **as income**. Only the amount that is **actually** received by the individual (lump sum less **any** directly related expenses **which were deducted prior to the individual receiving the payment**) shall be considered as income.

   Example: Ms. S. notifies the local agency that her claim from an automobile accident has been settled. The settlement, **which was separate from a casualty claim for the loss of her vehicle also made by Ms. S.,** was for $5,000. **Ms. S.** received a check in the amount of $1,000 from her attorney. The check stub **showed that** $2,000 was deducted to cover legal expenses and $2,000 **was deducted** for medical expenses. The $1,000 that **the client** actually received is **considered the lump sum amount.**

   Note: Lump sum payments received as a result of an accumulation of benefits for a prior period, such as Social Security benefits, **may not have any** directly related expense deductions.

2. **Count** the lump sum **as income**. **Add** the lump sum **received by the individual** to other net countable income received in the same month. **If the total income exceeds 130% of the federal poverty level for the household, count income for the month following receipt of the lump sum.**
   a. If the applicant/recipient has knowledge of the date and amount of the lump sum before receiving it and reports it, the lump sum will be counted in the month that it is expected to be received. **The lump sum is counted for one month only. It will not impact future months.**

   b. If the recipient reports receipt of a lump sum on the day that it is received or any day thereafter, the lump sum is **counted for** the month **following** receipt **or for the first month that the action is administratively possible. The lump sum income is counted for one month only. It will not impact future months.**

   Example 1: Applicant applied for TANF on April 15th. She received $10,000 in January when her uncle's estate was settled. The application must be processed without counting the lump sum as income **because it was received prior to the month of application for TANF.**

* 22 VAC 40-295 TANF

Example 2: A TANF applicant reports at application that she received an insurance check **earlier that same month** to repair damage to her home caused by **a severe storm**. **The money will be used to** repair her home. This lump sum must not be counted as income **since it is payment for a casualty property loss.**

Example 3: A TANF applicant reports lottery winnings of $2,000 during March, the month of application. She has no other income, but the lottery winnings exceed 130% of the federal poverty level for the household. Her application is denied for March and approved for April.

Example 4: An ongoing TANF recipient calls the local agency on March 11th to report receipt of a $5,000 inheritance check. **The lump sum causes the household income to exceed 130% of the federal poverty level. The lump sum will be counted as income for April and the case will be suspended because the income exceeds the standard of need. The case will be reinstated for May.**

Example 5: A TANF recipient calls her worker on June 15th to report **that** she will receive a Social Security payment for her son on July 3rd . **The payment will be $2100 ($300 for each of the months of November, December, January, February, March, April and May). The payment causes the household income to exceed 130% of the federal poverty level.** The local agency must count **the payment** as income for the month of July **and suspend the case because the income exceeds the standard of need. The case will be reinstated for August.**

PAGES 28 – 32 INTENTIONALLY LEFT BLANK

D. **Sponsored Aliens – For the purposes of determining eligibility, the income of any person who sponsors an alien's entry into the United States on or after December 19, 1997, shall be considered to be the unearned income of the alien.**

After determining that an alien meets the alienage requirements in Section 201.7.A.2.a. – d, the worker must determine if sponsor deeming is applicable to the individual. The alien groups exempt from sponsor deeming are refugees, asylees, deportees, parolees, Cuban-Haitians, and veterans/persons in active duty and certain of their relatives (Section 201.7.A.2.d). Aliens exempted are responsible for proving that their original entry status was one of those listed above if their current status is different.

1. Aliens Whose Sponsor Executes an Affidavit of Support on or After December 19, 1997
Section 213A of the Immigration and Nationality Act, as amended by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996(P.L. 104-208) requires that the sponsor of an alien applying for an immigrant visa or adjustment of status on or after December 19, 1997, sign Form I-864, the "Affidavit of Support Under Section 213A of the Act." The sponsor of an alien who applied for an immigrant visa or adjustment of status before December 19, 1997, is not subject to the requirements of Section 213A and must sign Form I-134, the "Affidavit of Support," or another "non-213A" affidavit of support, as determined by USCIS.

Policies applicable when the affidavit of support was executed on or after December 19, 1997, are as follows:

1. Countable Income of Sponsors - For purposes of determining eligibility, the income of any person who executed an affidavit of support with respect to the alien and the spouse of any person who executed an affidavit on behalf of the alien, shall be considered to be the unearned income of the alien.

2. Termination of the Sponsor's Obligation - The evaluation and use of the income of the sponsor and spouse of the sponsor must continue toward the TANF eligibility and benefit level of the **alien** until the alien:

1) becomes a U.S. citizen through naturalization; or

2) has worked, or can be credited with, 40 qualifying quarters of work, provided that the sponsored alien is not credited with any quarter beginning on or after January 1, 1997, during which the sponsored alien receives federal public benefits. (Refer to Appendix 4 to Section 305.); or

3) leaves the U.S. or no longer holds permanent resident status; or

4) dies or the sponsor dies.

3. Review of Income of Alien Upon Reapplication - Whenever an alien reapplies for TANF benefits, the worker must review the income attributed to the alien.

4. Indigence Exception - If a determination is made by the local agency that a sponsored alien would, in the absence of the assistance provided by the agency, be unable to obtain food and shelter, taking into account the alien's own income, any cash, food, housing, or other assistance provided by other individuals, including the sponsor, the amount of income of the sponsor or the sponsor's spouse which shall be attributed to the sponsored alien shall not exceed the amount actually provided for a period beginning on the date of such determination and ending 12 months after such date.

   The local agency must notify the Office of the U.S. Attorney General of each such determination, including the names of the sponsor and the sponsored alien involved. The written notification

should include the reference "Determination under 421(e) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996" and should be sent to the following address:

U.S. Citizenship and Immigration Services
Statistics Branch
425 I Street NW
Washington, D.C. 20536

e. Special Rule for Battered Spouse and Child - Sponsor deeming requirements are suspended for a 12-month period from entitlement to TANF for sponsored aliens who have been battered or subjected to extreme cruelty and the local department of social services has determined that there is a substantial connection to the need for benefits and the battery or cruelty.

After 12 months, the battered spouse or child may continue to receive assistance if the battery or cruelty was perpetrated by the sponsor and has been recognized by a court order or **USCIS** determination.

To qualify under this special rule, the batterer must not be residing in the same household as the individual who was subjected to the battery.

Note: This provision only applies if the battered or abused alien entered the U.S. prior to August 22, 1996, but is sponsored on or after December 19, 1997.

f. Reimbursement Procedures - Execution of the affidavit of support, coupled with the sponsored immigrant's acquisition of permanent residence, creates a contract which is legally enforceable. The sponsor is obligated to reimburse government agencies which provide public benefits, including TANF, to the sponsored alien. Procedures for requesting and receiving reimbursement will be issued in a future transmittal. If repayment is received from the sponsor before reimbursement procedures are issued, contact the Regional TANF Specialist for interim instructions.

2. Aliens Whose Sponsor Executed an Affidavit of Support Before December 19, 1997

Aliens who applied for immigrant visas and those who filed for an adjustment of status before December 19, 1997, are not subject to sponsor deeming, as the sponsor’s obligation to support expired after three years.

3. Verification of alien status

E. Support from Relatives

1. Spouse, parent, or minor sibling in the home - Under federal regulations, in family groups living together, income of the spouse is considered available for his spouse, income of a parent is considered available for his children under 21,* income of the senior parent(s) is considered available to the minor caretaker's assistance unit,** until the minor parent reaches the age of 18, and income of the ineligible alien parent is considered available to his child's assistance unit. The deeming of income from the parent only applies to minor caretaker and ineligible alien cases as specified in section 305.4 F.2.

As specified in Section 302.7, the parent and minor siblings of the eligible TANF children living in the home are ordinarily included in the assistance unit, with their needs and income counted in determining the amount of payment. If the parent or child is not included in the assistance unit for any of the reasons listed in Section 302.7.C. or D., his income is considered available to the assistance unit as follows:

a. If the parent or child is receiving SSI, Auxiliary Grants, adoption assistance, or a foster care payment, none of his income can be counted as available to the TANF assistance unit.

* 45 CFR 233.20(a)(3)(vi)
** 45 CFR 233.20(a)(3)(xviii)

b. If the parent does not meet the citizenship or alienage requirement, any income he has is considered available to the eligible child(ren) by applying the ineligible alien deeming formula. (See 305.4.F.)* A lump sum payment received by an ineligible alien parent is counted as income **in accordance with 305.4C.**

If a child is ineligible because of his citizenship/alien status, none of his income is available to the assistance unit.

c. The income of the spouse of a parent of TANF children, who is the children's stepparent, is considered available to his spouse and the children for whom she receives assistance. See 305.4F to determine the amount, if any, of the step-parent's income that will be counted in determining the eligibility of the spouse and/or deemed to the children.

d. The parent of a TANF child who is herself a minor (under 18) and is living in the home of her parent(s) must be included in the TANF assistance unit with her child unless specifically excluded per Section 302.7.D. The income of the senior parent(s) will be considered available to the minor caretaker's assistance unit in accordance with 305.4.F. The income of the senior parent(s) will be deemed available to the minor caretaker's assistance unit regardless of whether the minor caretaker has been excluded from the unit for reasons identified in Section 305.4.E.1.b and e.

Additionally, any income of the minor caretaker is considered available to her TANF children, even if he/she is not included in the assistance unit. Earned income disregards are applicable per Section 305.3.B.

e. If the parent or child is excluded or removed from the assistance unit because he/she failed/refused to cooperate in identifying the parents, establishing paternity and securing support per 201.10.A, or failure to provide a Social Security number or show proof of application for a Social Security Number, the parent's/child's earned income, allowing the earned income disregards per Section 305.3.B., and gross unearned income is considered available to the assistance unit. This applies also to individuals who are disqualified per Section 102.3 for being found to have committed an IPV, to an assistance unit member ineligible due to noncompliance with the compulsory school attendance requirement, to a parent excluded because her spouse, the stepparent to the eligible children, is able to meet her needs, and to a parent/child ineligible due to 201.1 F and G.

* 45 CFR 233.20(a)(3)(vi)(B)

f. If the parent is a sponsored alien whose income plus that portion of the sponsor's income deemed available to him/her equals or exceeds the alien's pro rata share of the standard of assistance at 90% for the alien and the remaining members of the assistance unit, the children's pro rata share of the alien's countable income (exclusive of the sponsor's income) is considered available to the assistance unit. Allow the earned income disregards per Section 305.3.B. in determining the alien's countable earnings. Note: A lump sum payment received by a sponsored alien parent excluded under this paragraph is counted as income in accordance with 305.4.C.

If the child is a sponsored alien, none of his income is to be counted.

2. Spouse (Stepparent) or parent outside the home - Child support or child support commingled with alimony received or anticipated to be received by the assistance unit is counted as income in the amount actually received, minus the first $100 each month, in establishing initial eligibility on the basis of need for an otherwise eligible assistance unit.

Child support is considered income belonging to the child. If the child is an SSI recipient or a capped child the support will not be counted.

When a non-custodial parent has been assigned a unitary support order for children included in the AU and children not in the AU, the support must be prorated. The TANF worker must:

1. Prorate the support and key in ADAPT the prorated amount for each child.
2. Contact the district DCSE office to insure their knowledge of a unitary payment for children who are TANF and non-TANF (SSI/capped).

DCSE will follow their procedures identified in Clearinghouse #03-DD- 026R.

When a support payment is for a child no longer in the home, count as income any portion of the support used for the AU. Enter the income in ADAPT as a ‘Third Party Payment’.

If such support is insufficient to meet the needs, the initial grant(s) is to be computed counting all support received prior to the date that the case approval is keyed into ADAPT (See Exception d. below).

All support received after case approval must be redirected to the Division of Child Support Enforcement (DCSE). All subsequent grant(s) are to be computed without regard to such income and the amount of the assistance payment will be total needs less all other countable income up to the maximum reimbursable payment. (Refer to 503.9 for retroactive payments at initial application.) The applicant/recipient must be advised that all future support received must be forwarded to DCSE. NOTE: Alimony not commingled with support is to be counted as income. It is not considered as support, is not to be redirected to DCSE, and is not eligible for the $100 disregard.

Exceptions:

a. In the event the caretaker fails to cooperate in redirecting these support payments to the State, the caretaker must be

removed from the assistance unit (201.10). All future support, minus the first **$100** each month, anticipated to be received by the caretaker must be considered as income available to meet the needs of the remaining members of the assistance unit until such time support is redirected to the State.

b. In the event the caretaker cooperates in redirecting support payments to the Division of Child Support Enforcement and the support is sent back to the client, the support will not be counted as income to the client, neither will an overpayment exist. Benefit workers should contact the district DCSE worker to determine what was sent to the client and the accuracy of the DCSE case status.

c. In situations where the client has cooperated and support is being paid to the Division of Child Support Enforcement but the responsible person is also making a support payment directly to the client, the amount being received by the client is to be counted in total as income to the assistance unit. The **$100** disregard is not applicable to the additional support received by the family in this situation. The income will be counted against the grant until the new support obligation has been established.

d. Pending the establishment of a child support obligation by the District Child Support Enforcement Office, payments made to a third party such as a rental agency in lieu of or in addition to child support, whether based on a court order or a mutual voluntary agreement between the client and the responsible person, must be counted as income to the assistance unit. The **$100** disregard is not applicable to third party payments.

e. If it is anticipated that an amount less than **$100** will not be collected by DCSE after case approval, disregard an amount from the support collected prior to case approval to ensure that a total amount of no more than **$100** is disregarded in the initial month of eligibility.

3. Putative fathers outside the home - In cases involving absent putative fathers, cash contributions are counted as income in the amount received, minus the first **$100** each month, in establishing initial and continuing eligibility until such time as the contribution is redirected to the State. Note: If a notarized statement of paternity, a copy of an existing court order for support, or a Virginia birth certificate with the father's name exists in the case record, support received from such person, if absent, must be redirected to the State.

4. Other nonresponsible persons - Cash contributions from non-responsible persons, such as cohabitants, are counted as income in the amount received or anticipated in establishing initial and continuing eligibility.

A cohabitant is a person cohabiting (as man and wife) with the parent of the TANF children.

F. Deeming Income - In certain situations, the income of an individual living in the home with the assistance unit must be evaluated to determine what amount, if any, must be considered available to the assistance unit, or deemed, regardless of whether the income is actually made available to the unit. Income deeming is applicable to the following persons:

- a stepparent living with the assistance unit who is not included in the assistance unit. Income of a stepparent will be counted in determining the eligibility of the spouse. Income of a step-parent will also be deemed available to the spouse's natural or adopted child(ren)when the spouse is living in the home. See 305.4F to determine the amount, if any, of the stepparent's income that will actually be counted in determining the eligibility of the spouse and/or deemed to the step-children. The income of the stepparent will not be deemed available to a minor caretaker's assistance unit. Divorce terminates the stepparent's financial responsibility for the step-children, but not the degree of relationship.

- the parent(s) (but not a step-parent) of a minor parent, when the minor parent resides with the parent(s).

- an alien parent who is ineligible for assistance due to his alien status.

The procedures described below are to be used to determine the amount of income that must be deemed available to the assistance unit.

1. Stepparent Deeming Procedures* - The two-step procedure in a. below must be followed to determine eligibility and the grant amount when there is a stepparent in the home but not in the assistance unit and the parent is otherwise eligible for inclusion in the assistance unit. If the parent has been excluded from the assistance unit due to any reason other than failure/refusal to cooperate with DCSE, only Step 2 is necessary. If the parent has been excluded due to failure/refusal to cooperate with DCSE, the procedure in b. below is applicable.

   a. Step 1 - Determining Eligibility of the Parent in the Home - Compute the amount of the stepparent's income available to the assistance unit by subtracting the following from the verified anticipated gross monthly earned income (use net profit if from self-employment) and gross unearned income:

      1) The first $90 of gross earned income (deeming disregard);

      2) The standard of **assistance** for household members claimed or who could be claimed as dependents on the stepparent's federal income tax return, excluding members of the assistance unit.

* Code of Virginia, Section 63.2-614

Exceptions: The needs of an individual(s) who is not in the assistance unit due to an IPV penalty, failure to comply with SSN requirements, or failure to cooperate with DCSE will not be allowed.

If the stepparent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the stepparent.

3) Support, including wage assignments paid to individuals not living in the home who are claimed or could be claimed as dependents on the stepparent's federal income tax return.

If the stepparent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the stepparent.

4) Payments for alimony and child support, including wage assignments to individuals not claimed on the stepparent's federal income tax return and not living in the household.

Verify by statement from the stepparent.

Failure of the customer to verify the income of the stepparent will result in ineligibility of the case.

The amount remaining after the above deductions must be compared to the standard of assistance for the assistance unit. If the stepparent's income is less than the standard of assistance for the number of persons in the assistance unit, the parent's needs are included on the grant, and no stepparent income is deemed available. Only the income of the parent and child(ren) is to be considered in determining the grant amount. (Step 2 is not applicable in this instance.)

If the remaining amount equals or exceeds the standard of assistance for the number of persons in the assistance unit, the parent is not included in the assistance unit, and the child(ren)'s eligibility must be determined according to step 2.

Step 2 - Eligibility Determination For the Children When the Parent's Needs Must Be Excluded From the Grant - Determine the child(ren)'s eligibility and grant amount by counting the parent's income, the child(ren)'s income, and that portion of the stepparent's gross income in excess of 150% of the poverty level for two persons (the parent and stepparent), which is $**1,992.00**. The latter is a standard amount and must be used in all cases regardless of the actual number

of dependents the stepparent has. Countable income is to be deducted from the standard of assistance for the assistance unit.

b Stepparent Deeming Procedure Used When the Parent in the Home Refuses/Fails to Cooperate With DCSE - When it is determined that the parent of the TANF child(ren) has failed or refused to cooperate with DCSE, the stepparent's income must be deemed available to the assistance unit, calculating the deemed amount in accordance with 305.4.F.1.a.1) - 4). The deemed income, in addition to the income of the parent and child(ren) must be counted to determine the assistance unit's eligibility and grant amount.

Failure of the customer to verify the income of the stepparent will result in ineligibility of the case.

c. Stepparent Deeming When the Parent Is Not in the Home With the Stepparent The income of the stepparent will not be deemed when the natural/adoptive parent of the TANF children is not living in the home due to separation, divorce, death or incarceration. However, when the stepparent and the natural/adoptive parent are living apart due to military duty, employment, or other reason, and they both consider themselves to be living as husband and wife, they will not be considered separated and the income of the stepparent will be deemed.

If the stepparent is included in a TANF assistance unit, policies and procedures applicable to assistance unit members apply instead of the deeming procedures.

Note: A lump sum payment received by an eligible child's stepparent is considered available to the assistance unit as described at 305.4C.

EXAMPLE #1:
Ms. P. is applying for TANF for herself and her 3 children. Ms. P. receives unearned income in the amount of $50 per month, and each of the 3 children receives unearned income in the amount of $50 per month, as well. Ms. P.'s husband (not the children's father) is employed and earns $1,999 per month. Mr. P. has no other dependents.

1. To determine Ms. P.'s eligibility to be included in the AU:

Mr. P.'s income	$1,999.00
Less $90 deeming disregard	- 90.00
	$1,909.00
Less standard of assistance for 1 (Group II)	**-182.00**
Amount deemed available to Ms. P.	**$1,727.00**
Standard of assistance for a 4-person AU	**$ 401.00**

Since the portion of Mr. P.'s income which is deemed available to Ms. P. exceeds the standard of assistance for 4 persons, she is not eligible to be included in the AU.

2. To determine the 3 children's eligibility, and, if eligible, the grant amount:

Stepparent's (Mr. P.'s) income	$1,999.00
150% of poverty guidelines for 2 (monthly)	-1,992.00
Amount **exceeding** 150% of poverty guidelines	$ 7.00
Standard of assistance for a 3-person AU	**$ 336.00**
Less total countable income ($7.00 - amount of Mr. P.'s income which exceeds 150% of poverty guidelines, plus $50 - Ms. P.'s unearned income, plus $150 - the children's unearned income for a total of $207 in countable income)	- 207.00
Grant amount	**$ 129.00**

EXAMPLE #2:
Ms. J., who has been receiving TANF on behalf of herself and her 2 children reports that she remarried over the weekend. Ms. J. receives unearned income in the amount of $100 per month. Her husband, Mr. J. is employed, with earnings in the amount of $800 per month. Mr. J. has 3 children who live with his former wife, for whom he pays support in the amount of $400 per month.

1. To determine Ms. J.'s eligibility to be included in the AU:

Mr. J.'s income	$ 800.00
Less $90 deeming disregard	- 90.00
	$ 710.00
Less standard of assistance for 1 (Group II)	**- 182.00**
	$ 528.00
Less support paid by Mr. J. to non-household dependents	- 400.00
Income deemed available to Ms. J.	**$ 128.00**
Standard of assistance for a 3-person AU	**$ 336.00**

Since the portion of Mr. J.'s income which is deemed available to Ms. J. is less than the standard of assistance for 3 persons, she is eligible to be included in the AU. Proceed to grant calculation, since Ms. J. is eligible.

2. To determine the grant amount:

Standard of assistance for a 3-person AU	**$ 336.00**
Less countable income (Ms. J.'s unearned income)	- 100.00
Grant amount	**$ 236.00**

EXAMPLE #3:
Ms. L. is applying for TANF for herself and her 2 children. Her husband (not the children's father), Mr. L., is employed and earns $2,074 per month. Mr. L. has 1 child, who lives in the household also.

1. To determine Ms. L.'s eligibility to be included in the AU:

Mr. L.'s income	$ 2,074.00
Less $90 deeming disregard	- 90.00
	$ 1,984.00
Less standard of assistance for 2 (Group II) to include Mr. L. and his child	**- 267.00**
Income deemed available to Ms. L.	**$1,717.00**
Standard of assistance for a 3-person AU	**$ 336.00**

Since the portion of Mr. L.'s income which is deemed available to Ms. L. exceeds the standard of assistance for 3 persons, she is ineligible to be included in the AU.

2. To determine the 2 children's eligibility, and if eligible, the grant amount:

Stepparent's (Mr. L.'s) income	$2,074.00
150% of poverty guidelines for 2 (monthly)	-1,992.00
Amount exceeding 150% of poverty guidelines	$ 82.00
Standard of assistance for 2-person AU	**$ 267.00**
Less total countable income ($82.00 – amount of Mr. L.'s income which exceeds 150% of poverty guidelines)	- 82.00
Grant amount	**$ 185.00**

The two children are eligible for TANF. Though Mr. L.'s gross income exceeds 150% of poverty guidelines, his countable income does not exceed the standard of assistance for an AU of 2.

3. Deeming Income in Minor Caretaker and Ineligible Alien Cases - Income must also be deemed to an assistance unit in the following situations. Applicable policies and procedures are explained below.

a. Minor Caretaker Living with Senior Parent(s) - When living together, the income of a senior parent(s) is to be deemed available to the minor caretaker's assistance unit.* The senior parent's income must be considered available to the eligible child(ren) by applying the deeming procedure in Section 305.4.F.2.c. below. A stepparent's income is not deemed available to a minor caretaker's assistance unit.

* 45 CFR 233.20(a)(3)(xviii)

When the minor caretaker is an SSI recipient, and lives in the home of his/her parent, the income of the senior parent(s) is deemed available to the minor caretaker's TANF assistance unit. If eligibility for TANF exists, the Social Security Office must be informed that the income is being counted for TANF purposes. The EW must document the case record to show that the Social Security office has been advised that the minor caretaker's parent's income is being counted for TANF purposes.*

b. Ineligible Alien Parent - If a parent living in the home with the eligible TANF child is an alien and is ineligible for assistance for himself due to his alien status, the parent's income must be considered available to the eligible child(ren) by applying the deeming procedure in Section 305.4.F.2.c. below.

* 45 CFR 233.20(a)(3)(xviii)

c. Calculating the Deemed Amount - Federal regulations provide the following procedure for determining the amount of income to be deemed available to the TANF assistance unit from the senior parent(s) or an ineligible alien parent,* or a stepparent when the parent is not residing in the home because of military duty, employment or other reason, but the stepparent and parent are married and consider themselves to be living as husband and wife.

The amount to be deemed available is computed by subtracting the following from the verified anticipated gross monthly earned income (use net profit for earnings from self-employment) or gross unearned income of the senior parent(s), ineligible alien parent, or stepparent**:**

1) The first $90 of gross earned income of each employed person (the deeming disregard)

2) The standard of **assistance** for household members claimed or who could be claimed as dependents on the senior parent's, stepparent's, or ineligible alien parent's federal income tax return, excluding members of the assistance unit.

If the senior parent, stepparent, or ineligible alien parent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the senior parent, stepparent, or ineligible alien parent.

Exceptions: The needs of an individual(s) who is not in the assistance unit due to an IPV penalty, failure to comply with SSN requirements, failure to comply with the declaration of citizenship/alienage status requirement, or failure to cooperate with DCSE will not be counted in determining the number of dependents.

3) Support, including wage assignments paid to individuals not living in the home who are claimed or could be claimed as dependents on the senior parent's, stepparent's, or ineligible alien parent's federal income tax return.

If the senior parent, stepparent, or ineligible alien parent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

*45 CFR 233.20(a)(3)(vii)

Verify by statement from the senior parent, stepparent, or ineligible alien parent.

4) Payments for alimony and child support including wage assignments to individuals not claimed on the senior parent's, stepparent's, or ineligible alien parent's federal income tax return and not living in the household.

Verify by statement from the senior parent or the ineligible alien parent.

The amount remaining after the above deductions will be compared to the Standard of Assistance in determining the eligibility of the AU and the grant amount, if any.

Example 1: The parent of a minor caretaker applies for assistance for the minor caretaker's child. The senior parent explains that she is employed, is able to support her daughter, but does not feel that she should have to support her daughter's child. Because the child of a minor caretaker is not eligible for assistance unless the minor caretaker is also included in the AU, the senior parent must make application for both her daughter and the grandchild. TANF eligibility is determined as follows:

Gross Income of Senior Parent	$1760
Less $90 Deeming Disregard	- 90
	$1670
Less Standard of Assistance for 1 person, Group III	- **254**
Amount deemed available to AU	**$1416**
Standard of Assistance for 2, Group III	**$ 339**

$1416 > **$339** (SOA for 2) – AU is ineligible.

EXAMPLE #2: TANF recipient has an assistance unit of three (mother and two children). The mother reports she was married yesterday; however, her husband is not the father of her children. She reports he has earned income of $550 a month. TANF eligibility is determined as follows:

Gross Income of Stepparent	$ 550
Less $90 Deeming Disregard	- 90
	$ 460
Less Standard of **Assistance** for 1 person Group, II	-**182**
Amount deemed available to AU	**$ 278**
Support paid by the stepparent	- 0
Amount potentially available to AU	**$ 278**
Standard of Assistance for 3, Group II	**$ 336**

$278 < **$336** (SOA for 3) — AU remains eligible.

Failure of the client to verify the income of the senior parent or the ineligible alien parent will result in ineligibility of the case.

In situations where the income of a senior parent(s) is being deemed available to more than one assistance unit, the amount to be deemed will be divided equally among the units for which the parent(s) is responsible.

Note: A lump sum payment received by a senior parent or an ineligible alien parent is considered available to the assistance unit **as described at 305.4C.**

G. Other Cash Income - The total amount of all other cash income is to be counted. Specific procedures apply to certain types of other income:

1. Supplement to Standard of Assistance - In accordance with the option provided under federal regulations,* the State Board has ruled that local departments of welfare/social services may supplement in an amount sufficient to meet the difference between the payment standard and the 100% standard of need.

   If a local department meets, from local funds, the difference between the proportionately reduced standard and the full standard, it must do so in all cases and the amount of the supplement is disregarded.

2. Assistance from other sources - Any contribution from another agency or organization must be counted as income unless such contribution is for an item not included in the Standard (See Section 304.1).

*45 CFR 233.20(a)(3)(vii)

3. Home Energy Assistance - Payments made directly to a household for home heating or cooling provided by suppliers of home energy, such as electric and gas companies and fuel oil dealers, must be counted as income.* When payments are received jointly by a household composed of TANF and non-TANF individuals, including SSI recipients, the TANF assistance unit's pro rata share, based on the total number of persons in the household, must be considered as income to the TANF unit.

   The pro rata share of non-TANF and SSI individuals is not to be counted.** Note: Payments made through the Virginia Energy Assistance Program administered by local departments of social services are not considered home energy assistance and are disregarded per Section 305.4.A.16.

4. Public Assistance Benefits Received From Another State - It is possible for individuals who move from another state to Virginia to receive assistance from both states in the same month. However, the assistance paid by the state of prior residence must be considered in determining eligibility and benefit amount in Virginia. The amount of assistance received by the assistance unit from the former state is to be treated as unearned income in the month received.

   Example 1: An applicant applies in Virginia on August 30 and receives a grant from Pennsylvania for $100 in September which covers the period of the last week of August and the first week of September. If the assistance unit is eligible for assistance in September and the S0A is $320, the $100 of unearned income is subtracted from $320, for a grant of $220.

   Example 2: A Group II locality receives an application on September 2 requesting assistance for a parent and two children. The family received a TANF grant from another state on September 1 for $100 covering the period September 1-15, and the case is terminated in the former state effective September 15. The agency determines eligibility on September 10 (date of authorization). The first payment is calculated as follows:

   $320 - $100 = $220 - monthly deficit
   $220/30 = $7.33 - daily rate
   $7.33 x 21 days = $153.93 - prorated deficit
   $153 grant (rounded down)

5. Royalties are considered unearned income.

6. Interest earned on cash assets in excess of $10 a month, such as a bank account or certificate of deposit, is considered unearned income in the month received (available) unless anticipated to be received less often i.e., quarterly, annually, etc, in which case it may be prorated over the period earned if requested by the applicant/recipient. **Guidance** in Section 305.1. B.2 is applicable in determining if the income is "reasonably certain" to be received and, if so, the methods available to use to calculate the anticipated amount. Exception: Interest accrued on exempted Virginia Individual Development Accounts (VIDA) or Assets for Independence Act (AFIA) funds is not countable income.

* 45 CFR 233.20(a)(3)(xiv)
** 45 CFR 233.53(c)(2)

H. Benefits and Services Received in Lieu of Income - When an applicant or recipient appears to be working but is not paid directly, the worker must determine whether there is an identifiable amount that must be considered as income. Such arrangements must be evaluated using the following guidance:

If the client performs services but receives no pay directly, and there is an identifiable amount of income that could be paid directly to the client, count the identifiable amount as income.

If the client performs services but is not paid directly, and there is no identifiable amount of income that could be paid to the client, no income is counted.

Examples:

1. Situation #1: An applicant/recipient works for an employer and, in lieu of wages paid directly to the applicant/recipient, the employer pays an expense on behalf of the applicant/recipient. In this situation, there is an identifiable wage and even though it is not paid to the client it must be counted as earned income.

2. Situation #2: The applicant/recipient barters for services. There is an exchange of services for which no income should be counted. For example, an applicant or recipient receives shelter at no cost in exchange for babysitting and housekeeping services.

305.5 INCOME OF EXCLUDED CHILDREN REQUIRED TO BE IN THE ASSISTANCE UNIT – When a child is excluded from the assistance unit due to lack of verification of categorical requirements for the child (See 201.1.A.), or when such child fails or refuses to meet conditions of eligibility (See 201.1.B), that child's needs will not be included in the assistance unit. The earned and unearned income of that child, however, will be considered available to the assistance unit. The earned income disregards are applicable per Section 305.3.B. If the child's income cannot be verified, eligibility for the assistance unit cannot be established. (Refer to Section 305.1.E.3.)

If the child has been determined categorically ineligible to be in the assistance unit, no part of his income will be considered available to the assistance unit, unless it is actually made available to the unit. (See 201.12.A and D for treatment of income of the child subject to the family cap provision.)

to meet conditions of eligibility (See 201.1.B), that child's needs will not be included in the assistance unit. The earned and unearned income of that child, however, will be considered available to the assistance unit. The earned income disregards are applicable per Section 305.3.B. If the child's income cannot be verified, eligibility for the assistance unit cannot be established. (Refer to Section 305.1.E.3.)

If the child has been determined categorically ineligible to be in the assistance unit, no part of his income will be considered available to the assistance unit, unless it is actually made available to the unit. (See 201.12.A and D for treatment of income and resources of the child subject to the family cap provision.)

Maximum Income Chart

Size of Assistance Unit	Group I	Group II	Group III
1	**$279**	**$337**	**$470**
2	**444**	**494**	**627**
3	**568**	**622**	**757**
4	**688**	**742**	**877**
5	**812**	**877**	**1,043**
6	**914**	**981**	**1,141**
7	**1,030**	**1,095**	**1,262**
8	**1,156**	**1,223**	**1,389**
9	**1,264**	**1,332**	**1,499**
10	**1,384**	**1,450**	**1,615**
Each person above 10	**120**	**120**	**120**

TANF Grant Calculations

Step (1) Compare total gross countable income of all members of the assistance unit against the maximum income level (see Appendix **1** to Section 305).

The earned income disregards **of Section 305.1A.1** apply to this step.

If income of the A.U. exceeds the maximum income figure, the case is ineligible. If the income of the assistance unit equals or is less than the maximum income figure go to Step 2.

Step (2) To be used for screening initial applications and persons being added to an existing assistance unit. In the following order:

(a) Determine monthly gross countable earned income for the assistance unit.

(b) Deduct the standard deduction, as defined in Section **305.1A.2,** from total gross earned income of the assistance unit if the **case** qualifies for this disregard and the income is not exempted.

(c) Deduct 20% of the remainder of the gross income.*

(d) Deduct anticipated expenses up to the allowable maximum as specified in Section 305.3.B.**5**. for care of each dependent child or each incapacitated adult included in the A.U. if the employed person qualified for this disregard.

(e) Add any unearned income to the adjusted gross earnings.

(f) Screen the remaining income against the standard of assistance for the appropriate locality. If there is no deficit, eligibility does not exist. If there is a deficit, go to Step 3.

Step (3) (a) Determine monthly gross countable income for the assistance unit. In the following order:

(b) Deduct the standard deduction as defined in Section **305.1A.2 if the** income is not exempt **and** if the **AU** qualifies for this disregard.

*** 22 VAC 40-295-60**

(c) Deduct 20% of the remainder* of the assistance unit's earned income if the assistance unit qualifies for this disregard.

(d) Deduct anticipated expenses, up to the allowable maximum as specified in Section 305.3.B.5 for care of each incapacitated adult/child, if appropriate, included in the assistance unit if the member qualifies for this disregard.

(e) Add any unearned income to the adjusted gross earnings. The result net countable income.

Step (4) (a) Choose the appropriate Standard of Assistance for the applicant and members of the assistance unit from the appropriate locality group (Section 304, Appendices 1 and 2).

(b) Subtract the net income, including any unearned income from the Standard of Assistance.

(c) If there is a deficit of $9.99 or less, the assistance unit will be ineligible for a money payment; but the case will be deemed to be eligible for TANF and will be carried as an active TANF case.

* 22 VAC 40-295-60

SSA Quarters of Coverage Verification Procedures for Aliens

For aliens sponsored pursuant to the "Affidavit of Support Under Section 213 of the Act," the sponsor's obligation terminates if the alien has worked or can be credited with 40 quarters of qualified work. This appendix, in conjunction with the State Verification Exchange System (SVES) User Guide, contains the process for determining the number of qualifying quarters with which an alien can be credited.

To determine the number of quarters available to an eligible alien unit member, the EW must obtain answers to the following questions:

1. How many years has the applicant, the applicant's spouse, or the applicant's parents (before the applicant turned 18) lived in this country?

2. How many years has the applicant, the applicant's spouse, or the applicant's parents (before the applicant turned 18) commuted to work in the U.S. from another country before coming to the U.S. to live, or worked abroad for a U.S. company or in self-employment while a legal resident of the U.S.?

   (If the total number of years to both questions is less than 10 years, the agency does not need to ask question 3 because the 40- quarter standard cannot be met.)

3. In how many of the years reported in answer to question 1, did the applicant, the applicant's spouse, or the applicant's parent earn money through work?

   (To determine whether the applicant's earnings were sufficient to establish "quarters of coverage" in those years, the agency should refer to the income chart included in this appendix.)

If the answer to question 3 is 10 years or more, the EW must verify, from USCIS documents or other documents, the date of entry into the country for the applicant, spouse and/or parent. If the dates are consistent with having 10 or more years of work, an inquiry through SVES must be made.

Information received through SVES will not report earnings for the current year nor possibly the last year's earnings. The alien must provide verification of earnings through pay stubs, W-2 forms, tax records, employer records, or other documents, if the quarters of this period is needed to determine if the sponsor's obligation must continue or is terminated.

If the alien believes the information from SSA is inaccurate or incomplete, beyond the current two-year lag period, the alien must be advised to provide the verification to SSA to correct the inaccurate income records.

In evaluating the verification received directly from the alien or through SVES, the EW must exclude any quarter, beginning January 1997, in which the person who earned the quarter received benefits from TANF, SSI, Medicaid, **SNAP** or the food assistance block grant program in Puerto Rico.

Establishing Quarters

The term "quarter" means the 3-calendar-month periods ending with March 31, June 30, September 30 and December 31 of any year.

Social Security credits (formerly called "quarters of coverage") are earned by working at a job or as a self-employed individual. A maximum of four credits can be earned each year.

For 1978 and later, credits are based solely on the total yearly amount of earnings. All types of earnings follow this rule. The amount of earnings needed to earn a credit increases and is different for each year. The amount of earnings needed for each credit and the amount needed for a year in order to receive four credits are listed below.

Year	Quarter Minimum	Annual Minimum	Year	Quarter Minimum	Annual Minimum
1978	$250	$1000	**1996**	**$640**	**$2560**
1979	$260	$1040	**1997**	**$670**	**$2680**
1980	$290	$1160	**1998**	**$700**	**$2800**
1981	$310	$1240	**1999**	**$740**	**$2960**
1982	$340	$1360	**2000**	**$780**	**$3120**
1983	$370	$1480	**2001**	**$830**	**$3320**
1984	$390	$1560	**2002**	**$870**	**$3480**
1985	$410	$1640	**2003**	**$890**	**$3560**
1986	$440	$1760	**2004**	**$900**	**$3600**
1987	$460	$1840	**2005**	**$920**	**$3680**
1988	$470	$1880	**2006**	**$970**	**$3880**
1989	$500	$2000	**2007**	**$1000**	**$4000**
1990	**$520**	**$2080**	**2008**	**$1050**	**$4200**
1991	**$540**	**$2160**	**2009**	**$1090**	**$4360**
1992	**$570**	**$2280**	**2010**	**$1120**	**$4480**
1993	**$590**	**$2360**	**2011**	**$1120**	**$4480**
1994	**$620**	**$2480**	**2012**	**$1130**	**$4520**
1995	**$630**	**$2520**	**2013**	**$1160**	**$4640**

A current year quarter may be included in the 40-quarter computation. Use the current year amount as the divisor to determine the number of quarters available.

If you need to use quarters before 1978:

- A credit was earned for each calendar quarter in which an individual was paid $50 or more in wages (including agricultural wages for 1951 - 1955);
- Four credits were earned for each taxable year in which an individual's net earnings from self-employment were $400 or more; and/or
- A credit was earned for each $100 (limited to a total of 4) of agricultural wages paid during the year for years 1955 through 1977.

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401.1 BASIC REQUIREMENTS REGARDING APPLICATION -

A. Request for Assistance - Federal regulations* require that any individual wishing to do so shall have the opportunity to apply for whatever type of federal assistance he chooses. This means that no individual, including an individual who is a minor, or an individual who is potentially eligible in another federal category such as SSI, can be denied the right to make application for public assistance. The worker should assist the individual in selecting the appropriate categories of assistance. It is mandatory that the opportunity to apply be freely available and that no obstacles to application be imposed.

An inquiry,** which is simply a request for information about eligibility requirements, is to be distinguished from an application. No case folder is to be prepared for an inquiry and no case number assigned. An Inquiry Book, or comparable record, must be kept in each local office for recording the date and notice of each inquiry and the name of the person seeking information. **Note: TANF eligibility guidance must be applied to the facts of a specific application submitted by a household; the interview with the household based on the submitted application; and any additional information supplied by an applying household. Prior to receipt of an application, local agency staff must not provide advice or answers to hypothetical situations from applicants, potential applicants, or, those acting on behalf of others. Until a complete application is received by the local agency, an interview is conducted, and verifications are received, the local agency cannot be sure it has all the relevant facts. It is appropriate, however, to explain program eligibility criteria.**

A request for TANF must include, if living in the same household, the parent(s) and all minor siblings (both natural and adoptive) of the dependent child for whom assistance is requested. The eligibility worker will assist the applicant/recipient in determining who must be included in the request for assistance. If a child for whom assistance is requested is not eligible because categorical requirements are not met, he is a SSI recipient, he receives foster care maintenance payments, or he is a child subject to the family cap provision, he will not be included in the assistance unit and his income will not be considered available to the assistance unit.

When a parent or sibling enters the household or circumstances change that may require a parent or sibling living in the home to be included in the assistance unit, his eligibility for inclusion in the assistance unit must be evaluated. The new individual will be considered to be included in the application as of the day he enters the household or, if already residing with the unit, the day the individual's circumstances change requiring him to be included in the unit. A newborn is considered to be included as of his date of birth. The family cap provision per 201.12 may apply to a child born on or after May 1, 1996. If the caretaker refuses to provide the information about an individual required to be included in the assistance unit, it may not be possible to determine the unit's eligibility or payment.

* 45 CFR 206.10(a)(1) and (2)
** 45 CFR 206.10(b)(2)

The Food Stamp Act of 1997 requires that each applicant who is applying for TANF and also wishes to apply for Supplemental Nutrition Assistance Program (SNAP) benefits, must be allowed to do so in one interview if all members of the TANF assistance unit will be the same as those individuals who comprise the SNAP household.*

All applications for TANF, except on those on which the household has indicated that it does not want SNAP benefits, shall be regarded as SNAP applications. (At application the household will indicate if it does not want SNAP.) If the household's intention to apply for SNAP is unclear, the local agency shall determine at the interview, or in other contact with the household, whether or not the household wants to apply for SNAP benefits. The local agency shall conduct a single interview at initial application for both TANF and SNAP purposes. TANF households shall not be required to see a different eligibility worker or otherwise be subjected to two interview requirements to obtain the benefits of both programs. (Refer to the SNAP Manual, Volume V, Part II, H.)

B. Where/How Applications are Made – **An application may be made either electronically or in writing.**** Forms must be made freely available to the public upon request. The request for assistance must be made with the local department of social services in the county/city in which the applicant resides on either a permanent or temporary basis. **Applications may be completed in the local agency and an intake interview conducted. Applicants may also apply, make changes and complete renewals at https://commonhelp.virginia.gov.**

Any individual may request that an application be mailed to him. This must be done. An applicant may also file the TANF application by fax. **When an application is filed** the applicant must be advised that an interview with an eligibility worker is required in order to complete the processing of the application. This interview must be scheduled at the earliest date convenient to the applicant and may be conducted either in the local department, in the applicant's home, or by telephone. Any individual may request an application on someone else's behalf. If an individual requests an application on someone else's behalf, the local department must provide an application to the individual or mail the application directly to the person on whose behalf the application has been requested.

C. Definition of Applicant - In TANF, the applicant is the parent or relative with whom the child is living who has, either directly or through an authorized representative, made application for assistance and whose eligibility has not been determined. An authorized representative must be at least 18 years of age and must have sufficient knowledge of the applicant's circumstances to provide the necessary information. The authorized representative is usually a spouse, a guardian, or another relative who is able to provide the essential information. If there is doubt about whether an individual has been authorized to act on behalf of the applicant, the applicant must be contacted to verify that she/he wishes the other person to act for her/him and a signed statement must be obtained from the applicant and filed in the case record.

* 7 CFR 273.2(j)
** 63.2-501

An applicant may be assisted in the various aspects of the application process, if he so desires, by an individual(s) of his choice (who need not be a lawyer) and may be accompanied or represented by such individual(s) in subsequent contacts with the agency.*

* 45 CFR 206.10(a)(1)(iii)

D. Who Completes the Application - If an individual is able to complete the application him or herself, the individual should do so. However, the local agency must assist individuals who have disabilities or language barriers who need assistance filling out the application. This help may consist of reading the application to the individual, explaining the meaning of the questions on the application, writing in the answers, or providing other forms of help. The local agency must inform all applicants verbally that this help is available when the DSS office provides the individual with the application or when providing access to CommonHelp from an agency computer, and must offer this assistance during the interview if there is an indication that the individual has had difficulty completing the application. If the individual needs help completing the application, this help must be provided. If help is needed, the interactive interview must include time to read each section of the application to the applicant, with sufficient explanation and rephrasing to make the meaning clear. During the interview the eligibility worker will enter the information provided into the ADAPT system. Additionally, the following forms must be reviewed and completed with the applicant, and signed by the applicant, prior to case approval:

- Do You Have a Disability? (032-03-0670)
- Notice of Personal Responsibility for the TANF Program (032-03-0750)
- Notice of Cooperation and Good Cause (032-03-0036)
- Notice of Intentional Program Violations and Penalties (032-03-0646)

After the interview is completed, the information entered must be reviewed with the applicant. If application was made using the Request for Assistance, the Statement of Facts (SOF) must be reviewed with the client and the client's signature on the SOF obtained. The eligibility worker must also read and explain to the applicant/spouse the statements pertaining to the applicant's responsibilities including the responsibility for providing accurate information and the penalties for withholding or providing false statements. The **case record** must contain the Rights and Responsibilities form (032-03-0440-00) or be otherwise documented to show that the applicant was provided with oral and written information about his rights and responsibilities and acknowledged receipt of the information.

If the application is made by an adult, including an authorized representative, or by a married minor parent living with a spouse, only the signature of the person making the application is required on the application and required forms. The signature of the spouse should be obtained if the spouse participates in the interview. However, the absence of the spouse's signature will not negate the validity of an application. **For an application filed through CommonHelp, the application is considered signed when the applicant enters his name on the signature line.**

If the application is made by a minor parent who is single, separated, or divorced and who is living with a parent or relative, or with an individual standing in *loco parentis*, the application must also be signed by the parent or relative or individual standing in *loco parentis*. If the minor parent does not live with a parent, relative or an individual standing in *loco parentis*, and the agency determines that the minor parent meets an exemption to the minor parent residency requirement at 201.5C, only the minor's signature is required.

If the applicant wishes to change any of the information he has provided or any information as it appears on the application, the worker must make the change in the ADAPT system.

E. Time Standard for Processing Application - The local agency must provide assistance units that complete the initial application process a decision on their application by the 30th calendar day following the application filing date. This time standard covers the day following the date of receipt of the signed application to the date the assistance payment is issued or the notification of denial of assistance is mailed to the applicant. (The applicant must be informed of the time standard at the time of application.) When the 30th calendar day following the application date falls on a weekend or holiday, the worker must provide a decision on the application on the last working day prior to the 30th day.

1. Exception to the 30 day processing standard may apply when:

   a. the applicant has limitations that hinder him from securing verifications. In this instance the local agency must assist the applicant in securing verifications. The BDOA will be the first of the month following the month of application.

   b. an emergency beyond the agency's control occurs - If an agency delay occurs, and the application was otherwise eligible, the BDOA must be the date of application.

2. At no time should the application remain pending beyond 60 days.

   If action is not taken within the 30 day processing standard, the EW must document the case to explain the cause for delay and the applicant must be notified via the notice of action of the status of his application, the reason for delay, and his right to appeal. Additionally, the EW will need to enter the reason for the delay – client or agency caused - in ADAPT on the 30 th calendar day following the date of application. This will ensure that the case is correctly identified in the monthly timely processing statistics.

   Each application must be disposed of by a decision of eligibility or ineligibility, supported by the facts recorded in the case record and on the appropriate comment screens in ADAPT.

   Exception: Applications disposed of for reasons other than approval or denial will be treated in accordance with the provisions of Section 401.1(J), Disposition of Application under Special Conditions.

   Upon action to approve or deny an application, the applicant must be notified immediately that assistance has been authorized, including the amount of the money payment, or that his application has been denied. The notice must include a statement of the reasons for the action and an explanation of the individual's right to appeal. The Notice of Action must be used to notify the applicant of approval, denial, or delay beyond the time standard.

F. Method of Application – **Applications may be made either electronically or in writing. Applications made electronically are made at https://commonhelp.virginia.gov. Written applications are made by submitting a** signed Request for Assistance (032-03-0875). A signed Application for Benefits (032-03-0824) may be used if required by another program or in situations in which a telephone interview will be conducted. If the Request for Assistance or the Application for Benefits is not signed, the signature must be obtained or the application must be denied.

When the initial request is made in the local agency, the individual must be given the opportunity of completing his interview on the day assistance is requested. If an interactive interview cannot be conducted on the day assistance is requested, the agency must arrange an interview at the earliest date convenient to the applicant. If the applicant wishes, he may be given an Application for Benefits or Request for Assistance form to complete elsewhere.

The applicant must be informed that if he withholds or gives false information which affects his eligibility for assistance that he is subject to the penalties of perjury.* It is important that the client understand fully his responsibility for the accuracy and completeness of his statements and the consequence if he withholds or gives false information.

If the Request for Assistance is used but the applicant does not make herself available for an interview, the application is to be denied. In ADAPT, the worker must register the application then deny the registration.

G. Date of Application - The date of application is the date the signed Request for Assistance or the Application for Benefits form is received by the local agency. If the application form is mailed in or brought in, the date of receipt by the agency must be stamped thereon to identify the date of application. In the case of an applicant who initially applies for another program then decides to also apply for TANF while the application for the other program is still pending, the date of application for the TANF benefits is the date the applicant requests TANF (not the date the application for the other program was provided).

1. Persons Added to an Ongoing Case

a. The date of application for adding a required unit member to an approved TANF case is:

1) The date the individual entered the home if it is reported timely; or
2) The date it is reported that the individual is in the home if not reported timely.

* Code of Virginia, Section 63.2-502

b. If the individual requesting to be added to an approved case is not a required unit member, the date of application is the date of the individual's request.

2. Persons Added to a Pending Application - When an individual is added to a pending application, the individual's date of application is the same as for the application already pending.

H. Effective Date - Effective date means the date that benefits begin or change or are no longer issued. When action is taken to approve a case, the term "effective date" is the same date as the beginning date of assistance (BDOA). When action is taken that results in a change in benefit level, "effective date" means the first day of the month the new benefit amount is issued. When the change involves the suspension or termination of benefits, the effective date of the change is the first day of the month that benefits are no longer issued.

(Note: So that the client understands that no benefits will be issued in the month following a suspension or termination, the language on the ANPA references the last month and day for which assistance is received rather than the month for which benefits will not be issued. The ANPA statement reads, for example: Your benefits will be terminated effective January 31, 20 . ADAPT is programmed so that it will count the last day of the month in computing the time available for the 10-day notice for the change that is effective on the first day of the following month, in this case, February 1, 20_ _ . In the case of a manual ANPA completed by the worker, the effective date will also be the last month and day for which assistance is received.)

I. Beginning Date of Assistance (BDOA) - When eligibility for financial assistance is determined within 30 days following the date of application, eligibility shall begin effective the date of application. The date of application is the date the signed application was received by the local agency. No payment shall be made for a period prior to the date of application.

If eligibility is not determined within 30 days following the date the application was received **due to a client delay**, the BDOA will be the first of the next month (month following the month in which the application is received, provided eligibility is determined to exist). **If eligibility is not determined within 30 days following the date the application was received due to an agency delay, the BDOA will be the date the signed application was received by the local agency.**

Eligibility must be determined for each month of the application period. Applicants may be ineligible for the month of application and the month of processing, however, if eligibility exist for the future month, approve the application, deny benefits in ADAPT for the month of application and the next month, and grant for the future month.

Refer to Section 401.2.B.2.c. and d. for adding persons to an existing case.

J. Disposition of Application Under Special Conditions* - An application may be disposed of for reasons other than approval or denial under the following special conditions. In such cases the "**Notice of** Action" must be sent.

1. Withdrawal - An applicant may voluntarily withdraw his application at any time during the initial determination of eligibility. This may be done by a signed statement indicating the wish to withdraw the application or may be done by verbal request. The "Notice of Action" must be sent to confirm the applicant's notification that he wishes to withdraw. It can be printed and given to the applicant during the interactive interview.

2. Inability to Locate - If reasonable efforts to locate the applicant are unsuccessful, the agency must include on the notice to client of action the agency's attempts to locate him or request that he contact the agency. If the applicant does not contact the agency so that a decision can be made within the time standard, the application will be denied.

3. Death - If the applicant dies before action can be taken on his case, his application is denied and a letter must be sent to the next of kin, if known, advising that an application for public assistance on behalf of the eligible children had been made and is being denied. The case record must contain verification of death, including the date of death.

When an application is disposed of under one of the conditions described above, board action on the case is not required, but the basis for termination must be recorded in the case record. Cases denied under these conditions are recorded statistically as applications withdrawn and should be reported to the local board at its next meeting.

* 45 CFR 206.10(a)(8)

401.2 INITIAL DETERMINATION/REDETERMINATION OF ELIGIBILITY -

Methods for initial determination and redetermination of eligibility shall be consistent with the objectives of the program and shall respect the rights of individuals under the U. S. Constitution, the Social Security Act, Title VI of the Civil Rights Act of 1964, and all other relevant provisions of the State and federal law.

A. The Intake Interview -

Each determination of eligibility will include a personal interview with the applicant/recipient, or the caretaker-relative of the needy children. The number of interviews will depend on the individual situation. The interviews are scheduled with the least possible delay on the basis of joint planning by the client.

If **the interview is not conducted at** the local agency the agency may conduct a phone interview, home visit, meet elsewhere, or interview an authorized representative. The agency must waive the face-to-face interview on a case-by-case basis depending on individual circumstances that include, but are not limited to, disability, illness, care of a household member, hardship due to residency in a rural area, prolonged severe weather, work or training hours during normal agency office hours, situations where residents of shelters for battered women and children would be endangered if they were to leave the shelter, or transportation difficulties. **In addition, phone interviews may be conducted at the discretion of the local agency.**

The setting that is chosen for each interview is that which **provides for the integrity of the application process** and is most satisfactory for the applicant/recipient and the agency.

If the applicant formerly applied for or received assistance, the worker should familiarize himself with the content of the record before the interview, in order to plan for a helpful and appropriate interview.

The purposes of the interview are:

(1) To make certain that information provided is complete and accurately represents what the applicant wants to say about his circumstances.

(2) To ensure that the request for assistance includes the parent(s) and all minor siblings (both natural and adoptive) living in the home with the dependent child(ren) for whom assistance is requested.

(3) To determine what information provided needs further substantiation and what, if any, additional information or substantiating evidence is needed to establish eligibility.

(4) To obtain the additional information needed for a decision as to definitive eligibility.

(5) To explain to the applicant the provisions of the Division of Child Support Enforcement and the right to claim good cause for refusing to cooperate. The worker must also explain provisions regarding continued DCSE services following the termination of assistance.

(6) **To provide an oral and written explanation of the applicant's rights and responsibilities and the consequences to the applicant if these responsibilities are not met.**

(7) To inform the applicant of the services the agency provides.

(8) To inform the applicant that he may be selected to participate in an audit for a complete verification of information.

(9) To inform the applicant(s) of the family cap provision.

(10) To ensure that any necessary help is provided to individuals who might otherwise have difficulty completing the application for literacy, language, or disability-related reasons.

B. Substantiation of Eligibility Factors

1. Initial Eligibility

The applicant must be advised of the need to substantiate eligibility factors (e.g., categorical requirements and income) **including changes to the eligibility factors that may occur during the application process. The applicant must be advised that changes that occur after the initial interview and before the date of the Notice of Action to approve must be reported within 10 days. Changes that occur within 10 days following the date of the Notice of Action to approve must also be reported.**

The responsibility of the eligibility worker is to secure, evaluate, substantiate, and record the facts regarding each element of eligibility, including the date of substantiation and the method of securing the information**. This responsibility includes acting on information reported by the applicant during the application processing period as noted above.** This information must be entered in the applicant's ADAPT case.

In determining initial eligibility, the EW will verify the following eligibility factors through inquiries into the relevant systems:

- Alien Status – SAVE
- Alien Number - SOLQ-I, the State Online Query-Inquiry System, via SPIDeR (if not entered into the ADAPT record and/or verified at registration)
- Social Security Number – SVES (State Verification and Exchange System) or SOLQ-I (if not entered into the ADAPT record and/or verified at registration)
- Child Support - DCSE APECS system, via SPIDeR
- SSA/SSI – SOLQ-I
- Unemployment Income – VEC, via SPIDeR
- Earned Income – Work Number, via SPIDeR, but only when information cannot be verified through other means

The EW must document the date and results of the systems inquiries in the comment box on the appropriate non-financial or income screens in ADAPT. If a system inquiry confirms that an individual does not have unearned income, the EW will document that in the comment box on the AEAUTA screen.

At the time of application, there should be a joint decision between the client and the worker as to how necessary verification will be secured and who will assume the responsibility for securing each. The worker must provide any assistance unit that needs and wants help, assistance in obtaining any necessary verifications. If the individual has a disability that impairs the individual's ability to gather the information necessary to establish eligibility for benefits, the worker must offer to assist the individual in gathering such information. In addition, if after the worker and applicant initially divide the responsibility for obtaining verification the applicant is, due to a disability, unable to secure information he or she agreed to obtain, the worker must revise the initial division responsibility and assist with obtaining additional information.

If, after advising the applicant of the necessary information, the applicant is reluctant or unwilling to provide verifications and refuses to permit the worker to secure them, the worker must consider carefully with him his reasons and explain that without the required verification, eligibility cannot be established.

Exception: If the child does not meet the conditions of eligibility, that child will be excluded; however, it may be possible to determine eligibility for the remaining assistance unit members.

If the client decides to assume the responsibility for obtaining the required verification, he must be advised that the information must be provided to the agency within ten (10) days and that failure to do so may affect the decision of eligibility. If the client cannot obtain the necessary information, because of circumstances beyond his control, and requests the worker's assistance in securing such information, the agency worker must then assume the responsibility for obtaining the needed verification.

When the responsibility for obtaining verification has been assumed by the worker, the client must be advised that if the agency or person from whom verification has been requested does not respond to the request, eligibility cannot be established. In these situations, the Notice of Action must be sent and the case record documented to reflect attempts made to obtain verification. Copies of all relative correspondence must also be in the case record.

If eligibility is established within the original 30-day processing time, the original application date is protected when an application is denied as a result of lack of required verification. The initial application date must be used if subsequent information substantiates the applicant's eligibility. (See 401.3.F.5.)

2. Ongoing Eligibility

When changes occur within the renewal period that affect eligibility or benefit amount, the agency must evaluate the change and take action to adjust the benefit amount, if necessary. The responsibility for changes lies with both the TANF AU and local agency. The individual must report changes in the household income and assistance status. The agency must make adjustments in entitlement and benefit amount based on reported changes and for changes the agency initiates.

a. Changes That Must Be Reported

1) The following changes must be reported by the TANF AU following case approval:

- Changes in address (a new physical or mailing address);
- Changes in income that places the monthly income of the household above 130 percent of the federal poverty level (FPL) for the number of people in the TANF AU (composition at approval or most recent renewal). (“Household,” for the purposes of determining income changes that must be reported, means the AU plus any other required unit members who reside together with the AU members. These required unit members include step-parents, parents who are not U.S. citizens or eligible aliens, and others whose needs are not included on the grant.

See 302.7D and 302.7E for a comprehensive list of these individuals. The income of these related, but ineligible individuals, would have been considered in determining the TANF grant amount for AU);

- Changes in household composition resulting from one of the following individuals entering or leaving the home:
  - an eligible child, including a newborn,
  - the father or mother of an eligible child, including a newborn;
- Changes that affect participation in the VIEW Program. This would include changes in the need for transportation, child care, or any other supportive service.

Assistance units must report the changes listed above within 10 calendar days from the date the unit knows of the change, but the report is timely if reported by the tenth of the following month. The 10-day period begins the day the change becomes known to the assistance unit. If the assistance unit is uncertain of the exact date or the exact amount of income that has changed, the 10-day reporting period begins the day the change occurs. The change may be reported on the Change Report form, by telephone, face-to-face, by mail, or electronically.

In addition, the recipient should be asked to report changes to his telephone number.* Because telephone number changes do not affect eligibility or benefits, the agency will not take negative action if a telephone number change is not reported.

2) Local Agency Action on Changes

The agency must act promptly to terminate or to adjust benefits when changes in the assistance unit's circumstances or income are reported by the recipient, including information about an impending change reported at application. The TANF case must reflect the following changes:

- changes reported by the assistance unit;
- changes put into ADAPT to meet reporting requirements or guidance requirements of another program;
- changes to prevent duplicate receipt of benefits including information provided through a PARIS Match; and
- changes that are considered verified upon receipt, such as notification by the foster care worker that a child has been removed from the home and placed in foster care.

*63.2-501.1

Information may become known to the agency through means other than listed above such as information provided **for SNAP Interim Reporting, or information provided** by the ESW regarding a VIEW participant. If the change is one that the assistance unit was required to report, the agency must act on the information. If the change is a change that was not required to be reported, the agency must hold the information and evaluate it at the next renewal.

Action will be taken according to Section 305.1, page 11.

b. Substantiation of Eligibility - The recipient must be advised of the need to substantiate eligibility factors whenever a change is reported. When changes that affect eligibility or payment amount occur after the case has been approved, the responsibility for the change lies both with the recipient and the local agency.

If required verification is not obtained or provided in time to prospectively determine eligibility for the next payment or to complete a redetermination by the due date, continuing eligibility cannot be determined and the case will be suspended for one month only. If verification is still not provided, the case will be closed for the month following the month of suspension. (See 401.3.G.4.)

If verification is provided after the action to suspend has been taken, the worker will reinstate assistance for the month of suspension, if appropriate. Or, if verification which establishes continued eligibility is provided after action to close has been taken but before the effective date of closure, the worker will reinstate assistance effective with the month closure was to occur.

c. Adding Persons Required to be in the AU - The AU must report a new unit member when completing a renewal. If a new unit member enters the home between renewals, the report is considered timely provided the individual entered the home after the most recent was completed. Note: when the new unit member is an eligible child or the parent of an eligible child and he/she enters the home between renewals, the report is considered timely only if the AU reports the change within 10 calendar days from the date of the change or by the tenth of the following month.

The change to add a person required to be in the assistance unit must be made by the agency within 30 days following the date the new member was reported to the agency.

1) Eligibility for Payments – Once the agency has obtained either a completed and signed Eligibility Review – Part A form (032-03-0729A) or a signed Statement of Facts and the agency has secured verification of categorical requirements and conditions of eligibility have been met, the individual's needs and income are to be included in determining eligibility and the amount of future payments.

If verifications and conditions of eligibility are substantiated within the 30-day time frame for adding persons or the 30-day period has passed and the agency can document that the delay in providing categorical verifications/meeting eligibility conditions was due to good cause (beyond the assistance unit's control), payments beginning with the date the change was reported must be recalculated considering the individual's needs and income.

Regardless of whether the new individual's presence is reported timely, if the required categorical verifications are not provided or the conditions of eligibility are not met until after the 30-day time frame established for adding the individual, and the delay was not due to good cause (beyond the assistance unit's control), eligibility for retroactive payments is to be determined beginning with the date the last required verification was received by the agency or condition of eligibility was met. Any underpayments identified must be corrected.

The above procedures will require the proration of the first month's assistance in most instances. (Refer to Section 502.2.A.)

NOTE: Refer to 201.12 for the family cap provision which affects newborn children, some adopted children, and the child subject to the family cap provision who moves back into a parent's home.

Repayment of Overpayments - If the new individual was not reported timely, overpayments may exist. Follow procedures in Section 503.7.G. to calculate the amount overpaid.

2) Example: A parent enters the home on October 15 but is not reported to the agency until January 8 of the following year. The last renewal was completed in November, one month after the parent entered the home. All months beginning with the month after the parent entered the home must be evaluated for possible overpayments.

d. Adding Other Persons - A request to add an individual not required to be in the unit, such as a caretaker-relative other than a parent or EWB, will be processed within the normal 30-day application processing time frame, with eligibility effective no later than the month following receipt of the request per Section 401.1.I.

3. Evaluation of Reported Information - To ensure the applicant/ recipient has provided all information necessary for the worker to make a proper determination regarding eligibility, every element on the Statement of Facts (SOF) must be discussed with the client at each application or renewal. If the SOF is not a required part of the case record, every element on the Application for Benefits or the Eligibility Review form (Parts A and B) must be discussed instead.

Additionally, when a change is reported by the client, all elements related to the change must be reviewed to ensure continuing eligibility exists.

When statements, either written or verbal, made by the client are deemed questionable, further evaluation of the client's circumstances is required. Questionable information will include, but is not limited to, statements which are:

a. incomplete or unclear;

b. inconsistent with statements previously made by the applicant/recipient;

c. inconsistent with information known by the local agency.

4. Income v. Expenses - In situations where it is obvious the client's monthly expenses exceed verified income, the worker shall discuss with the client how monthly expenses are being met. The worker may not require verification of the client's expenses as a condition of eligibility. Furthermore, assistance may not be denied or terminated based solely on statements made by the client. Rather, the worker shall take this opportunity to explore the client's situation to determine if unreported income is available which allows the assistance unit to meet monthly expenses. The case record must be clearly documented to accurately reflect the client's substantiation of his/her situation. If the worker and the client are unable to resolve the client's circumstances, attempts to do so must also be documented in the case record. It is important to remember, however, that assistance can only be denied/terminated when income is uncovered which, when verified, exceeds prescribed limits or when the client acknowledges he has unreported income but refuses to verify the source and/or amount.

5. Follow-Up on Suspected Unreported Income - When the agency has reason to believe that a recipient is receiving income that has not been reported, the eligibility worker will follow-up on obtaining information to substantiate the recipient's circumstances. Community complaints, expenses exceeding income, a history of not reporting, and cases with individuals living with the assistance

unit whose income would be deemed available are examples of the situations which may indicate the need to solicit additional income information. Forms are available in ADAPT that may be used for this purpose. The case record must be documented regarding the agency's reason for sending the income form. However, the income form is not an eligibility requirement; therefore, negative action cannot be taken for failure to return the form. If the agency chooses not to use the income form, the case record must contain documentation of the attempts to clarify the possibility of unreported income.

C. Interviews – An interview by the eligibility worker is required at the time of initial determination and at least every 12 months thereafter. The interview shall be used to obtain verification and to secure information necessary to complete the application/redetermination process. The interview may be conducted in the office of the local agency, the home of the applicant/recipient, a place agreeable to both parties, or by telephone. Home visits may be deemed necessary or appropriate by the local department.

D. Practices Specifically Prohibited - The following practices are specifically prohibited:

(a) Entering a home by force, without knocking or under false pretenses.

(b) Making home visits outside of working hours, unless such a visit cannot be arranged during working hours because of the applicant/recipient's employment, or a home visit has been requested by the applicant/recipient. When such visits are necessary, the case record must be documented accordingly. Making visits other than specified is not acceptable under any circumstances.

(c) Searching in the home, in closets, drawers or papers, etc.

E. Recommendation Regarding Eligibility - The eligibility determination must be completed as promptly as possible, but in all cases within the time needed to assure the assistance payment is issued, or notice of denial is mailed to the applicant within 30 calendar days following the date of application.* When the 30th calendar day following the application date falls on a weekend or holiday, the worker must provide a decision on the application by the last working day prior to the 30th day. When the eligibility determination is completed, the eligibility worker is responsible for making a recommendation of eligibility or ineligibility. The recommendation must be supported by the facts recorded in the eligibility case record.

When an application by an otherwise eligible refugee household (which includes most households meeting a qualified alien category) is denied because the household does not meet TANF non-financial requirements, the application will be evaluated for Refugee Cash Assistance (RCA) eligibility following guidelines in the Refugee Resettlement Program Manual. The RCA guidance can be accessed at http://spark.dss.virginia.gov/divisions/cvs/ons/files/policy/sectio ns/section_03.pdf.

Note: In areas served by a Refugee Social Services Employment Program (RSSEP), applicants must be registered and referred to the RSSEP for employment services as a condition of eligibility for RCA. Guidelines for the referral process and contact information for the RSSEP provider are contained in the Refugee Resettlement Program Manual.

F. Decision of Eligibility - Federal regulations** require a decision be made promptly on applications, in accordance with the State established time standards, unless the application is disposed of under special conditions.

A decision of eligibility or ineligibility must also be made when eligibility is reconsidered as specified in Section 401.3.***

The Code of Virginia, Sections 63.1-109 and 63.1-114, provides that the decision of eligibility is the responsibility of the local board. However, the Superintendent is to take action with regard to eligibility if the local board does not act within the specified time limits or if the circumstances require immediate assistance to prevent hardships or other action. The superintendent's action in such instances is official and not subject to confirmation by the local board; the case must be presented to the local board at the next meeting, however, for action on continuing eligibility.

Case Action - This is the formal agency action and is required with respect to initial determination of eligibility and, if eligibility exists, the amount of assistance and BDOA; persons eligible for assistance; method of payment and designation of payee, if other than eligible person; changes in amount of assistance payment; ineligibility for assistance.

All case actions must include the effective date of the action taken. In actions regarding an initial payment, this will be the BDOA.

* 45 CFR 206.10(a)(3)
** 45 CFR 206.10(a)(8)
*** 45 CFR 206.10(a)(9)

401.3 RENEWAL OF ELIGIBILITY - Eligibility for TANF recipients must be redetermined on all eligibility factors subject to change at least every 12 months, unless a shorter renewal period is required by SNAP. The renewal process is made up of the following three elements: a renewal application, a renewal interview, and reevaluation of all required eligibility factors. All elements are necessary in order for TANF eligibility to be renewed.

A. A renewal of eligibility cannot be considered complete and the renewal date cannot be updated in ADAPT until the following requirements have been met:

1. All elements must be reevaluated and substantiated except date of birth; relationship, if the caretaker remains the same; citizenship; and social security number; or

2. If all required elements have not been reevaluated and substantiated, assistance must be suspended in accordance with Section 401.3 G. The time limit on suspension of assistance (one month unless there is a different reason to suspend for a second month) is applicable to renewal suspensions.

3. The month in which the renewal of eligibility is due to be completed is counted from the date of eligibility (include the month of initial eligibility in this computation) and any changes discovered during the review process should be reflected in the following month, unless such changes are prohibited by the time standards.

Example: Date of Application - July 3; Date of Approval - July 20; BDOA - July 3; Renewal Due – June, Effective July 1

Date of Application - July 10; Date of Approval - August 7; BDOA – July 10 Renewal Due – June, Effective July 1

Date of Application - July 21; Date of Approval - September 5; BDOA - August 1; Renewal Due – July, Effective August 1

B. Renewal Application

A renewal application may be made either electronically at https://commonhelp.virginia.gov or in writing by completing the Renewal Application for Auxiliary Grants (AG), SNAP, and TANF (032-03-729A). A renewal application made on line is considered signed by the applicant when submitted. The written application, Renewal Application for AG, SNAP, and TANF, must be signed by the applicant to be valid. Note: If a renewal interview is held without a formal application via CommonHelp or **a** Renewal Application for AG, SNAP, and TANF, the Statement of Facts (SOF) must be printed and signed by the recipient to meet the renewal application requirement.

C. Renewal Interview

1. An interview must be completed with the recipient once every 12 months. An interview may be conducted in the office of the local department of social services, the home of the recipient, or a place agreeable to both parties which will insure privacy and confidentiality, or by telephone. Home visits may be made as deemed necessary by the eligibility worker based on the recipient's circumstances.

2. The recipient's rights and responsibilities must be reviewed and explained. (Note: Secure the client's acknowledgement that rights and responsibilities have been reviewed orally and in writing at renewal if this information was not documented in the record at the time of application.)

C. Joint Processing - The Food Stamp Act of 1977 requires that renewals for TANF and SNAP be handled in a single interview when the following conditions exist:

1. When all persons in the case receive TANF and SNAP benefits as the same household, and

2. When the SOF is completed prior to the month or in the same month in which the certification period ends. (Refer to the SNAP Manual, Volume V, Part 2, H.) The provisions in Section 401.1.A. also apply to renewals.

D. Overdue Renewals - In the event that a renewal of eligibility is not completed according to the above, the worker will adjust the time frame by scheduling the intervals at no later than 12 months from the month in which the application is completed. Example: The regularly scheduled renewal was due to be completed in January; however, it is not done until March to be effective April 1. The next renewal will be due in March.

E. Establishing Separate Assistance Units - A new application must be completed when an individual or family separates from a family group which is receiving assistance and forms a separate assistance unit. The new application must be processed in accordance with guidance.

F. When Completion of a New Application Is Not Required

1. Adding an individual to an existing assistance unit. Verification of all eligibility requirements must be obtained on the new individual and an evaluation of the new assistance unit's need and eligibility must be made. (See 401.2 B.2.c. and d.)

2. Changing the case name in a case receiving only TANF (or TANF-UP) when the parent or caretaker relative who is the case name leaves the household for any reason or dies. When a parent who is the case name is no longer in the home, the case name can be changed to that of another parent who remains in the home with the children. Likewise, when a caretaker relative who is the case name is no longer in the home, the case name can be changed to that of another caretaker relative who remains in the home.

Note: The case name cannot be changed from a parent to caretaker relative, or vice versa, even if both were residing in the home with the child. A new application will be required. A new application will also be required when an individual not already living in the home wishes to join the household and become the case name.

Example A: The father in a two-parent TANF or TANF-UP household leaves the household. The case can be put in the mother's name.

Example B: A grandmother and grandfather are both in the home with the grandchildren. Neither is needy and neither is part of the assistance unit. Following the death of the grandmother, the case can be put in the grandfather's name as payee.

Example C: A grandmother and grandfather are both in the home with the grandchildren. Both grandparents are needy, but only the grandmother is included in the AU. (The grandfather is excluded based 302.3 and 302.7 and is not an EWB, 302.6). Following the death of the grandmother, the grandfather can be added to the AU and the case put in his name.

3. A guardian, committee, or personal representative payee is appointed or the payee changes. The new payee, identified as committee or personal representative, must sign a new SOF.

4. Emergency Assistance is granted to a current recipient of TANF.

5. The action to deny an application is reversed by a hearings decision.

6. Action taken to deny an application or close a case as a result of the lack of required verification is reevaluated as a result of information received by the worker within 30 days following the application date or prior to the effective date of closing and eligibility is determined to exist. (See 401.2.B.)

G. Suspension of Assistance* - The grant will be suspended for one month when the agency has reason to believe that ineligibility will exist for only that month. The grant will be suspended for two consecutive months only when the reason for suspension in the second month is different than the reason for the suspension in the first month. For example, a case is suspended the first month because the recipient fails to complete the renewal interview. If the recipient then completes the interview but needs to return information to establish continued eligibility, the case is suspended for a second month to allow the recipient time to furnish the information.

There shall be no instances in which a case is suspended for more than two consecutive months. If the information needed to establish continued eligibility is not provided or renders the case ineligible, the payment for the following month will be terminated and the case closed.

Suspension of a payment is appropriate when:

1. Actual income is being used to calculate the payment according to Section 305.1.B.2. and it is anticipated the recipient will receive a periodic extra pay check in the payment month.

2. Anticipated income causes ineligibility for one month.

3. The agency cannot contact the recipient and contact is necessary to establish continuing eligibility and the recipient cannot be located or agency mail to the recipient has been returned by the post office. The case must be documented on agency efforts to locate the recipient. Suspension shall occur as soon as administratively possible.

4. Information needed to verify a change in circumstances or to substantiate eligibility is not provided in time to impact the next payment. (See 401.2.B.2.)

5. The recipient fails to complete the renewal process.

6. The current net monthly support exceeds the current TANF benefit (ADAPT will automatically close the case when net support exceeds the TANF benefit for two consecutive months).

7. A lump sum is received. (See 305.4C)

* 45 CFR 233.34(d)

Exception: The full grant is sanctioned (i.e., the case is eligible for $0 grant) when a VIEW participant is not in compliance with VIEW work requirements. Since the TANF case is not closed for a VIEW sanction, the sanction is imposed by a suspension of the grant using the appropriate suspension code.

401.4 NOTIFICATION TO APPLICANT/RECIPIENT - Federal regulations require that adequate and timely notice be sent to applicants and recipients to indicate that assistance has been authorized, denied, increased, reduced, or terminated.

"Adequate" means that the notice (Notice of Action) is received not later than the effective date of the action and includes a written statement of what action the agency intends to take, the reason for the action and the specific guidance supporting the action. In the case of an assistance unit which has no permanent dwelling or fixed address and is otherwise considered homeless, the notice must be available at the local agency or mailed to another destination agreed upon by the client, such as a nonprofit agency or shelter, local post office, etc., to ensure it will arrive at such destination not later than the effective date of the action.

"Timely" means that the notice (Advance Notice of Proposed Action) is mailed, or available at the local agency in the case of an assistance unit which is homeless, at least ten (10) days before the effective date of the action, excluding the date of mailing and the effective date.

In certain situations timely notice is not necessary but adequate notice is always required.

A. Action Requiring Adequate Notice - Adequate notice must be sent to the applicant/recipient* whenever:

1. Case action is taken to approve or deny an application or a request for an increase in grant; or

2. There has been a delay beyond the time standard in acting upon an application or a request for an increase in grant; or

3. Case action is taken to increase the amount of assistance; or

4. Case action is taken to include an additional eligible person in the grant or to change the number of eligible persons if no decrease in assistance results; or

5. Case action is taken to change the payee or the method of payment;

6. Client requests closure of a VTP case.

7. VTP recipient transfers to another Virginia locality and is no longer eligible to receive the VTP.

8. A reevaluation of eligibility based on information received within 30 days of the date following the application date or prior to the effective date of case closing occurs.

The notice shall be sent immediately following the case action or at the expiration of the time standard for processing applications, as appropriate.

* 45 CFR 206.10(a)(4)

The Notice of Action (NOA) is used for this purpose. The notice shall state the amount of assistance; the reasons for the action or failure to act and the regulations supporting action taken; and explain the applicant's/recipient's right to appeal if he disagrees with the action. The NOA provides all required information regarding appeals. A copy of the pamphlet, "Appeals and Fair Hearings", will be provided at the request of the applicant/recipient but is not required to be sent with the NOA.

B. Other Action Requiring Adequate Notice - The form, Advance Notice of Proposed Action, will be used to provide adequate notice in certain situations, however, it is not necessary to send it 10 days prior to the effective date of the action. The notice must reach the client no later than the effective date of action. In any situation listed below, the assistance payment will not be issued in the original amount. The following situations would warrant an adequate notice.*

1. The agency has factual information verifying the death of a recipient or of the payee when there is no relative available to serve as new payee and no person who can serve temporarily as emergency payee.

2. The agency has verified that any member of the assistance unit has been admitted or committed to a mental institution or a correctional facility in which he does not qualify for public assistance.* Note: See guidance in 201.5.B to evaluate continued eligibility.

3. The recipient's whereabouts are unknown and agency mail directed to the payee has been returned by the post office indicating no known forwarding address. (The recipient's check must, however, be made available to him if his whereabouts become known during the payment period covered by a returned check.)*

4. A recipient has been accepted for assistance in a new jurisdiction within the state and the locality previously providing assistance has written evidence establishing that fact.*

5. The agency has written evidence that the TANF child(ren) has been removed from the home as a result of a judicial determination or has been placed in foster care.*

* 45 CFR 206.10(a)(4)

6. A special allowance granted for a specific period (for example, correction of a prior underpayment) is terminated and the recipient has been informed in writing that the allowance shall automatically terminate at the end of the specified period.*

7. When a recipient becomes a patient receiving skilled care, intermediate care or similar other long term hospitalization. Note: See guidance in 201.5.B. to evaluate continued eligibility.

8. When a recipient requests termination of assistance **by telephone or in writing**. **The** written **request must be** signed and dated by the recipient. If the recipient fails to enter the date, the worker must enter the date such statement is received in the agency.*

9. When **a recipient** provides a signed, written statement:

   a) providing information which requires termination or reduction of assistance **(but does not request closure of the case)**; and

   b) indicating that the **recipient** understands that action to reduce or terminate assistance must be taken in response to the information provided **and she waives her right to receive a timely notice**.*

C. Action Requiring Timely Notice - Federal regulations,** require that in certain cases of proposed action to terminate, or reduce assistance, the Advance Notice of Proposed Action must be sent to the client. The agency may use the Notice of Action for this purpose, unless benefits in both TANF and SNAP are being reduced or terminated simultaneously.

When a change requires both a reduction or termination in public assistance benefits and a reduction or termination in SNAP benefits, the local agency shall issue a single Advance Notice of Proposed Action for both the public assistance and SNAP action.*** Timely notice must be sent to the recipient whenever the case is determined to be ineligible and whenever the grant must be reduced or terminated based on a change in the circumstances reported by the client or from any other source, or when the client fails to verify a change as requested.

When the proposed action is to sanction a case for noncompliance with the Virginia Initiative for Employment not Welfare (VIEW) program, advance notice must be given using the Advance Notice of Proposed Action (032-03- 0018-29). A copy of the notice must be sent to the Employment Services Worker to file in the VIEW record. (Refer to Chapter 1000.20.)

When the proposed action is to impose a penalty on a case for noncooperation with the Division of Child Support Enforcement (DCSE), advance notice must be given using the Advance Notice of Proposed Action (032-03-0018-29).

* 45 CFR 205.10(a)(4)(ii)
** 45 CFR 206.10(a)(4)(i)
*** 7 CFR 273.12(f)(4)(i)

The following procedures are to be followed in preparing the Advance Notice of Proposed Action Form:

1. The date the form is mailed to the recipient and the first day of the following month are not counted in the 10 days before the day the action becomes effective.

   a. When the action being taken is a reduction, the effective date is the first of the following month.

   b. When action is being taken to suspend or terminate benefits, the date of non-issuance is the first day of the following month.

2. The notice must include a statement of what action the agency intends to take.

3. It must include the reasons for proposed action. If the proposed action is to suspend assistance due to the inability to verify a change in the client's circumstances (see Section 401.2.B.2.), the Advance Notice of Proposed Action must also include a statement that if necessary verification is provided, assistance will not be reinstated if such verification renders the case ineligible

4. The specific TANF Manual citation requiring the proposed action must be entered.

5. In cases of grant reduction, the new amount of the grant must be entered.

D. IPV Notice Requirements - Refer to Sections 102.5, 102.8 and 102.13 regarding notice requirements relating to IPV guidance and ADH procedures.

E. Action Requiring Neither Adequate or Timely Notice - Neither a timely notice nor an adequate notice is necessary when:

1. **The** agency acts to reduce or terminate benefits which have been continued in the original amount during an appeal, and the hearing decision is adverse to the recipient.

2. **A** VTP case closes due to one of the following reasons: the employment hours become less than 30; hourly pay becomes less than minimum wage; all of the eligible children leave the home; in a two parent household when a parent who is receiving a VTP leaves the home; **and, at the end of the 12-month VTP payment period. (Note: ADAPT will automatically close the VTP case at the end of the 12-month period.)** Exception: when a VTP case has been transferred and the new locality determines that the client is no longer eligible to receive the VTP, an adequate notice is required.

401.5 INFORMATION TO BE GIVEN APPLICANT/RECIPIENT -

In the process of determining eligibility, the worker must provide the applicant/recipient with the following information:

a. The applicant/recipient's responsibility to provide accurate and complete information to the best of his ability.

b. Information Regarding Timely Reporting of Changes.

1. Applicants are responsible for reporting required changes within 10 days of the date of the Notice of Action to approve. Required changes that occurred after the initial interview, but before the Notice of Action to approve must be reported within this 10-day time frame.

2. Recipients of TANF must report income changes when the income of the household exceeds 130 percent of the federal poverty level for the number of people in the TANF assistance unit at the time of approval or the Interim Report evaluation, as outlined in Section 401.2.B.2. For the purpose of determining income changes that must be reported, "household" includes members of the AU plus required unit members residing with the AU whose income is considered in determining eligibility but whose needs are not included on the grant. See 401.2B(2)(a).

3. Recipients are required to report address changes (a new physical or mailing address) within 10 days of the change.

4. **Recipients are requested to report changes in their telephone number(s).***

5. Recipients must report when an eligible child or the parent of an eligible child enters or leaves the home.

6. VIEW participants are required to report changes in gross countable income of greater than 130 percent of the federal poverty level based on size of the assistance unit, other changes pertinent to participation in VIEW, including changes in the need for supportive services.

7. Assistance units must complete an annual renewal, unless a shorter renewal period is required by SNAP. In addition, an interim report must be submitted by the sixth month of the renewal period.

Applicants/recipients must be advised of changes not required to be reported that may increase benefits, such as loss of income and additional family members in the home.

*63.2-501.1

c. Liability for failing to report changes.

d. Methods of Reporting

The Change Report (032-03-0051) must be given at each application, reapplication, and renewal, with an explanation of its use.

Recipients may report changes on the Change Report 032-03-0051-28, in writing, through CommonHelp, in person or by telephone.

e. The agency's responsibility to complete the application within 30 days following the date of application or make indicated changes in amount of payment as necessary.

f. The applicant/recipient's right to appeal if action is not taken on his application or request for an increase within the required time period of if he is dissatisfied with the agency's action.

g. The requirements with respect to nondiscrimination.

h. Social services provided by the agency.

i. Family planning and early screening, diagnosis, and treatment.

All applicants must be informed of the availability and importance of preventive health screenings (EPSDT) for children up to age of 21. EPSDT or Early and Periodic Screening, Diagnosis and Treatment is a program that focuses on the early identification of health problems through periodic well-child assessment, immunization and follow-up care to resolve any identified health problems. All Medicaid recipients up to the age of 21 are eligible to receive EPSDT services. EPSDT does not require any additional enrollment procedures. Discussion about EPSDT services should be supplemented by reviewing the Department of Medical Assistance Services (DMAS) EPSDT fact sheet with the applicant.

Most recipients will be enrolled in a Medicaid managed care program and, as a result, should be encouraged to contact their MEDALLION Primary Care Physician (PCP), Health Maintenance Organization (HMO) or the MEDALLION Care Helpline at 1-800-643- 2273. Non-managed care eligible recipients should also call the MEDALLION Care Helpline to receive a list of Medicaid enrolled doctors or clinics that provide EPSDT services. The recipient should be informed that transportation is provided for EPSDT services at no charge. If the recipient has any difficulty accessing EPSDT

services or has questions or concerns about EPSDT or transportation to an EPSDT provider, they should contact the MEDALLION Care Helpline.

You may also contact the DMAS EPSDT program administrator at 804-786-0194 if you have any questions or concerns regarding EPSDT program policies or procedures.

j. The need to substantiate all eligibility factors.

k. The categorical eligibility requirements and conditions of eligibility for TANF.

l. The requirements regarding composition of the assistance unit, that required unit members are considered part of the unit even if application has not been made on their behalf, and that the client's failure or refusal to provide verification of categorical requirements for a child required to be in the assistance unit, or the child's failure to meet conditions of eligibility, will result in the child's needs being excluded from the assistance unit but his income will be considered available to the remaining assistance unit members.

m. The provisions of cooperation in relation to the Child Support Enforcement Program. The client must be informed of the responsibility to assist the State or local agency and the consequences for refusing to cooperate, unless good cause for refusing to cooperate has been determined to exist. The applicant/recipient must be given the opportunity to withdraw the application or request the termination of assistance, before the next payment is issued. The appropriate notice must be sent in either situation.

n. Provisions regarding income and the method by which income will be counted, including **how and when lump sum payments will be counted.**

o. Provisions concerning treatment of child care/incapacitated adult care disregard as it relates to an individual's employment status and eligibility determination (Section 305.3.B.6.). The applicant/recipient must be given the opportunity to choose either the child care disregard or the child care vendor payment to the provider.

p. Standards of assistance.

q. Under the VIEW Program, the requirements of the program, the conditions for exemption from this requirement and that all recipients will be notified via mail of specifics regarding participation upon approval of their application. Additionally, the requirement to report all changes relative to VIEW status and the condition of eligibility to participate, if required, must be explained. See Section 901.2 for further details of explanation.

r. Verification of Information - The applicant/recipient must be advised that all factors of eligibility are verified and that public records, such as Bureau of Vital Records and Health Statistics, etc., are utilized in this effort. The applicant/recipient should also be advised that the records of Virginia Employment Commission (VEC) and Social Security are periodically checked for income.

s. Upon receipt of a notarized acknowledgement of paternity form, notify the applicant/recipient that paternity has been established.

t. The applicant/recipient must be advised that if any individual who is included in the A.U. does not have a SSN it must be provided or proof of application must be provided.

u. The applicant/recipient must be advised **that DCSE will send each assistance unit a disregard payment of the first $100 of child support received each month. The $100 disregard is only applicable to current child/spousal support payments received each month.**

v. Provisions regarding continuation of DCSE services following the termination of assistance must be explained to the applicant/ recipient.

w. The provisions described in Section 401.1.A. regarding the single interview and joint application process for TANF and SNAP must be explained to the applicant/recipient.

x. Provisions for transitional child care benefits per Section 401.7.

y. In situations where the assistance unit is homeless, the worker must explain the need for the caretaker to keep in contact with the local agency and/or frequently check the mutually agreed upon destination where correspondence and checks will be mailed. The case record must be documented to reflect where the unit wants to receive notices and checks.

z. Provisions of the family cap **guidance** per Section 201.12.

aa. 60-month limit on receipt of TANF provision.

bb. The applicant/recipient's right to voter registration services in accordance with the National Voter Registration Act of 1993. Refer to Appendix II of Chapter 400 for applicable **guidance**.

cc. Information on the right to disclose a disability to the agency, and the benefits of doing so by providing the form, Do you have a disability? (032-03-670).

dd. The fact that applicants and recipients with disabilities are entitled to reasonable accommodations in all aspects of the TANF program, including:

1. Help filling out the application, gathering documents and verifying information establishing eligibility for benefits;

2. Modifications to program requirements if necessary;

3. Help with filing appeals or grievances if needed as the result of a disability;

ee. The fact that the individuals with disabilities should request reasonable accommodations if they feel they need them.

ff. Inform the client that he may receive the TANF benefits in the form of debit card, direct deposit or check.

gg. If the client chooses to receive benefits by debit card the EW must give the client the EPPICard fact sheet. http://spark.dss.virginia.gov/divisions/bp/tanf/guidance.cgi

hh. Explain to the client that changes and renewals may be made through CommonHelp.

ii. The worker must explain that certain contacts, when appropriate, require written consent (i.e., doctors, banks, etc).

jj. Explain to the client that it is illegal to use the TANF debit card to buy alcohol, lottery tickets, tobacco products, or sexually explicit visual materials; or, to use the TANF debit card in a state Alcoholic Beverage Control (ABC) store, in an establishment in which para-mutual wagering or charitable gaming is conducted, or in an establishment in which tattooing or body-piercing is performed for hire, or in any establishment that provides adult-oriented entertainment in which performers or other individuals connected with the business appear nude or partially nude.

401.6 IMPACT ON MEDICAID

See the Medicaid Manual, Volume XIII, to determine Medicaid eligibility for TANF applicants/recipients.

401.7 TRANSITIONAL CHILD CARE BENEFITS

When a case is closed to TANF, ADAPT generates a notice of potential eligibility for transitional child care which is sent to the agency PID dedicated to print service notices. The agency is responsible for mailing the notice to the client and filing a copy in the case folder.

Refer to the Services Manual, Volume VII, Section II, Chapter D, to determine eligibility for transitional child care.

401.8 REFERRAL FOR VICTIMS OF FAMILY ABUSE

When the eligibility worker learns about a situation where an applicant/recipient of TANF may be a victim of family abuse, the individual should be referred to local resources for supportive services. If local resources are not available, the Family Violence Hotline number, 1-800-838-8238, should be given.

Family abuse is defined in the Virginia Code of Section 16.1-228 as "any act of violence, including any forceful detention, which results in physical injury or places one in reasonable apprehension of serious bodily injury which is committed by a person against such person's family or household member."

401.9 PROTECTIVE SERVICES

Federal regulations require that protective services be made available to any child on whose behalf TANF is being requested or received when it appears that the child is being neglected, abused, or exploited or in a situation which is otherwise detrimental to his welfare. If the eligibility worker has reason to believe that a child, on whose behalf TANF is being applied for, or received, is in an unsuitable environment because of known or suspected instances of physical or emotional injury, it is the responsibility of the eligibility worker to make a referral to the services staff for protective service.

Known or suspected instances of physical or emotional injuries include instances of sexual abuse or exploitation, and negligence and/or maltreatment of such child under circumstances which indicate that the child's health or welfare is threatened.*

* 45 CFR 233.90(a)(2)

402.1 INCOME ELIGIBILITY VERIFICATION SYSTEM (IEVS)

Section 1137 of the Social Security Act requires states to coordinate data exchanges with other federally assisted benefit programs and to use that information when making eligibility determinations for TANF recipients. The federal statute requires that information obtained through these data exchanges be verified by a third party, not the IEVS source, prior to impacting the eligibility of the TANF case or the amount of benefits. The exception to the prior statement is Social Security benefits. Chapter D, page 7, of the IEVS Manual provides instruction to local departments of social services in the use of the information obtained through IEVS. Local workers must complete a Benefit Impact Statement (BIS) for each TANF case for which it receives an IEVS match. The IEVS match must NEVER be printed.

The Income Eligibility Verification System (IEVS) provides information by running matches of the client population against the files of other state and federal agencies. These include:

- the Social Security Administration for SSI benefit information (SDX) and earnings information from the Benefit Exchange Earnings Records (BEERS);

- the Internal Revenue Service for unearned income, such as interest (RES).

The purpose of the matches is to determine whether available information is known to the local social services department.

Information about SSI benefits from the **SPIDeR system** is considered verified upon receipt because the provider of the benefits (SSA) is also the source of the information. The local agency must take action to terminate, deny or reduce benefits, including proper notices to the assistance unit, without needing additional verification. If the information, however, is questionable, the agency must resolve the discrepancies before taking action.

Information from other IEVS matches is considered unverified. Prior to taking action to terminate, deny or reduce benefits, agencies must independently verify the amount of the asset or income involved, and whether the asset or income is or was accessible to the assistance unit.

The agency must obtain independent verification of information obtained from IEVS by contacting the assistance unit and/or the appropriate source of the income. If the agency opts to contact the assistance unit, the contact must be in writing, informing the assistance unit of the information received, and requesting that the assistance unit respond within 10 days. If the assistance unit fails to respond in a timely manner, the agency must send an advance notice to suspend or terminate the case. The agency may contact the appropriate source of the information. Once independent verification is provided, either by the assistance unit or the source, the agency must properly notify the assistance unit of the action it intends to take and provide the assistance unit with an opportunity to request a fair hearing prior to any adverse action.

VIRGINIA LEGAL AID PROJECTS

See **SNAP** Manual, Volume V, Part XIX Appendix I, for a list of Virginia Legal Aid Projects with addresses, phone numbers, and areas served.

The National Voter Registration Act of 1993 (NVRA) requires local social services agencies to offer each customer of TANF, SNAP and Medicaid an opportunity to apply to register to vote. **TANF applicants will be offered this opportunity at initial application. TANF recipients will be offered this opportunity at renewal.** Additionally, voter registration application services must be provided any time a change of address is reported to the local agency in person. If the change of address is not made in person, the Voter Registration Agency Certification (SBE 032-03-945 07/09), and a voter registration form http://spark.dss.virginia.gov/divisions/bp/voter.cgi, must be mailed to the client's new address. The worker must document the case record indicating the forms have been sent. In complying with the requirements of the NVRA, local agency staff must provide each applicant and recipient the same degree of assistance in completing their voter registration application as they do in completing the application for public assistance. Local staff must be trained annually for the NVRA. The training module is located in the Knowledge Center http://spark.dss.virginia.gov/divisions/bp/voter.cgi.

I. Prohibitions - Local social services agencies and agency staff are prohibited from the following activities when providing voter registration application services:

A. seeking to influence a customer's political preference;

B. displaying any political preference or party affiliation;

C. making any statement to the customer or taking any action the purpose or effect of which is to discourage the individual from applying to register to vote; or

D. making any statement to a customer or taking any action the purpose of which is to lead the individual to believe that a decision to register or not register has any impact on the individual's eligibility for assistance or the benefit level that they may be entitled to receive.

II. Voter Registration Services - Each local social services agency must provide the following services:

A. distribution of voter registration application forms;

B. assistance to customers in completing the registration application form, unless such assistance is refused, and ensuring that all spaces on the form are completed;

C. insuring that the certification statement on the application for benefits or statement of facts is completed; and

D. acceptance of voter registration application forms.

The only exception to offering voter registration application services is when the customer has previously indicated that they are currently registered to vote where they live, there is a completed agency certification form**,** application for benefits, or statement of facts in the customer's case record indicating the same, and the customer has not moved from the address where they stated that they were registered to vote.

III. **NVRA Coordinator - is the designated contact for the local agency for NVRA purposes. Each agency must have a NVRA Coordinator. If the local agency needs to report a change in the NVRA Coordinator, email the new name, title, agency name, and telephone number to maryellen.ohare@dss.virginia.gov.**

A. After the client completes the voter registration form, the form is to be given to the NVRA Coordinator.

B. The NVRA Coordinator must submit each completed registration application to the registrar every Friday (if Friday is a holiday, the forms must be forwarded to the local registrar on the last working day before Friday.) Completed forms are to be forwarded to the local registrar in an envelope, notated with an "A" in the upper left-hand corner and listing the number of completed registration applications included in the envelope.

1. For split/combined agencies, all voter registration applications are to be transmitted to the general registrar in the locality where the local social services agency is located.

2. If the individual chooses, he/she may take a voter registration application to be mailed to the State Board of Elections at his/her own cost.

C. Maintain a list of local staff completing NVRA training and submit it to the Assistant Director of Benefit Programs in Home Office.

D. Maintain an adequate supply of voter registration applications and related materials, including agency training manuals/references, display boxes, agency transmittal envelopes, and posters. A complete list of voter registration materials is available through the State Board of Elections. They may be ordered by U.S. mail or electronically.

Mr. Garry Ellis, NVRA/Voter Registration Coordinator
State Board of Elections
Washington Building
1100 Bank Street
Richmond, VA 23219
e-mail Address: garry.ellis@sbe.virginia.gov.

E. Ensure that a sign or poster is posted in a visible location in the office notifying clients that the office provides voter registration services. Posters are found at http://spark.dss.virginia.gov/divisions/bp/voter.cgi. You may print copies of the posters to display or order posters from the State Board of Elections.

IV. **Voter Registration** Forms

A. Voter Registration Application - in Virginia, one voter registration application form will be used to serve a twofold purpose:

1. the voter registration application will be completed by the customer with necessary assistance from local agency staff during the application/review process and left at the local agency for transmittal to the local general registrar; or

2. for customers who do not wish to complete the voter registration during the application process, they may take a voter registration form for mail-in registration.

V. Individuals Required to be Offered Registration Services - In order to be offered voter registration services, an individual must:

A. Be a member of the TANF assistance unit/**SNAP** household/Medicaid family unit.

B. Be at least 18 years old by the next general election. General elections are held in all localities on the Tuesday after the first Monday in November or on the first Tuesday in May to fill offices regularly scheduled by law to be filled at those times. If any question arises as to whether the individual will turn 18 before the next general election, complete the registration application and the local registrar will determine if the individual may be registered.

C. Be present in the office at the time of the application/review interview or when a change of address is reported (if a change of address is not reported in person, a registration application will be sent to the individual upon request for mail-in purposes.) Any change in household/assistance unit/Medicaid family unit composition that does not occur concurrent with an application/review or change of address will be handled at the next scheduled review.

Any individual accompanying the customer to the local agency who is not a member of the assistance unit/household (including payees and authorized representatives) will not be offered voter registration services by the local agency; however, a registration application is to be provided to the non-unit member upon request for mail-in purposes.

Any request for a mail-in application for assistance must include a mail- in voter registration application. When an authorized representative is applying on another individual's behalf, the local agency is to offer a mail-in application. In both situations, the bottom of the certification form is to be completed accordingly.

VI. Voter Registration Application Sites - Local social services agencies are required to offer voter registration application services at each local office (including satellite offices) for applicants/recipients of TANF, SNAP, and Medicaid assistance. Voter registration application services are to be offered by out stationed staff taking Medicaid applications at hospitals/local health departments or by Medicaid staff at the state's Mental Health, Mental Retardation, and Substance Abuse facilities.

VII. Reporting

A. Local agencies must report monthly, on SPARK http://spark.dss.virginia.gov/divisions/bp/voter.cgi, the number of voter registration applications submitted to their local registrar.

B. Reports must be submitted electronically by the 15th of each month for registrations submitted the preceding month.

It is important that workers submit all voter registration applications to the agency coordinator as soon as possible after completion by the client.

VII. Restoration of Rights – For individuals who have lost the right to vote, local agencies may obtain information for restoration of voting rights through flyers published by the American Civil Liberties Union (ACLU) of Virginia, 530 East Main Street, Suite 310, Richmond, Va 23219, (804) 644-8080. The local agency should distribute these flyers to individuals who indicate they are declining to register to vote because they have lost the right to vote.

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502.1 AMOUNT OF PAYMENT -

A. In the TANF Program - The amount of the monthly payment is the amount of the budgetary deficiency (the appropriate standard of assistance for the assistance unit, as specified in Section 304, less countable income, as specified in Section 305), adjusted to the next lower dollar, except as provided below:

1. Maximum Reimbursable Payment in TANF - The State Board has approved an overall maximum amount of payment established for each group of localities, as shown in Appendix 2 to Section 304.

   Any locality wishing to meet the full budgetary deficiency, even though in excess of the maximum reimbursable amount, may do so provided (a) the full (100%) standard of assistance is not exceeded in determining need; (b) the additional cost is paid from local funds and (c) the percentage of need met and/or the guidelines with respect to payment are used in all cases in the locality.

2. Minimum Payment - If the budgetary deficiency is less than $10.00, no payment is made. However, if an assistance unit's ineligibility is based solely on this minimum payment provision, the case will be approved and retained as an active TANF case.

B. In Emergency Assistance to Needy Families with Children - The total payment which may be granted to a family under the Emergency Assistance program must not exceed $500.

502.2 PERIOD COVERED BY PAYMENT

A. Payment covers need for the entire calendar month of eligibility (Section 401.1.I.), except when eligibility is determined in the same month in which an application for financial assistance is received or when an individual is added to an existing case. No payment may be issued, however, prior to the date of application. The effective date of payment is the date that initial eligibility for assistance or a change in amount of assistance begins.

No payment shall be made on an approved application for periods prior to the date of application. If the beginning date of assistance is not the first of the month, the benefit for that month must be prorated. This is accomplished by dividing the amount payable by 30 days, regardless of the total number of days in such month. This amount is then multiplied by the actual days in the month including and following the date of authorization. Additionally, when an individual is added to an existing case, the individual's portion of the grant must be prorated for the first month of eligibility with the beginning date of payment established in accordance with Section 401.2.B.2.c.

EXAMPLE #1: A Group II locality receives a signed application from Ms. Doe on August 18. She requested assistance for herself and two (2) children and reports no income. The agency determined she is eligible to receive an assistance payment on August 24. The beginning date of assistance for Ms. Doe is August 18. The agency will compute her first month's payment based on the following information:

1. 14 days = number of days for which Ms. Doe is eligible to receive assistance in August.

2. **$336.00** - payment amount for full month's benefit.

The method of computation is as follows:
$336.00 ÷ 30 = **$11.20** x 14 = **$156.80**
$156.00 grant (rounded down)

EXAMPLE #2: A Group II locality receives an application on August 5 requesting assistance for a mother and two (2) children. The family receives Social Security of $88.50 each month. The agency determines eligibility on August 10. The beginning date of assistance for Ms. Doe is August 5. The first payment will be computed as follows:

$336.00 - $88.50 = **$247.50** full month deficit
$247.50 ÷ 30 = **$8.25** daily rate
$8.25 x 27 days = **$222.75** prorated deficit
$222.00 grant (rounded down)

EXAMPLE #3: On September 5, a timely report is received that on that date a sibling of the child(ren) in the assistance unit moved back into the home. The child being added has unearned income of $30 per month. Eligibility for the child is established on September 13. However, the payment is prorated for the period beginning September 5 (26 days), the date the required unit member entered the home.

Current grant	**$336**
Full grant after adding child	**$401** - $30 = **$371**
Child's portion to be prorated	**$371 - $336** = **$35**
	$35 ÷ 30 = **$1.17**
	$1.17 x 26 days = $30.42
Supplement for September	**$30.00** (rounded down)

If the individual's presence in the home is not reported timely, payment for the first month of eligibility will be prorated from the date the change was reported or became known to the agency. Or, if the unit failed or refused to cooperate in establishing eligibility without good cause, payment will be prorated from the date the last categorical verification is received or eligibility condition is met. (Refer to Section 401.2.B.2.c.)

B. In TANF-UP - Follow guidance in 502.2 A. except when a second parent enters the home in an existing TANF case. Guidance in 401.2 B.2.c addresses handling the addition of a second parent.

C. In Emergency Assistance - Payment covers specified needs related to the emergency as specified in Section 203.2. Payment is also limited to coverage of needs arising or anticipated during the 30-day period following initial authorization of EA.

502.3 METHOD OF PAYMENT - Financial assistance under the TANF program is a money payment which is made available to eligible recipients in the form of a check, direct deposit, or debit card.

Note: The following restrictions apply to the use of the TANF debit card - Recipients shall not use the TANF debit card to buy alcohol, lottery tickets, tobacco products, or sexually explicit visual materials; or, in a state Alcoholic Beverage Control (ABC) store, an establishment in which para-mutual wagering or charitable gaming is conducted, or in an establishment in which tattooing or body-piercing is performed for hire, or any establishment that provides adult- oriented entertainment in which performers or other individuals connected with the business appear nude or partially nude.*

In some instances, a payment is not made directly to a client:

A. In TANF, a "protective" vendor payment may be made under conditions specified in Section 502.7.

B. In Emergency Assistance, payment may be made either as a money payment to the recipient or by the vendor method to the provider of goods or services,** whichever is more practicable and advantageous to the family, except that the State Board has ruled that payment for purchase, repair, moving or storage of household equipment must be made by the vendor method.

502.4 DESIGNATED PAYEE - The persons who may be designated as payee are as follows:

A. Money Payment

1. The grantee-relative with whom the eligible child(ren) is living. The grantee-relative is ordinarily the caretaker, but may be other than the caretaker in some situations. Examples:

   a. A child's father receives SSI and is the grantee- relative for the TANF payment which includes the mother as needy caretaker;

   b. A 16 year old mother is the caretaker in a TANF grant, but her mother, with whom she lives, is the grantee- relative; such a grantee-relative, if needy, may be included in the assistance unit (see Section 302.7.A.).

   c. An assistance unit consists of a 22 year old parent and her children. However, a relative also residing in the home is exercising primary responsibility for care and control of the children and, therefore, is the grantee- relative.

2. The legal representative of the grantee-relative, if one has been appointed and has qualified.

3. The protective payee, under conditions specified in Section 502.7.

*** PL 112-96, 4004 12 (A) (B), Code of Virginia, Section 63.2-621**
** 45 CRF 233.120(b)(2)(i)

4. An emergency payee in an existing case, when a situation, such as sudden death, desertion, imprisonment, or commitment to a mental hospital, unexpectedly deprives the child of the care of the grantee relative. Payment to an emergency payee is for a temporary period, limited to the time necessary to make and carry out plans for the child's continuing care and, in any event, not **to** exceed 60 days.

B. Vendor Payment - The provider of goods and/or services.

502.5 ISSUANCE OF PAYMENT

A. Issuance Date -

1. The Monthly Money Payment - If the effective date is either the date of application or the first of the month following the month of application, benefits should be authorized at the time of approval. ADAPT will **begin the process to** issue the payment **on the same business day the benefits are authorized in ADAPT. (Check payments will be mailed by the third business day following this action.Electronic payments will be sent to the individual's account on the next business day.)** Subsequent ongoing monthly payments will be issued on the first of the month to cover the needs for that month.

2. Supplemental Payment - A supplemental payment is defined as a payment given in addition to the pre-authorized assistance payment as a result of a change in circumstances which increases need for a specific month.

   Supplemental payments are to be issued immediately using an effective date of the first of the month for which the payment is being issued.

3. Vendor Payments are to be issued after the end of the month, upon receipt of a bill from the provider of goods or services. When protective vendor payments are made in TANF, under conditions specified in Section 502.7, it may be necessary in some instances to issue such payments at intervals during a month.

4. **Support Disregard Payments are issued to the custodial parent (CP) by the ADAPT system based on support collection information received from the DCSE automated system, APECS. These payments are issued the week after the NCP pays the support when:**
   - **the non-custodial parent (NCP) is obligated to pay at least $100 per month in child and/or spousal support and the NCP has paid at least $100 in current child support or child and spousal support during the month.**
   - **the NCP is obligated to pay less than $100 per month in child and/or spousal support during the month and the NCP has paid the obligated amount of current child and/or spousal support for the month.**

   Support Disregard Payments are issued to the CP on the first day of the following month when the NCP is obligated to pay at least $100 per month in child and/or spousal support and the NCP has not paid at least $100 during the month. Note: If the NCP has not paid any support during the month, no disregard payment will be issued.

Support disregard payments that have to be reissued require the EW to cancel the payment in ADAPT then the DCSE worker to complete a manual adjustment in APECS. After both of these actions have been completed, the replacement payment will be issued by ADAPT as part of an automated process.

B. Mailing of Checks - All checks, including the initial money payment, are to be mailed via the United States Postal Service, unless the recipient has a justifiable reason for **requesting to appear** in person at the office **to pick-up** the check or for asking that the check be delivered directly to him **by agency staff**. Such reasons should be stated by the recipient in writing and his signed and dated written request should be filed in the case record. A receipt should be secured for any checks delivered personally in the office or in the home. Proper identification should be requested if there is any doubt as to the identity of the recipient.

C. Direct Deposit - The process by which TANF benefits are electronically posted to a client's bank account. The client must be provided the Direct Deposit Enrollment Authorization form (032-03-672) if he requests direct deposit. The form is available at http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi. To set up a direct deposit, cancel direct deposit, or if the direct deposit does not post to the client's bank account, see Section 500, Appendix II, Direct Deposit Procedures.

D. Debit Card - The process by which TANF benefits are electronically posted to a state-issued debit card. Debit card procedures are described at Section 500, Appendix III.

E. Emergency Payments - Emergency payments shall be issued by local boards in emergency situations or in the event of delay or error in a State issuance of checks for payments of assistance.* The State agency is to reimburse the local board for such payments. In emergency situations which result from lost or stolen checks, the State Department shall assume liability for losses incurred by local boards due to fraudulent acts by recipients provided, however, the local agency referred the case to the Commonwealth Attorney and the decision to prosecute or not has been made by the Commonwealth Attorney. Emergency payments must be issued in these two situations:

1. In the event of lost or stolen checks, a replacement check will not be issued when the payee fails to report the lost/stolen check within 45 days of issuance. A replacement check can not be issued prior to the fourth mail delivery day and completion of the stop payment process. The State Department of Social Services and the local agency must ensure that no undue delays occur in issuing replacement checks. A replacement check must be issued upon receipt of notification that the stop payment process has been completed. This includes receipt of the notarized affidavits by the State Department of Social Services Fiscal Processing Unit (FPU). For a stolen check, the payee must file a police report and provide a copy of the police report or the police report number to the EW at the time of the completion of the three required affidavits**.** Refer to Appendix I to Chapter 500 for detailed check handling procedures. The Affidavit on Check Endorsement (032-06-118) is available at http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi.

* Code of Virginia, Section 63.2-323

2. When reissuing a Full Employment Program (FEP) stipend or bonus payment, the replacement check must be a State-issued check. Do not issue a FEP replacement check from local funds, as no process exists to reimburse the locality.

502.6 INTRASTATE TRANSFERS -

A. Transferring the Case

When a recipient of TANF or TANF-UP moves from one locality to live in another within the state and there is no other change in his circumstances which would render him ineligible, he is entitled to receive assistance without a break. To assure the continuation of assistance without interruption, the following procedure must be used.

1. If the move is the result of the family seeking temporary shelter/housing in another locality within the State of Virginia and the family intends to return to the original locality, the original locality may, at its option, keep the case for up to two payment months. If the family has not returned to the original locality after the second payment has been issued, the case must be transferred in accordance with the procedures outlined below. In making a determination as to whether the original locality should keep the case, the agency should work with the unit and consider the distance of the move and any hardships that would be encountered by the unit in reporting changes, etc. and whether the unit is residing in a different locality grouping. If the case is retained by the original locality, the payment will be based on the payment level of the original locality.

2. If the move is permanent (i.e., the assistance unit does not intend to return to the original locality or if the agency determines that the case should be transferred during a temporary move), the locality from which the recipient has moved (the transferring locality) must, within five working days of notification, complete a desk review and forward the eligibility case record along with a Case Record Transfer Form (032-03-227) to the receiving locality if the case continues to be eligible. The case record must contain all verification and other documentation substantiating eligibility. The transferring locality must forward the entire case file to the receiving locality. If the transferring locality wishes to maintain a part, or all of the case file, they must copy the portion that they wish to keep, and forward all of the original case file contents to the receiving locality.

The eligibility case record must be sent by certified mail, or by a courier service which is under contract with the Department of Social Services, or delivered personally, to the receiving locality and a receipt must be obtained.

Note: If the transferring and receiving agency both use an electronic case record system, the transferring agency may send a compact disk of the case information if that is acceptable to the receiving agency.

If the receiving agency does not use an electronic case record system, the transferring agency must print the case information and send the documents to the receiving agency.

B. Transferring Agency Responsibility

The transferring agency must complete a desk review to assure the correctness of the next payment as the transferring locality is responsible for the accuracy of this payment. The desk review entails reflecting all changes known or reported prior to the recipient's move which affect eligibility or payment and any changes occurring as a result of the recipient's move. As part of the review, the EW will verify the accuracy of the VIEW 24 month clock and the Federal 60 month clock and correct the clocks if they are inaccurate. The desk review also entails making sure that any other follow-up or special reviews have been completed. If the case is overdue for review, the transferring locality does not have to complete a renewal prior to transferring the case.

Local social services agencies may not transfer TANF cases in the following instances:

- The case has a suspension status due to temporary ineligibility for any reason (one month).
- The case has a suspension status because net support is greater than the current TANF benefit.
- The TANF application is pending. The original agency must process the application. The agency must secure sufficient information to process the application unless the applicant elects to withdraw the application.

Cases that have been sanctioned for non-compliance with a VIEW requirement must be transferred, including cases that have been reopened so that benefits can be issued during an appeal of the sanction.

The transferring agency must send the recipient a Notice of Transfer (032-03-0658) providing notice that their case has been transferred and listing the name, address, and telephone number for the receiving agency. If any changes during the desk review result in ineligibility or a decrease in the grant, procedures with respect to the Advance Notice of Proposed Action (032-03-018) are applicable.

The transferring locality will specify on the Case Record Transfer Form that the month following the month in which they send the form and case record to the new locality is the last month for which they will make payment. If the TANF case was receiving SNAP benefits, the transferring locality must note the impact of the transfer on the SNAP case on the Case Record Transfer form. If the case is open to services, the transferring locality will immediately notify the service worker

of the client's move and new address, and upon completion of the Case Record Transfer Form, will forward a copy to the service worker. Verification of changes which could not be made for the next payment, due to the advance notice requirements, will be included in the case record and will also be specifically noted on the Case Record Transfer Form under additional remarks. The receiving locality will take the necessary action to make the change(s) and send the Advance Notice of Proposed Action immediately.

Grant adjustments necessary to conform with the standard of assistance in effect in the locality to which the recipient has moved must be made effective for the month following the recipient's move. If the adjustment results in a decrease or termination of assistance, timely notice must be given to the client. It is the responsibility of the transferring locality to give timely notice. (See 502.6 D.2. for detailed instructions regarding transfers between Loudoun County and other agencies.)

C. Receiving Agency Responsibility

The receiving locality is responsible for completing a desk review within 5 working days of receiving the case and acknowledging receipt to the transferring agency using the Case Record Transfer form.

1. **For an on-going TANF case, the desk review must verify the following:**

- **the presence of an eligible child in the home**
- **new employment earnings**

Additionally, if the client is a VIEW participant, any change that might impact VIEW participation, including changes in employment, education/training, or child care, must be reviewed.

2. For an open VTP case, the EW must determine if the client continues to meet all of the eligibility requirements to continue to receive the VTP.

The receiving agency must impact these changes, affecting eligibility or payment for the first of the month following the month in which the transferring locality specifies as the last month they will make payment. This is the payment month for which the receiving locality will assume responsibility for the accuracy of the payment.

If the receiving locality **determines that the case is no longer eligible**, or **is eligible for benefits in an amount** less than the prior payment, **the receiving agency is** responsible for sending the Advance Notice of Proposed Action **(ANPA)** to the client. If the case is a VTP case and the client is no longer eligible to receive the payment, the **receiving agency** is not required to send an ANPA. In these instances, the EW will send the client a Notice of Action stating that the VTP will end.

There are no circumstances under which it is permissible for the receiving locality to return the case to the transferring locality (other than **if** the recipient subsequently moving back to the original locality).

D. TRANSFER BETWEEN LOUDOUN COUNTY DSS AND OTHER LOCAL AGENCIES

If the receiving locality will make the next payment following the client's move, changes reflecting either a decrease or increase, caused solely by Loudoun County DSS meeting the standard of need, and the other not, must be made.

If, however, the transferring locality is going to make the next payment the following rule applies:

1. If the receiving locality is Loudoun County, the transferring locality shall not increase the reimbursable amount since it does not have local funds available for this purpose.

2. If the transferring locality is Loudoun County, the payment must be adjusted in accordance with the payment **guidelines** of the receiving locality.

E. HANDLING OF APPEALS

1. If the desk review done by the transferring locality results in a determination of ineligibility, that locality will close the case. When the appeal is validated, the transferring locality will reinstate the grant in the original amount (if client remains in same group) or the amount appropriate to the locality in which the recipient is living. The case should then be transferred to the new locality. The Case Record Transfer form will advise the receiving agency of the appeal, and, if appropriate, the reinstatement of benefits.

   When the appeal decision is final, the transferring locality will immediately notify the new locality of the appeal decision so that the appropriate action can be taken. If the case continues to be eligible, the receiving locality will be responsible for recouping any overpayments, by establishing the claim in ADAPT entering the FIPS code for the agency where the overpayment occurred. The FIPS for an agency other than the current FIPS can only be entered during the calculation of the overpayment on BAT185 (Benefit Adjustment 185% Income Test). If the case is found to be ineligible, the transferring locality will be responsible for recovering any overpayments.

2. If the desk review done by the transferring locality results in a reduction of payment, and the client appeals the action, the appeal will be against the transferring locality, but the locality who is making the next payment will be responsible for restoring the grant to the correct level. The transfer procedure is to proceed as usual.

The Regional Hearings Officer will send the receiving locality a copy of the appeal validation and notify them as to the original amount of assistance which must be restored. If the case continues to be eligible, the receiving locality will be responsible for recouping any overpayments. If the case is found to be ineligible, the transferring locality will be responsible for recovering any overpayments.

3. If an appeal is filed due to a decrease resulting from adjustments in the standards of assistance, the hearing will be ALLOWED.

F. MEDICAID COVERAGE

To assure continued Medicaid coverage, the transferring locality must follow instructions in the Medicaid Manual at Volume XIII, M1520.600.

G. SITUATIONS AFFECTING THE TRANSFER PROCESS

1. Subsequent Moves During the Transfer Process - If the recipient moves to a third locality before the receiving locality can complete their redetermination, the redetermination does not have to be completed. The procedures outlined earlier in this section will be followed to effect this subsequent transfer.

2. Reapplications in Another Agency After Case Closings - If a former recipient of TANF reapplies in another locality, that locality may request the case record from the former locality. The former locality must comply with this request and forward the case record to the requesting locality within five working days of receipt of the request. The former locality should retain the financial and statistical forms.

3. Applicant Moving to Another Locality within the State - In the event an applicant moves to another locality, with the intent to remain there, prior to completion of the initial determination of eligibility, the **sending** agency must process the application. If eligibility exists, the case must be transferred following guidance under Transferring Agency Responsibilities (502.6.B.). If the application is denied, the agency will notify the applicant using the Notice of Action.

Note: There are no provisions for interstate transfer of cases. If a recipient moves to another state, assistance must be terminated and timely notice sent advising the recipient of the case action.

502.7 PROTECTIVE AND VENDOR PAYMENTS - According to federal regulations* protective and or vendor payments are to be made in TANF cases in the following situations:

A. Need for Protective or Vendor Payment -

1. The use of a protective or vendor payment is appropriate only when there is specific evidence that funds are being mismanaged in such a way that the well-being of the child(ren) is threatened, in making diversionary assistance payments, or if the caretaker who is on probation or parole fails a drug test.**

a. Prior to making a determination of mismanagement, the following conditions must be considered:

1) whether the family has experienced some emergency or extra-ordinary event for which it was appropriate for available funds to be spent;

2) whether expenses for necessary bills exceed the recipient's grant and other income;

3) whether the recipient has withheld the payment as a reasonable exercise of consumer rights when there is a legitimate dispute as to whether terms of an agreement have been met.

The above-mentioned conditions or any other relevant consideration would not be just cause for making a protective or vendor payment.

b. A protective or vendor payment should ordinarily be made only when a caretaker has persistently demonstrated an inability to manage funds in the best interest of the child(ren) and when continued receipt and management of the TANF payment would represent a threat to the health or safety of the child(ren).

Evidence of mismanagement includes but is not limited to:

1) continued evidence that the child(ren) is not properly fed or clothed and that expenditures for the child(ren) are made in such a way as to threaten the child's chances for healthy growth and development.

2) persistent and deliberate failure to meet obligations for rent, food, school supplies, and other essentials.

3) use of the TANF debit card to buy alcohol, lottery tickets, tobacco products, or sexually explicit visual materials; or, use of the TANF debit card at a state Alcoholic Beverage Control (ABC) store, in an establishment in which para-mutual wagering or charitable gaming is conducted, or in an establishment in which tattooing or body-piercing is performed for hire, or in any establishment that

* 45 CFR 234.60
** Code of Virginia, Section 63.1-105.8

provides adult-oriented entertainment in which performers or other individuals connected with the business appear nude or partially nude.*

Protective payments are not to be used in situations where hazardous conditions other than misuse of funds, jeopardize the child's well-being to the extent that court adjudication of custody should be sought.

The TANF case record must contain a statement indicating the specific reason(s) why a protective or vendor payment is being made.

In the event a creditor requests that a protective or vendor payment be made as a result of nonpayment of bills, the recipient must be advised of the request.** The agency shall notify the recipient in writing that the creditor's request will not be honored.

Where no other suitable protective payee can be found, it may be necessary for a staff member of a private agency, the local welfare department/social services or other appropriate organization to serve as protective payee. Such a staff member must be a worker providing services (not eligibility determination) for families. If a staff member is designated as protective payee, provisions for bonding this employee must be made.

2. Unless a minor parent (on his/her own case) meets an exception to the residency requirement and lives independently, protective payments are to be made in these cases. Protective payments are to be made to the minor parent's parent, or person standing in loco parentis.

3. Vendor payments are to be made in diversionary assistance payments whenever possible.

4. If a TANF caretaker who is on probation or parole fails a drug test, the probation or parole officer will notify the local department of social services. Upon receipt of such notification, protective payments must be arranged as soon as administratively possible. The protective payment arrangement shall remain in place for one year, provided the caretaker does not fail a subsequent drug test.***

B. Procedures for Making Protective or Vendor Payments

1. In protective situations, the superintendent or local board may take actions to designate a protective payee to act for the recipient in receiving and managing the total assistance payment.

* **PL 112-96, 4004 12 (A) (B), Code of Virginia, Section 63.2-621**
** 45 CFR 234.60(a)(2)(iii)
*** Code of Virginia, Section 63.2 - 605

The protective payee should be a person who is interested in or concerned with the welfare of the grantee-relative and his child. The selection of the protective payee should be made by the grantee-relative, or with his participation and consent insofar as possible. The local department must have evidence that such protective payee has the ability and will in the best interest of the grantee-relative and his child. The agency will take appropriate action to protect recipients when it appears that problems are beyond the capacity of the protective payee to handle.

The protective payee must not be executive head of the local department of social services; the person determining financial eligibility for the family; the special investigator or member of the staff handling fiscal processes related to the recipient; the landlord; grocer, or other vendor of goods and services dealing directly with the recipient. Additionally, service workers, private agency staff, and staff of other organizations can only serve as protective payees in situations per 502.7.A.1. or 502.7.A.5.

2. In some situations, it may appear more appropriate to make certain portions of the assistance payment to a vendor, continuing to make the remainder of the grant to the family. Vendor payments may be made in TANF to appropriate persons providing goods and services, with the selection of such person being made by the recipient or with his participation and consent insofar as possible.

   The local department must have evidence that vendors have the ability and will act in the best interest and protection of the grantee-relative and his child.

   Authorization for vendor payments will be made according to current local agency procedures.

C. Provision of Services - In protective situations referral to social services staff must be made, to assure protection of recipients, where problems and needs for services are obviously beyond the ability of the protective payee to handle.

D. Periodic Review of Need for Protective or Vendor Payment - A review of the need for protective or vendor payments on the behalf of children and of the way in which a protective payee's responsibilities are being carried out will be made as frequently as indicated by the individual circumstances and at least every six months, or 12 months if appropriate. This review can be coordinated with the eligibility renewal.

Appropriate controls are to be established by the local department to insure that cases are reviewed within the specified period. The case documentation should include an evaluation of the situation at the time of review and a statement of the basis for the decision at that time to continue or to terminate protective or vendor payments.

E. Termination of Protective and Vendor Payment - Provision is to be made for appropriate termination of protective or vendor payments as follows:

1. When the grantee-relative is considered able to manage funds in the best interest of the children, there will be a return to money payment status.

   When it appears that the need for protective payment will continue or is likely to continue beyond two years, because all efforts have not resulted in sufficiently improved use of assistance in behalf of the children, judicial appointment of a guardian or personal representative will be sought. When such an appointment has been made, payment will be made to the guardian or personal representative.

2. Protective payments made on the basis of a caretaker's failed drug test will be terminated after one year.

F. Right of Appeal - Opportunity for a fair hearing will be given any recipient:

1. In relation to the determination that protective or vendor payments should be made or continued, or

2. In relation to the payee or vendors selected.

   The recipient is to be advised of his right of appeal when the determination is made that a protective or vendor payment will be initiated and at the time of any change in payment status.

G. Safeguarding Information - Release of information to the protective payee from the public assistance record must be confined to those facts about the family members and their situation that are pertinent to the fulfillment of the payee's responsibility in the home. Information from the social history of the case, such as the legitimacy of children, circumstances of previous marriages, facts concerning relatives of the recipient, medical data, etc., should be disclosed only when required for the welfare of the family or the protection of the protective payee. The information shared may vary according to the type of help offered the family and the payee's personal or professional qualifications.

503.1 DEFINITION OF IMPROPER PAYMENT - A TANF payment made by a local department is improper when the payment is incorrect because: (1) the assistance unit does not meet eligibility requirements in the category (payment received in error/payment to an ineligible case); or (2) payment is in an amount greater than the amount to which the assistance unit is entitled under established guidance (overpayment); or (3) payment is in an amount less than the amount to which the assistance unit is entitled under established guidance (underpayment); or (4) a VIEW participant is found to have committed an IPV for receiving a payment or purchase on his behalf which is in an amount greater than what he is eligible for or for which he is ineligible.*

Improper payments may occur as a result of overdue reviews or other agency errors or because of erroneous or incomplete information supplied by the client. Improper payments may be revealed by several sources, not necessarily limited to the following: Local Agency Reviews, Federal Program Reviews, Fair Hearings, or earnings reports furnished by the Virginia Employment Commission.
503.2

503.2 STATUTORY PROVISIONS FOR REFUND OF OVERPAYMENTS AND PAYMENTS - If a payment or overpayment is made to an individual who is ineligible, the amount of such overpayment shall be returned to the Virginia Department of Social Services by the locality. Repayments will not be required if the Department determines that the payments or overpayments are the result of vague or conflicting regulations issued by the Department, or the failure of the Department to make statutes, rules, regulations, and guidance decisions available to the locality in a timely manner. Repayments will not be required in situations in which the locality exercised due diligence, yet received incomplete or incorrect information **from the client** which caused the overpayment. If a locality fails to return an overpayment as required, the Department of Social Services shall withhold an equal amount from the next disbursement made by the Department to the locality.*

The criteria used for determining if a locality exercised due diligence are as follows:

A. A redetermination was not outstanding (overdue) in the case in question because the agency has received permission from the State to suspend reviews.

B. The error had not occurred at the time of the completion of a scheduled review.

C. It can be shown that the error was the result of the client willfully withholding information which would not have been discovered by verifications required at the time of the review.

D. The error was not the result of an anticipated change that was overlooked.

E. The error was not the result of the client reporting a change that the agency failed to follow-up on.

F. The error was not the result of failure to use available management tools. The case record must be thoroughly documented regarding efforts to obtain **all** necessary information.

* 2002, Acts of Assembly, **Chapter 899, Item 362 (Budget Bill, HB30.)**

503.3 PERIOD SUBJECT TO REPAYMENT Overpayments and payments to **ineligible individuals which must be repaid to the state will be assessed monthly. See the VDSS Finance Guidelines Manual for Local Departments of Social Services, Section 3.45, for the specific procedures governing chargebacks (overpayments which could have been avoided by the local agency) and non-chargebacks (overpayments which could not have been avoided by the local agency).**

503.4 COMPUTATION OF REPAYMENT **Guidance which is** in effect at the time of the improper payment shall be used in determining the amount of repayment. G**uidance** is considered **to be** in effect in relation to a specific case after the date when (l) **in all cases**, a standard or policy has become effective by State Board action, or (2) **guidance** has become effective **for** new and reviewed cases and the particular case is (a) a new case, (b) a case in which a review is due or (c) a case in which a change in circumstances has necessitated a partial review.

503.5 REPAYMENT PROCEDURES - The local department must notify the Division of Finance of the TANF/VIEW overpayment by entering the overpayment information into Application Benefit Delivery Automation Project (ADAPT).

If the overpayment was caused by agency error, it must be entered into both ADAPT and the Locality Automated System for Expenditure Reimbursement (LASER). The Division of Finance will deduct the amount from the next reimbursement made to the locality.

When an overpayment is keyed in ADAPT, the FIPS entered must always represent the originating locality. The originating locality is the locality in which the overpayment occurred. An agency entering a claim in ADAPT, where the overpayment occurred in another agency must enter the originating FIPS on BAT185 (Benefit Adjustment 185% Income Test). This must be done before keying the overpayment information on BATAOC (Create Overpayment/Claim).

503.6 **SUSPENSION OF COLLECTION FOR CERTAIN OVERPAYMENTS** – Federal regulations allow **for the suspension of collection for** certain overpayments to individuals no longer receiving assistance.* **In the case of temporary suspension of overpayments, collection efforts will be resumed at the point the individual again begins to receive assistance.**

A. **Permanent Suspension of Collection for Overpayments less than $125 -** All overpayments to individuals no longer receiving assistance which are less than **$125** are to be **permanently suspended** after the local agency has: 1) notified the individual, or attempted to notify the individual if his/her whereabouts are unknown, in writing, that an overpayment has occurred which must be repaid; and 2) the individual fails to respond or refuses to cooperate with the request for repayment. No further action to recover the overpayment is to be taken. The case record must be documented. (NOTE: The agency must allow at least 10 days from date of mailing for the individual to respond to the request for repayment prior to **permanently suspending** recovery of the overpayment.)

B. **Temporary Suspension of Collection for Overpayments of $125 or More -** In situations where the outstanding overpayment of TANF/VIEW to an individual no longer receiving assistance is **$125**, or more, the local agency may **temporarily suspend** collection of the overpayment after reasonable efforts to recover the overpayment have been taken and it is determined that further efforts would not be cost-effective. The agency must notify the individual that an overpayment **which must be repaid has occurred** by sending a letter requesting repayment to the individual's last known address. In order to demonstrate reasonable efforts, the agency must take the actions listed below. The actions must be taken in the following order; however, the agency may evaluate whether further efforts would be cost-effective after any one of the actions to collect the overpayment is unsuccessful.

1. Attempt to locate the individual. If the individual's present whereabouts are unknown and attempts to locate the individual has been unsuccessful, the case record must contain documentation of attempts made to locate the individual, such as mail returned to the local agency;

2. Determine that the former recipient has no means with which to repay the overpayment. The case record must contain documentation of evidence used by the agency to determine the individual has no income or cash reserves;

* 45 CFR 233.20(a)(13)(vi)

3. Discuss methods of repayment with the individual If the individual refuses to cooperate, secure a written statement from the individual that he refuses to repay the overpayment.

Once reasonable efforts to collect the overpayment have proven to be unsuccessful, the agency must document the case record with evidence that further recovery efforts **from an individual no longer receiving assistance** would equal or exceed the amount of the over- payment. Such evidence may include the cost of staff time, the cost of legal/attorney fees, or any other evidence the agency has which demonstrates that further recovery efforts **while the individual does not receive assistance** would not be cost-effective. The agency head, or his designee, will make the final determination as to whether further efforts would be cost-effective.

When a TANF recipient declares bankruptcy and the court decides that the TANF debt will be part of the waived debts for the individual, the TANF overpayment will be waived.

C. Retention of Information - The agency must maintain information on individuals no longer receiving assistance who received an overpayment which was waived, including overpayments less than $**125**, for three years. (See 100.4 for information about the Library of Virginia schedule for retention of specific types of information.) The agency must initiate recoupment procedures should one or more of those individuals again be found eligible to receive assistance.

D. Intentional Program Violation (IPV) - In situations involving a TANF/VIEW IPV, the agency must make every effort to collect the overpayment regardless of the amount; the overpayment may not be waived. See Section 102 for guidance on handling Intentional Program Violations (IPV).

503.7 Calculating Overpayments - There are several factors which must be considered when calculating overpayments (IPV and non-IPV).

A. Determination of Continued Eligibility - When any change in circumstances which caused an overpayment is still in effect at the time of discovery, the agency must first prospectively determine the client's continued eligibility.

B. Determination of When the Overpayment Began - The worker is to determine when the overpayment began and secure all verifications necessary to calculate the overpayment. The overpayment began the month following the month the change occurred or as soon as administratively possible per guidance at 401.2B.

Assistance payments issued and payment reductions delayed as a result of the advance notice period are not overpayments. Refer to the examples below:

Example 1: On April 27, Mrs. Smith reports new employment. A prospective determination reveals that Mrs. Smith's May income is going to exceed need. Due to the advance notice period, the worker cannot close the case until June 1. The May payment is not an overpayment.

Example 2: On August 5, Ms. Carter reports her new job. Although the information is reported timely, the agency fails to take action to reflect the anticipated income for September. Since the reason the September payment was not reduced or terminated was because of the agency's failure to act and not the advance notice requirement, the September payment is an overpayment which must be recouped/recovered.

C. Impact on Earned Income Disregards When Calculating Overpayments - When calculating overpayments which are the result of the customer's failure to timely report receipt of earned income, the earned income disregards are not to be allowed in the 185% **screening but are allowed in the** standard of assistance screenings, **and** in determining the amount of the correct payment.

The earned income disregards are applied in accordance with Sections 305.1.A and B., when calculating an overpayment resulting from:

- the agency's failure to act on a change in earned income which was reported timely,
- any action which cannot be taken due to the advance notice period, or
- payments issued pending an appeal decision.

D. Support Related Overpayments - When an overpayment occurs which is the result of the client's failure to redirect support, the client's needs are not to be removed for purposes of calculating the overpayment.

E. Income Related Overpayments - The local agency must determine the correct amount of the payment the assistance unit should have received for those months the assistance unit actually received an overpayment.* Using conversion factors of 4.3 and 2.15, if appropriate based on Section 305.1.B.2.b, screen the income at 185% and at the standard of assistance to determine the monthly payment amount. In cases involving changes required to be reported or payments made pending an appeal decision, the local agency must determine the month that the overpayment initially occurred and all other months as follows:

1. If, due to a misunderstanding or inadvertent error on the part of the assistance unit, an assistance unit failed to report a change in its circumstances within 10 days of the date the change became known to the assistance unit, the first month of an overpayment will be the first month in which the change would have been effective had it been reported in a timely manner.

   The local agency may not determine as the first month in which the change would have been effective, any month later than two months from the month in which the change in income occurred, **unless it is determined that a verified disability affected the person's ability to understand the reporting rule. In that situation the local agency worker has the discretion to determine that the overpayment began at the time that the agency first learned about the overpayment or first determined that it had failed to act upon information correctly provided by the individual.**

2. If the assistance unit reported a change within the prescribed time limits, but the local agency did not act on the change timely, the first month affected by the local agency's failure to act must be the first month the local agency should have made the change effective. Therefore, if an advance notice was required but was not sent, the local agency must assume that the maximum advance notice period as provided in Section 401.4.C would have expired without the assistance unit requesting a fair hearing.

3. If prospectively ineligible, the full assistance payment is an overpayment.

4. If the prospective determination renders the case eligible, calculate each month's overpayment and apply earnings disregards as indicated in Section 503.7.C., if applicable.

F. Overpayments Not Related to Income - If an overpayment is the result of any factor other than income, the overpayment is to be based on the actual circumstances of the case each month.

* 45 CFR 233.20(a)(13)

Example: In June the worker discovers that an eligible child left the home on August 5 of the previous year. The child should have been reported no later than September 10. Overpayments must be calculated beginning with the October payment. The overpayment amount is the difference between the grant received each month and the correct grant for the actual number of eligible members living in the household.

G. Overpayments Resulting from Incorrect Composition of the Assistance Unit - When it is discovered that an individual required to be in the assistance unit is living in the home, it must be determined if an overpayment occurred. This determination is to be made as follows:

1. Redetermine eligibility for each month beginning with the month following the month the individual entered the home or was required to be in the assistance unit, including the individual's needs, and actual income. Any resulting overpayments must be recouped/recovered.

2. If during the period in which the individual was required to be in the unit he had no income or his needs exceeded his income, an under- payment has occurred only for the months in which all categorical requirements were met and the conditions of eligibility are retro- actively deemed to be met per Section 401.2.B.2.c. (See Section 503.9).

H. Determining the amount of the overpayment when support has been paid for a child in the TANF assistance unit.

1. The agency must determine the amount of support paid for children in the AU using the report, TANF Cases, Current Collected Support and Expected TMPs.

2. Current monthly support paid to DCSE not redirected to the recipient must be subtracted from the total TANF payment issued for the month:

   Example: A $254 TANF payment was made for the month of April.
   The amount subject to recoupment is $254 (Group II, AU = 2), minus total current support collected by DCSE in April (the month the overpayment occurred), which was $150; therefore, the April overpayment is $104.

I. Determining Overpayments Resulting from Redirected Support Paid to the Client

1. An overpayment must be determined when a TANF recipient who was receiving support at the time of TANF application fails to redirect following TANF case approval.

2. An overpayment will not exist when DCSE returns to the client support which the recipient has redirected to DCSE.

3. An overpayment amount will be determined for new support not redirected to DCSE only when the support amount will cause the total income for the AU to exceed 130% of the Federal Poverty Level.

If new support is reported at renewal, the EW will determine if an overpayment exists for any previous month.

4. An overpayment will exist when a TANF recipient fails to report at the time of renewal the receipt of new support.

5. If the TANF recipient continues to fail to redirect support to DCSE after a renewal has been completed and the receipt of new support discovered, the EW will impose the DCSE non-cooperation penalty and count the support as unearned income. Additionally, the $100 disregard will not be allowed on this income. These policies will be applicable whether an overpayment has been established or not.

J. Localities Meeting the Standard of Need - In localities meeting the standard of need, only the standard of assistance State/federal share of the TANF overpayment is to be reported to Financial Management. Each locality is then responsible for recovery of the local share of the overpayment directly from the client.

K. Calculating a VIEW Overpayment – A VIEW overpayment occurs when a VIEW participant is found to have committed an IPV for receiving a payment or purchase on his behalf which is an amount greater than what he is eligible for or for which he is ineligible.

The worker must determine if the participant is still eligible for services and determine the correct cost of the services that the participant would continue to receive. The case record must be documented with information to support the establishment of the claim or the reason for not establishing the claim.

Example: The agency gives the client a $50 voucher for work clothing. The client changes the amount to $500 and the vendor honors the voucher. There is an overpayment of $450.

L. Determination of When the Overpayment Began – The agency is to determine when the overpayment began and secure all verifications necessary to calculate the overpayment. The worker is to use the best available evidence including, but not limited to:

1. past and existing vouchers from vendors that were paid in the period that the overpayment occurred,

2. the history of payments for supportive or transitional services that were paid for by the local agency in the period that the overpayment occurred and,

3. the amount calculated starting 10 days from when the client had knowledge of the information.

When calculating the overpayment amount the worker is not to include any amounts that the individual paid toward services that were provided in the period the VIEW overpayment occurred.

Note: The client is to repay the calculated amount unless the court orders differently.

503.8 NOTIFICATION, RECOUPMENT AND RECOVERY OF OVERPAYMENTS - State Board policy, adopted in accordance with federal regulations,* requires the local department to promptly recoup or recover any overpayments including overpayments resulting from assistance paid pending hearing decisions. Repayment by either a former or current recipient of the overpayment can occur through recoupment or recovery or both. The agency should discuss voluntary repayment with the client prior to initiating a recoupment.

A. Notification to the assistance unit must be given before recoupment or recovery of an overpayment begins. After calculating the total amount of the overpayment, the local department of social services must send the Request for Repayment of TANF Benefits and/or Payments for VIEW Services' form. The form is available in the Forms Drawer on the SPARK page. The first page of the form displays the period over which the overpayment occurred and the total amount of the overpayment. The second page allows the individual to select the method of repayment.

A copy of the form must be sent to the TANF recipient or payee or previous TANF recipient or payee and a signed copy filed in the case record. The signed form must remain in the case record until the overpayment has been satisfied. Note: If the recipient or payee fails to sign the form, the unsigned copy must be retained in the case record.

When the signed form is not returned on an active TANF case or on a case receiving a VIEW Transitional Payment (VTP) within 30 days, recoupment should begin the following month. When the TANF case closes prior to the month in which recoupment was scheduled to begin and the recipient or payee later reapplies for TANF assistance, she will be advised that recoupment will begin in the first month that the case is eligible for assistance.

B. Recoupment consists of withholding all or part of the assistance payment. An overpayment made to a current recipient or payee must be recouped by reducing the amount of any future assistance payable to any assistance unit of which the individual is a member or payee.

1. When the recipient or payee has no cash reserve or countable income (payment equals the Standard of Assistance for the AU), 10% of the assistance payment may be recouped until the overpayment has been repaid. Enter 10% in the "Terms" field on the Create Overpayment/Claim (BATAOC) screen.

   Example: TANF Grant of **$336**; Recoup 10% **($33.60; amount of recoupment = $33.00);** New grant amount is **$303.**

2. In situations where a recipient (but not a payee) has earned income, unearned income, or any combination thereof, in addition to the assistance payment, part or all of the assistance payment may be recouped as long as the assistance unit retains at least 90 percent of the standard of assistance when the total gross income and the amount of the current grant are considered.

   To calculate the client's ability to repay the overpayment, the worker will follow steps a - d below:

   a. Determine the amount of the overpayment.

* 45 CFR 233.20(a)(13)(i)
*§63.2 - 512

b. Combine all gross income including any income that would be disregarded for TANF purposes (such as SSI) and the current grant to determine the amount of income available to the AU.

c. Determine 90% of the standard of assistance for a family of equal size in the same locality. This represents the amount of money the client must have available.

d. Subtract the amount in step c from the amount in step b. The difference represents the amount the client is able to repay on the overpayment.

Note: When the additional income or the TANF grant amount is either increased or reduced, the recoupment amount is to be recalculated.

EXAMPLE #1:

Step a: Determine the amount of the overpayment.	
Step b: Available income	**$611.00**
($344 gross wages + **$267** grant amount)	
Step c: Minimum amount AU retains **($267** X 90%)	**- $240.30**
Step d: Maximum amount that can be paid	**= $370.70**

The EW will recoup the entire grant amount of **$267.**

If the amount that can be paid is equal to or greater than the Standard of Assistance (grant amount), the amount to be recouped will be equal to the grant.

EXAMPLE #2:

Step a: Determine the amount of the overpayment.	
Step b: Available income	$**386.00**
($50.00 gross wages + **$336** grant amount)	
Step c: Minimum AU retains **($336** X 90%)	**- $302.40**
Step d: Maximum amount that can be paid	**= $ 83.60**

The EW will recoup **$83.00** from the grant.

If the amount that can be paid is less than the Standard of Assistance (grant amount), the amount to be recouped will be equal to the amount that can be paid.

The monthly assistance payment will be reduced according to B (1) and (2) above until such time as the overpayment has been repaid. If, however, income and/or cash reserves have been counted in establishing the client's ability to repay, recovery of the overpayment may also be accomplished through voluntary repayment. This option is to be offered to the client prior to initiating a recoupment.

If recoupment reduces the grant to zero, the case will be retained as TANF eligible with no money payment.

C. Recovery consists of making arrangements with a former or current recipient or payee for voluntary repayment of all or a portion of the overpayment even though the client may no longer be eligible for assistance. If a former recipient or payee fails to make the voluntary repayment, the agency must initiate action under Section 63.2-512, Code of Virginia, to collect the amount as a debt.

Failure or refusal of a current recipient or payee to voluntarily repay the overpayment will result in court action only when recoupment is not possible because the grant amount is less than $10.00.

D. **Responsibility for Outstanding Overpayments** Outstanding overpayments must be recovered or recouped when a former recipient or payee reapplies for assistance and is found eligible. The schedule of repayment is to be based on the current situation of the client.

The allowable amount of recoupment or recovery of the overpayment from the client is limited to the total amount of the overpayments.

1. When TANF benefits or VIEW supportive services are overpaid, the caretaker(s) included in the assistance unit at the time the overpayment occurred shall be responsible for repayment of the overpayment. If there is no parent or non-parent caretaker included in the assistance unit, the payee for the case at the time the overpayment occurred shall be responsible for the overpayment. Individuals who were children on the case at the time of the overpayment are not responsible for repaying the overpayment either while they are children or when they become adults. A minor parent is not liable for the overpayment unless she is living with someone who is standing in *loco parentis* and she is coded as a caretaker (PR) on the case.

2. Recoupment process:

   a. Identify the liable individuals in ADAPT on the Individuals Liable for Overpayment/Claim screen (BATAIL).

   b. Enter an ‘A’ in the field ‘Action’ for each caretaker who was included in the AU when the overpayment occurred. If there was no caretaker in the AU, add the name of the payee on the case and an “A” in the Action field. (If the payee does not have a client ID number, you will need to obtain one before completing this screen.)

   c. Enter a ‘D’ in the field ‘Action’ for each child, including minor caretakers coded as “PC” in ADAPT, who was included in the AU when the overpayment occurred.

Example 1: Ms. Thomas loses her job and requests assistance for her son, her daughter, and her daughter’s baby. She returns to work one month after the case is approved but does not report her income (which exceeds 130% of the federal poverty level) until **her next renewal.** The agency establishes an overpayment for Ms. Thomas. The other three persons, including her daughter who is a minor caretaker, are children on the case and are not liable for the overpayment.

Example 2: Mrs. Allen is the payee on a case for her teenage grandsons. She is not needy and is not included on the grant. An overpayment occurs when the children move out to live with their father and Mrs. Allen does not report the change. The agency establishes the claim in ADAPT, entering Mrs. Allen’s name with an “A” in the “Action” field on BATAIL before closing the case. Mrs. Allen agrees to voluntary repayment and begins sending the agency a small check each month. After three months, Mrs. Allen refuses to make any more payments. The agency begins to initiate legal action to collect the balance of the overpayment as a debt. (See 503.8C).

E. Prompt Correction of Overpayments - An overpayment must be recouped or recovered as soon as administratively feasible. One of the following actions must have occurred by the end of the calendar quarter following the quarter in which the overpayment was first identified.

1. Repayment must have already been accomplished.

2. Action to locate and/or recover from a former recipient must have been initiated.

3. Repayment from current recipient occurring either through recoupment or voluntary repayment.

If instances occur where none of the three actions have been taken by the time stated above, the overpayment must still be recouped or recovered.

If prosecution for an IPV occurs, then the amount of court ordered restitution will be the amount of the overpayment to be recovered from that case.

F. Determining Intentional Program Violations (IPV) - A client error may or may not be an IPV, which exists when there is evidence clearly establishing that the recipient willfully withheld information or gave false information affecting his eligibility or the amount of assistance. (See Section 102 for further procedures.)

G. Reporting Overpayments - In instances where the assistance payment is reduced or suspended to recoup an overpayment previously repaid to the State Department of Social Services, or cash amounts are received as recovery of money previously repaid to the Department of Social Services from local funds, an adjustment must be reported on LASER in order that the locality can recover local funds paid to the State. The amount of the deduction made from the current payment, the amount of the suspended grant, or the cash amount received as recovery should be shown as an addition to expenditures in LASER.

H. Retention of Overpayment Records – All overpayment records must be maintained for three years after the claim is paid, administratively closed, or written off. (See 100.4 for information about the Library of Virginia schedule for retention of specific types of information). All documentation pertinent to the overpayment should be attached to the screen print of the overpayment. The file should contain the following screen prints: “Create Over Payment” (BATAOC) and “Individuals Liable for Overpayment Claim” (BATAIL).

* 45 CFR 233.20(a)(13)(ii)

503.9 CORRECTION OF PRIOR UNDERPAYMENTS - Federal regulations require that, if a State Plan provides for recoupment/recovery of overpayments from the client, it must also provide for prompt correction of prior underpayments to current recipients and those who would be current recipients if the error causing the underpayment had not occurred.* Therefore, the agency is to correct any underpayment to any person who is currently in need, regardless of whether they are current recipients. (See 305.1.D.2.C.) **NOTE: Retroactive corrective payments can be made to cover 12 months preceding the month from when the underpayment was discovered**. The local agency shall notify a case not currently receiving assistance, in writing, of requirement to demonstrate their current need (that they would currently be eligible for TANF if they applied) in order to receive underpaid benefits. Additionally, when the agency discovers that a household was incorrectly denied/ terminated, the former applicant/recipient must provide verification that the assistance unit was actually eligible for each month subsequent to the incorrect denial/termination. An underpayment will only be calculated for each month such verification is provided.

When it is learned that an underpayment has been made as a result of <u>any</u> (client or agency) error, there must be correction of the prior underpayment by repayment to the client as follows:

1. The total allowable repayment to the client shall be the amount of the underpayments.

2. Retroactive repayment of prior underpayments shall be made either in one lump sum payment or by monthly installment payments to the client until the full allowable repayment is made. The method of payment is to be selected by the local agency.

3. The retroactive corrective payment shall not be considered as income in determining need and the amount of the continuing assistance payment for which the recipient is eligible in the month in which it is paid or the next following month. The TANF maximum payment may be exceeded by the amount of such corrective payment.

The agency must also correct outstanding underpayments to former recipients who have reapplied and are found to be eligible.

The above instructions are not applicable when a corrective payment is made as a result of an appeal to the State Board or a court decision. In such cases, the terms of the State Board decision or court order apply.

At the time a grant is made or increased for the purpose of correcting a prior underpayment, the recipient must be informed <u>in writing</u> of the purpose of this special allowance; the amount and the period for which it will be made; and the fact that it will automatically terminate at the end of the specified period. If this is done and the recipient, at the time the special allowance is terminated, appeals within the advance notice period, assistance need not be continued in the original amount.

503.10 OFFSETTING OVERPAYMENTS AND UNDERPAYMENTS - In cases which have both an underpayment and overpayment, the agency will offset one against the other in correcting the payment.

* 45 CFR 233.20 (H)ii)(a)

CHECK HANDLING INFORMATION AND PROCEDURES

This appendix explains check handling procedures for cancellation or re-issuance of returned TANF checks and VTP checks, replacement of lost/stolen or mutilated checks, reimbursement of localities for locally issued checks, and obtaining a copy of a cashed check. Note: The ADAPT transactions below indicate how to complete fields related to check handling procedures. Routine procedures for completing screens and transmitting to view the next screen have been omitted.

A. Glossary

1. ADAPT - The Application Benefit Delivery Automation Project.

2. Cancelled Check - A cashable check that is returned to the State and redeposited in a State account. A check cannot be cancelled if it cannot be cashed, i.e., if there is a stop payment against the check, if the check has already been cashed or if the check is mutilated. When a check is cancelled, any recoupment is null.

3. EW - The eligibility worker or other local department of social services staff with check handling responsibility.

4. Forgery - A payee states that the signature on the back of a State check is not hers/his. The account of the first casher is debited, and the money is deposited into a special State account.

5. FPU - Fiscal Processing Unit. The FPU is the unit within the State Department of Social Services, Division of Finance, which processes returned/undelivered checks, lost/stolen checks, cancelled, and mutilated TANF checks.

6. Fraud - The payee signs affidavits stating she/he did not cash the State check, but the payee has cashed or cashes the check or receives benefit of the check. The local agency must get local **or state** money back from the payee if any was given to the payee.

7. LASER – The Locality Automated System for Expenditure Reimbursement.

8. LDSS - The local department of social services.

9. Mutilated Check – A check is mutilated if it cannot be cashed, i.e., the magnetic ink has been torn, the amount or payee has been tampered with, or if ½ of the check cannot be recovered. If less than ½ of the check can be recovered, Stop Payment procedures must be followed.

10. Payment History - A history in ADAPT of the payments received by a case.

11. Replacement Check - A local or State check that is written to the payee to replace a State check that is mutilated or has a stop

payment placed against it. The local agency that wrote the original check is the only local agency that can write such a check.

12. Specific Payment Inquiry - Information specific to an individual payment on the Payment History.

13. Stop Payment - An action placed against a check so that it will not be honored, i.e., in the case of a lost/stolen or mutilated check. The check is stopped, not the payment to the client. Recoupment is not affected. A local or State check generated through ADAPT should be issued to the payee.

14. VACIS - The Virginia Client Information System (VACIS) accessed by FPU to send and receive check status information. Prior to 10/04 codes entered into VACIS by FPU are communicated to the ADAPT check handling screens.

15. VIEW Transitional Payment (VTP) – An incentive payment provided to prior VIEW participants after the TANF case has closed.

B. TANF Checks - Schedules and Mailing Information

1. Mailing - State-generated TANF and VTP checks are mailed by the State Treasurer's Office. The check date is the mailing date.

2. Monthly Cycle - Ongoing State-generated TANF and VTP checks to be issued/mailed on the first of each month.

3. Daily Cycle - Initial TANF, and supplemental and VTP checks generated by the State.

C. Undelivered Check Procedures

1. Check Returned to VDSS by the Post Office

Responsible Party	Action
FPU	• As soon as a check is returned to VDSS, FPU will enter the check status code of “u” (undelivered) to flag the check. • This updates the Public Assistance Payment History (CHPAH1) screen in ADAPT, notifying the EW that the check has been returned to the State and places an entry on the PA Check Actions Required Inquiry screen of the LDSS. To view this screen, go to Check Handling (CH) Menu, Option 8(CHACTQ). • Note: If action is not taken by the locality within 10 calendar days from the handling date shown on CHPAH1, the check will automatically be cancelled by FPU with a CA1 code.

To reissue a check after a CA1 has been entered, the check must be authorized through Benefit Adjustment (BA).

a. To remail the undelivered check within the 10 day time frame):

Responsible Party	Action
LDSS	• The EW accesses the ADAPT Main Menu, selects Option 8, Check Handling Menu (CHMENU), then selects Option 2 on CHMENU, Check Status Update. (CHSTAT) • The Public Assistance Payment History (CHPAH1) screen is presented. The EW enters "Y" beside the check to be remailed. • This brings up the Check Status Update (CHSTAT) screen. The EW completes the Status Update Reason Code, entering "D01" to mail the check to the same address, or "D02" and the new address to mail the check to a new address.
FPU	• FPU checks the Check Actions Due Listing in FPU sub- system daily and, upon receipt of notification, remails the check. This action updates the Public Assistance Payment History (CHPAH1) to show the check status as "Remailed."

b. To cancel the undelivered check within the 10 day time frame:

Responsible Party	Action
LDSS	• The EW accesses the ADAPT Main Menu, selects Option 8, Check Handling Menu (CHMENU), then selects Option 2 on CHMENU, Check Status Update (CHSTAT). • The Public Assistance Payment History (CHPAH1) screen is presented. The EW enters "Y" beside the check to be cancelled. • This brings up the Check Status Update (CHSTAT) screen. The EW completes the Status Update Reason Code, by entering the appropriate cancellation code. This information is sent to FPU through advising them to cancel the check.
FPU	• FPU checks the Check Actions Due Listing daily and, upon receipt of notification, cancels the check. This action updates the Public Assistance Payment History (CHPAH1) to show the check status as "Cancelled."

2. State Check Returned to LDSS

Responsible Party	Action
LDSS	• When a check is returned to the LDSS, it must be cancelled. The EW must stamp the back of the check with the agency stamp and return it to FPU with a note to cancel the check and stating the reason the check was returned. • Note: Do not write VOID on the check.
FPU	• FPU cancels the check and updates the Public Assistance Payment History (CHPAH1) in ADAPT to show the check status as "Cancelled."

3. Check Reported Undelivered by Payee

Responsible Party	Action

LDSS	• **When the payee is a vendor who reports nonreceipt of a Diversionary Assistance check, the EW will contact the Fiscal Processing Unit at Home Office to confirm the status of the check prior to taking any steps to reissue the check.**
	
	• When the payee reports nonreceipt of the check, the EW determines if the payee has moved since the last check was received.
	  • If the payee has moved, he/she should inquire at the former address about the delivery of the check there. The EW must immediately update the address section of the Case Information 1 (AECASE) screen to ensure that future checks are sent to the new address.
	  • If the payee has not moved, ask him/her to watch for the postal carrier the next day and inquire about the check delivery.
	
	• The EW must verify that the check in question was issued. To do this, access Option 8 on the ADAPT Main Menu to bring up the Check Handling Menu (CHMENU). On CHMENU, access Option 1, PA Payment History Inquiry. This presents the Public Assistance Payment History (CHPAH1) screen where the status of the check is displayed. Transmit to last screen. Review the check mailing address (CHOADD) to verify where check was mailed. Note: The EW must check the Public Assistance Payment History (CHPAH1) at least daily.
	
	• If ADAPT shows a check was processed, follow the lost/stolen procedures. If ADAPT shows anything other than processed, follow the procedures for that status.

4. Check Reported Lost/Stolen by Payee

a. The payee reports non-receipt of a TANF check:

A payee must report that a check has been lost or stolen within 45 days of issuance in order to be eligible for a replacement check. Additionally, the payee must complete three affidavits (which will include a Lost Check Report or Stolen Check Report **and two Wells Fargo Bank forms**) within 45 days of issuance of the original check. In the case of a Stolen Check Report, the payee must also file a police report and provide the LDSS with a copy of the report, or the report number, (within 45 days of issuance of the original check) in order to receive a replacement check.

Responsible Party	Action
LDSS	• The pay FIPS reflected on the Public Assistance Payment History (CHPAH1) is the LDSS responsible for the check, regardless of the present locality of residence. The original locality will initiate the stop payment action, and issue the replacement check. Note: A FEP recipient check must be a State-issued check. If locally written, no reimbursement is available. • Before initiating any action, the EW must look up the payment history to be sure a check was written and sent (CHOADD) and to make sure that the check has not been cancelled, undelivered, re-issued, mutilated or stopped. If any of these appear, refer to the appropriate procedures. Note: CHOADD will not display for direct deposit. • To check the payment history, access Option 8 on the ADAPT Main Menu to bring up the Check Handling Menu (CHMENU). On CHMENU, access Option 1. This presents the Public Assistance Payment History (CHPAH1) screen where the status of the check is displayed. To view payment details, enter a "Y" beside the lost/stolen check and the PA Specific Payment History (CHSPHS) screen will display. When you transmit from CHSPHS CHOADD will display.

b. Obtain three signed affidavits and the police report or police report number:

Responsible Party	Action
LDSS	• If a check was issued, have the payee complete and sign three State affidavits **and two Wells Fargo Bank forms (**Form 032-06-0118). The entire affidavit (including the Lost/Stolen Check Report **and Wells Fargo Bank form**) must be completed **in full.** The EW should allow the payee to complete (fill out) as much of the report as

possible. The EW must ensure that all questions are answered. The EW must also ensure that the payee is aware that by signing the affidavits/reports, he/she is agreeing to cooperate with the Department of Social Services and any law enforcement agencies in the investigation and/or prosecution of any person(s) who may be responsible.

If the payee is reporting the check as stolen, the payee must agree to file a police report and provide a copy of the report, or the report number, within 45 days of issuance of the original check to the LDSS in order to be eligible to receive a replacement check.

The EW should contact FPU to determine if a copy of the cashed check can be faxed to the LDSS while the payee is in the office to complete the affidavits. If not, schedule an appointment for the payee to return to the LDSS within 48 hours of receipt of the Lost/Stolen Check Report **and the Wells Fargo Bank form**. The payee must return to the LDSS to review the signature on the check prior to the LDSS issuing a replacement check.

- The affidavits must be notarized and stamped with the notary seal. (See Section E for mutilated check procedures.)

- If the affidavits are incomplete, incorrect, or are photocopies, FPU will return them to the LDSS for correction. FPU will not make corrections to the forms. All three affidavits **and two Wells Fargo Bank forms (Form 032-06-0118**) must be original copies with an original signature.

  Note: The payee for the check is the only person allowed to sign the affidavits. If the payee and recipient are two different people, be sure the payee is signing the affidavits.

- Send two of the affidavits (which will include the Lost Check Report or Stolen Check Report containing the police report number **and two Wells Fargo Bank forms**) to the FPU in a large envelope. The affidavits **and forms** must not be folded. Send the affidavits via overnight pouch to:

  Margretta Patterson
  VDSS Home Office
  Division of Finance
  Fiscal Processing Unit

- File the third affidavit (which will include the Lost Check Report or Stolen Check Report with police report/ police report number) in the eligibility record.

- Furnish the police report to the Fraud unit upon request.

c. Enter stop payment request in ADAPT:

Responsible Party	Action
LDSS	• After the fourth mail delivery day from the check date (same as the mail date), if the payee still has not received the check and the check has not been reported by the FPU as undelivered, initiate action to stop payment. • Note: If the payee reports that the check has been lost or stolen after receipt, the stop payment procedures still apply. • The EW accesses the ADAPT Main Menu, selects Option 8, Check Handling Menu (CHMENU), then selects Option 2 on CHMENU to access the Public Assistance Payment History (CHPAH1) screen. • On CHPAH1, place a "Y" in the field beside the TANF check for which the stop payment is appropriate. This brings up the Check Status Update (CHSTAT) screen. • On CHSTAT, enter the appropriate stop payment code in the Status Update Reason Code field. Note: A supervisor must authorize this function. • This information is sent to FPU through the Check Actions Due Listing, notifying FPU of the stop payment request. • Under no circumstances should an LDSS request a stop payment without having two completed affidavits with original signatures. An LDSS that requests a stop payment without first obtaining affidavits risks nonreimbursement of a locally issued replacement check.

Responsible Party	Action
FPU	• FPU checks ADAPT Action Due Listing at least once a day for stop payments initiated by the LDSS. • Upon receipt of two correctly completed affidavits (which will include the Lost Check Report or Stolen Check Report, the stop payment request through ADAPT, **and two Wells Fargo Bank forms,** FPU takes action to stop payment on the check, then updates the Public Assistance Payment History (CHPAH1)screen to show the check status "Stop Resolved."

- Note: Only after the check status on the PA Payment History (CHPAH1) has been changed to "Stop Resolved" can a State check be written or a locally written check be recorded and reimbursed.

D. Checks Lost by First Casher After Check Is Cashed by Payee (e.g., Fire, Robbery, or Employee Error)

Responsible Party	Action
LDSS	• Affidavits are not required from the payee. However, for the locality's own protection, it is recommended that the payee sign a statement that he/she did cash the check at the casher's and did receive the amount of the check. Have the statement signed by a notary and keep it in the case folder.
	• Enter a stop payment request in ADAPT and write a letter of explanation to the FPU. The letter must be on LDSS letterhead and include the check/warrant number, case number, payee name, date, and amount of the check. A copy of the payment history can be used to provide the identifying information.
FPU	• Upon receipt of the explanation, FPU takes action to stop payment on the check, then enters the appropriate stop payment code in VACIS. This, in turn, updates the Public Assistance Payment History (CHPAH1) to show the check status "Stop Resolved."
	• The LDSS must then issue a local check to the casher and record the check in ADAPT using Option 4 on the Check Handling Menu (CHMENU). This information is transmitted to the F10.2 report. Upon receipt of the report by the LDSS, the check information must be entered in LASER. The LDSS will be reimbursed via electronic transfer.

E. Mutilated Checks – A check that cannot be cashed (i.e. the magnetic ink has been torn, the amount or payee has been tampered with, or if less than ½ of the check cannot be recovered).

Responsible Party	Action
LDSS	• The pay FIPS reflected on the Public Assistance Payment History (CHPAH1) is the LDSS responsible for the check, regardless of the present locality of residence.
	• A signed affidavit is not required to replace a mutilated check.

- A mutilated check cannot be cancelled. When the client returns any portion of the mutilated check to the LDSS, the EW must enter a status code of “S04” on the CHSTAT screen. NOTE: A supervisor must authorize this function.

FPU	• If the FPU receives the check, the FPU enters a check status code of M01. This updates the ADAPT PA Public Assistance Payment History (CHPAH1) check status to "Mutilated."
LDSS	• The EW issues a local check to the payee.

F. Lifting a Stop Payment Order

Responsible Party	Action
LDSS	• **Contact the Fiscal Processing Unit at Home Office** and request that the stop payment be lifted. • If the stop payment can be lifted and the LDSS has not issued a replacement check to the payee, the payee may cash the original. • If the stop payment can be lifted and the LDSS has issued a replacement check to the payee, retrieve the original State check from the payee. During the phone call to FPU, the LDSS will receive instructions concerning reimbursement if a local check was issued.

G. Check Cashed After Stop Payment Placed Against Check

Responsible Party	Action
FPU	• The bank voids the stop payment request if the check has been cashed on the same day. If the check is cashed the next day and the stop payment is in place, the casher must request replacement from the recipient who received the cash.

H. Check Cashed Before Stop Payment Request

Responsible Party	Action
FPU	• The bank is checked for the status of the check. Fraud action will be initiated by FPU.

LDSS	• The locality will issue the replacement check following procedures in C.4.c. above.

I. Procedure to Ensure Reimbursement for a Locally Issued Check

Responsible Party	Action
FPU	• FPU receives the affidavits, determines they are correctly completed, and enters S84 or S85 into ADAPT. This updates the check status on the Public Assistance Payment History (CHPAH1) screen in ADAPT.
LDSS	• After FPU has updated the Public Assistance Payment History (CHPAH1) screen indicating a stop payment against the original check, a local or State replacement check may be written.
	• The EW then records the locally issued check using Option 3 or Option 4 on the Check Handling Menu (CHMENU). This information is transmitted to the F10.2 report and upon receipt in the LDSS must be entered into LASER. The LDSS will be reimbursed via electronic transfer.

J. How to request a copy of a cashed check

Responsible Party	Action
LDSS	• The LDSS sends a written request for a copy of a cashed check to the FPU. The letter must include the payee name and address, case number, warrant number, date of check and amount or send a printed copy of the payment history.
	• Note on the request if a certified copy is needed for court and include the court date.
FPU	• Upon receipt of the request, the FPU will send a copy of the check to the LDSS.

COMMONWEALTH of VIRGINIA

Department of Social Services

Affidavit on Check Endorsement

Locality: _____ ADAPT Case No: _____

Category: _____ Worker Name/ No.: _____

I hereby state that the Commonwealth of Virginia, Department of Social Services Assistance Check No._____, dated_____, in the amount of $_____, made payable to me, _____, by the Treasurer of Virginia, was not endorsed by me. I also state that I did not authorize any other person to endorse my name thereon. I further state that I have not received payment or benefit of the said check directly or indirectly in any way, shape or manner, nor authorized anyone to receive payment of the said check.

I understand and agree to notify and return to the Department of Social Services the original check in the event I receive it after signing this statement.

I agree by signing this affidavit, to cooperate with the Department of Social Services and any law enforcement agencies in the investigation and/or prosecution of any person(s) who may be responsible. If I am reporting the said check stolen, I agree to file a police report and provide a copy of the report, or the report number, within 45 days of the original check issuance to the Department of Social Services in order to receive a replacement check.

I have read the above statement, or it has been read to me, and I state this information is true and correct. I understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or imprisonment.

_____ _____

Signature of Payee/Client Date

SSN: _____ Address: _____

_____

Subscribed and sworn to me, a Notary Public for the City/County of _____in the State of Virginia, this _____ day of_____, 20_____.

My commission expires_____, 20____. _____

Notary Public

032-06-0118-09-eng (7-14)

Stolen Check Report
All questions must be answered

Date of Report_____ Payee_____

Address of Payee_____

_____

Phone #: Home _____ Work _____ Cell _____

Check Number _____ Amount _____ Date of Check_____

Were any other items, such as identification, taken? ☐ Yes ☐ No

If so, what type _____ ID Number_____

Where did the theft occur? ☐ Home ☐ Work ☐ Auto ☐ Other _____

Do you have any idea who may have taken this check? ☐ Yes ☐ No If so, who?_____

Description of Suspect: Height _____ Weight _____ Sex _____ Age _____ Race _____

Address of Suspect_____

_____

Why do you suspect this person? _____

_____

How do you know this person? _____

_____

Is this person related to you? ☐ Yes ☐ No If so, what relation is this person to you? _____

Have you moved in the last 60 days? ☐ Yes ☐ No

Please attach a separate piece of paper that lists all other adult household members in the home at the time of the theft.

A police report must be filed when a Stolen Check Report is made.

Police report number: _____

I agree by signing this report to cooperate with the Department of Social Services and any law enforcement agencies in the investigation and/or prosecution of any person(s) who may be responsible. (This information will be supplied to the financial institution who negotiated the check and law enforcement agencies to assist in prosecution.) Additionally, I state that this information is true and correct, and understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or imprisonment.

Please sign your name on the following lines:

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

Lost Check Report
All questions must be answered

Date of Report _____ Payee_____

Address of Payee_____ _____

_____

Phone #: Home _____ Work _____ Cell _____

Check Number _____ Amount _____ Date of Check_____

Did you receive the check? ☐ Yes ☐ No

If yes, where did the loss occur? ☐ Home ☐ Work ☐ Auto ☐ Other _____

Are any other items, such as identification, lost/missing? ☐ Yes ☐ No

If so, what type? _____

I agree by signing this report to cooperate with the Department of Social Services and any law enforcement agencies in the investigation and/or prosecution of any person(s) who may be responsible. (This information will be supplied to the financial institution who negotiated the check and law enforcement agencies to assist in prosecution.) Additionally, I state that this information is true and correct, and understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or imprisonment.

Please sign your name on the following lines:

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

WELLS FARGO

NAME OF PAYEE	WELLS FARGO ACCOUNT NUMBER OF MAKER OF CHECK	DATE

☐ ☐ **Endorsement Forged**
My endorsement on the reverse of the check listed below is a forgery, missing, or not as drawn. I did not sign the check and I did not authorize the signature.

PLEASE RETURN THE COMPLETED CLAIM FORMS, ALONG WITH THE ORIGINAL CHECK (OR A PHOTOCOPY IF THE ORIGINAL CHECK IS NOT AVAILABLE) TO:

101 Greystone Blvd., 1st Floor
MAC: D3035-014
Columbia, SC 29210

- If you have any questions about completing the forms, please call us at 1-800-278-6256 Monday through Friday 7:30 a.m. to 5:30 p.m. PT.
- If you are claiming more than one check as "Endorsement Forged", please make photocopies of this form and submit each check with a separate signed affidavit page.
- Please include the following information for the fraudulent check:

Check #	Date	Amount	Made payable to:

BY SIGNING BELOW, YOU—THE PAYEE—IS MAKING THE FOLLOWING DECLARATIONS:

- **The statement(s) indicated above are true.**
- **I did not receive any benefit or value from the proceeds of the check(s) listed above.**
- **I have not arranged with the person(s) who misused the check(s) listed above to be reimbursed for any portion of the proceeds of the check(s).**
- **I will cooperate in any investigation, promptly disclose any information requested by the Bank, and if necessary, cooperate fully with any prosecution.**
- **I will testify to the truth of these statements in any case, which may result from this affidavit.**
- **All information I have provided in this document is true.**

I DECLARE UNDER THE PENALTY OF PERJURY THAT THE ABOVE STATED IS TRUE.
PAYEE/ENDORSER SIGNATURE *(FORGED ENDORSEMENT CLAIMS ONLY)*
Form needs to be notarized once completed. (If affiant located outside U.S., foreign notarized document must be "authenticated" at U.S. Consulate.)

Payee Name and Title Payee Signature:	Date
Address (Street/City/State/ZIP)	Phone Number

Place Notary Stamp Here:

NOTARY INFORMATION
State of: _____ County of: _____

Subscribed and sworn before me this_____ day of _____, (year) _____
My Commission Expires_____

Signature of Notary Public

AFFIDAVIT ON CHECK ENDORSEMENT

FORM NUMBER- 032-06-0118-09-eng (7/14)

PURPOSE OF FORM – This is a three part form which includes sections for the Affidavit on Check Endorsement, Lost or Stolen Check Report and Wells Fargo Bank. These forms are to be completed when requesting a stop payment. The form should be completed by the payee (as much as possible) to allow the Fraud Investigator to compare the handwriting on the form to the payee's signature.

USE OF FORM – To be used by the local social services agency when a check is reported lost or stolen to secure the payee's statement that he or she did not endorse the check.

NUMBER OF COPIES – Three original signed affidavits.

DISPOSITION– Submit two original signed affidavits (which will include the Lost Check Report or Stolen Check Report) to the VDSS home office, Division of Finance, Fiscal Processing Unit (FPU). File the third original signed affidavit (which will include the Lost Check Report or Stolen Check Report in the eligibility record). Additionally, when a copy of the police report is provided for a Stolen Check Report, file the report in the eligibility record and give a copy to fraud unit in the local agency upon request.

INSTRUCTIONS FOR PREPARATION OF AFFIDAVIT ON CHECK ENDORSEMENT

Locality	Locality that listed check on warrant register
Category	Type of check issued
ADAPT Case No.	Complete case number
Worker Name and #	Complete worker's name and number
Check No.	Complete 8-digit check (warrant) number
Dated	Show date on the check
$	Entire amount of the check, including cents
Payable to	Payee name
Signature	Only PAYEE signature
Date	Date the affidavits are signed
SSN	Payee's social security number
Address	Address as shown on the warrant register. Must have City, State and Zip
Notary	Blanks must be completed with Notary information, signed by Notary, and imprinted with the Notary seal.

STOLEN/LOST CHECK REPORT

The client must complete a lost or stolen check report as part of the affidavit. In the case of a stolen check, a police report must be filed.

Instructions For Preparation Of Stolen Check Report

Date of Report	Date affidavit is signed
Payee	Name of person check is made payable to
Address of Payee	Address as shown on warrant register, including City, State and ZIP
Home Phone	Payee's home telephone number
Work Phone	Payee's work telephone number
Cell Phone	Payee's cell phone number
Check Number	Complete 8 digit check (warrant) number
Amount	Entire amount of check, including cents
Date of Check	Date on check
Other ID taken	Check YES or NO
If so, what type	List each piece of stolen ID
Where did theft occur	Check appropriate box, Home – Work – Auto – Other
If Other	Indicate where
Idea Who?	Check YES or NO

If YES box is checked, complete the following 7 questions:

If so, Who:	Person's name
Description	Best possible description of suspect
Address of suspect	Address of the suspect, including City, State and Zip
Why this Person	Reason this person is suspected
How person is known	How payee knows the suspect
Related	Check YES or NO

What Relationship	If YES box is checked, answer how suspect is related to payee
Moved in last 60 days	Check YES or NO
Police report number	Number given to police report by local police department MUST BE COMPLETED
Sign name	10 original payee signatures

Instructions For Preparation Of Lost Check Report

Date of Report	Date affidavit is signed
Payee	Name of person check is made payable to
Address of Payee	Address as shown on warrant register, including City, State and ZIP
Home Phone	Payee's home telephone number
Work Phone	Payee's work telephone number
Cell Phone	Payee's cell phone number
Check Number	Complete 8 digit check (warrant) number
Amount	Entire amount of check, including cents
Date of Check	Date on check
Check Received	Check YES or NO
Where did the loss occur	Location of where check was lost
Other ID lost/missing	Check YES or NO
If so, what type	List each piece of lost identification
Sign name	10 original payee signatures

WELLS FARGO AFFIDAVIT OF CHECK FRAUD BY PAYEE FORGED ENDORCEMENT

PURPOSE OF FORM- To be completed when requesting a stop payment on the original check issued and when requesting a duplicate check that has been lost, stolen, non-receipt or mutilated. The form should be completed by the payee and the EW will forward to Virginia Department of Social Services (VDSS) Fiscal Processing Unit who forwards to Wells Fargo Bank.

USE OF THIS FORM– To be completed by the local social services agency when a check is reported lost or stolen to secure the payee's statement that he or she did not endorse the check.

NUMBER OF COPIES –Two original signed affidavits.

DISPOSITION– Submit signed affidavits through the VDSS Fiscal Department who will forward to a Wells Fargo Bank Representative.

INSTRUCTIONS FOR PREPARATION OF AFFIDAVIT OF CHECK FRAUD BY PAYEE FORGED ENDORSEMENT

Endorsement Forged	The payee should check the box if check was not signed or authorized by the payee
Check No.	Enter the complete 8-digit check (warrant) number
Date	Enter the date on the check
Amount	Enter the entire amount of the check, including cents
Made Payable to	Enter the payee name
Payee Name and Title/Signature	Enter the payee printed name then signature
Date	Enter the date the affidavit is signed
Address	Enter the current address (as shown in ADAPT) City, State and Zip Code
Phone Number	Enter payee telephone number
Notary	Blanks must be completed with Notary information, signed by Notary, and imprinted with the Notary seal

DIRECT DEPOSIT INFORMATION AND PROCEDURES

This appendix explains procedures for direct deposit cases including mailing a check when a direct deposit did not post to a client's account. Note: The ADAPT transactions below indicate how to complete fields related to direct deposit procedures. Routine procedures for completing screens and transmitting to view the next screen have been omitted.

A. **Glossary**

- **ADAPT - The Application Benefit Delivery Automation Project.**
- **Direct Deposit – The process by which TANF benefits are electronically posted to a client's bank account.**
- **EW - The eligibility worker or other local department of social services staff with check handling responsibility.**
- **FPU - Fiscal Processing Unit. The FPU is the unit within the State Department of Social Services, Division of Finance, which processes returned/undelivered checks, lost/stolen checks, cancelled, and mutilated TANF checks as well as direct deposits that did not post.**
- **Fraud - The payee signs affidavits stating she/he did not receive the benefit of the payment. The local agency must get local or state money back from the payee if any was given to the payee.**
- **LDSS - The local department of social services.**
- **Payment History - A history in ADAPT of the payments received by a case.**
- **Specific Payment Inquiry - Information specific to an individual payment on the Payment History.**

B. **TANF Benefits - Schedules Information**

- **Monthly Cycle - Ongoing State-generated TANF and VTP benefits to be issued on the first of each month.**
- **Daily Cycle - Initial and supplemental payments generated by the State.**

C. **How to Process a Direct Deposit Request**

Responsible Party	Action
Client	• **The client must provide a completed and signed Direct Deposit Enrollment Authorization Form (#032- 03-672) and a voided check.**
	• **The client is to complete Section 1 of the form. Section 2 must be completed by the bank if the client does not have a voided check.**
Eligibility Worker	• **The case must be in the On-going mode. The case name must be on the bank account. The bank account can be a checking or savings account.**
	• **From the ADAPT Main Menu, the Eligibility Worker will select Option 4, Case Utilities Menu (CUMENU). Transmit.**
	• **Select Option 12, TANF Direct Deposit/ Debit Card Information. Enter the ADAPT case number. Enter "U" (Update) in Access. Transmit.**
	• **On the Case Utilities Direct Deposit (CUDDEP) screen, enter the Institution Name. The account name is pre-filled with the case name. Enter the Account Type, "c" (checking) or "s" (savings).**
	• **Enter the Bank Routing number, which is found at the bottom left side of the voided check, or Section 2 of the Direct Deposit Enrollment Authorization form (032-03-672). Enter "vr" beside "V" for Verification.**
	• **Enter the bank Account Number. This is the second set of numbers at the bottom of the check to the right of the routing number or in Section 2 of the Enrollment form. Enter "vr" beside "V" for verification. The account number is separated from the routing number by a colon. Transmit.**

- A pop up box will ask, "Do you want to print the letter?" This is the pre-note letter that is sent to the client informing the client that the request for direct deposit has been processed and instructing the client to check the account number and routing number to make sure the information is correct. If the information is not correct the client is to contact her Eligibility Worker.

- The worker will enter "y" to print the letter. Transmit.

- The direct deposit request is put into Pending status. Allow seven days for the direct deposit information to be verified with the client's bank. Once the information is verified as correct the direct deposit screen will become Active. The direct deposit Active Status communicates to ADAPT that this case is direct deposit.

D. Procedures to reissue benefits that did not electronically post (direct deposit) to client's bank account.

NOTE: A direct deposit payee has 45 days from the issuance date to report non-receipt of a benefit payment that was not posted to his bank account.

Responsible Party	Action
FPU	• As soon as a direct deposit is returned to VDSS, FPU updates the ADAPT payment status screen to flag the direct deposit with CD1 (Cancel Direct Deposit).
ADAPT	• ADAPT automatically updates the Public Assistance Payment History screen (CHSPHS) with information that the direct deposit returned to the state and places the entry on the worker's Action Due List Inquiry screen.
Eligibility Worker	• The EW must check the Local Action Due Inquiry Listing during the first five days of the month, and check the listing when a client reports her TANF benefit is not in her account. A direct deposit that did not post will be on the list with the code (CD1) Cancel Direct Deposit. The worker must take action to mail a check to all clients listed. To access the Local Agency Action Due Inquiry List, select option 8 from the ADAPT Main Menu. Transmit. Select option 8 Check Handling Action Due List. Transmit. Note: When a direct deposit becomes CD1, the next month's benefits will be issued to the client through the ADAPT system.

The EW is to mail the client the Direct Deposit Closed Account/Incorrect Information letter (032-03- 674). This letter is sent to the agency printer by ADAPT. The EW is to check the appropriate box on the letter for the reason the direct deposit did not post. The reason is located on the Direct Deposit Utilities (CUDDEP) screen and the PA Specific Payment History (CHSPHS) screen. The letter notifies the client that the direct deposit did not post to the client's account and for the client to contact the local agency. A copy of the letter is to be put into the client's file.

- **The EW may issue the client a state check or local check.Select Option 9, TANF Benefit Adjustment from the ADAPT Main Menu. On the TANF Benefit Adjustment screen enter "u" in Access, enter 11 in Option, enter the pay ID #, and the month for which the check is re- quested. Transmit. Enter the appropriate information to issue the state or local check.**

Note: Whenever the client changes the routing number or bank account number CUDDEP will be put into Pending. A new pre-note file will go to the client's bank. Allow seven days to verify the information. A new pre-note letter is sent to the client and a copy is put in the client's file.

E. <u>How to cancel a direct deposit</u>

Responsible Party	Action
Eligibility Worker	**Client Request** **Upon receiving a request in writing or the Request for Change of Issuance Method form (032-03-0996-00) completed by the client, the worker will access the ADAPT Main Menu. Select Option 4, CUMENU. Transmit. On CUMENU select Option 12, TANF Direct Deposit/ Debit Card Information. On CUDDEP, press F5. A box will come up to ask you to confirm. Enter "Y" for yes. Transmit. (Note: If you enter "N" for no, no action will be done to the case.) The request to cancel the direct deposit must include the client's name, address, social security number, signature and date. Note: The form is available at http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi.** **Once direct deposit is canceled, send the client the Direct Deposit Cancel Verification Letter (032-03- 676). The letter is available at http://localagency.dss.state.va.us/ Divisions/bp/tanf/forms.cgi.**

DEBIT CARD INFORMATION AND PROCEDURES

This appendix explains procedures for debit card cases. Note: The ADAPT transactions below indicate how to complete fields related to debit card procedures. Routine procedures for completing screens and transmitting to view the next screen have been omitted.

A. Glossary

1. ACS – Affiliated Computer Services. ACS, through its Electronic Payment Processing and Information Control (EPPIC) system, is responsible for the processing and maintenance of debit cards for clients (including the creation, delivery, and replacement of the physical debit card to the client). **Clients may contact EPPICard Customer Service (EPPIC) at 1-800-961-8423 or www.EPPICard.com regarding account specific questions.**

2. ADAPT - The Application Benefit Delivery Automation Project.

3. Comerica – ACS designated financial issuer.

4. Debit Card – The process by which TANF benefits are electronically posted to an account which can be accessed through the use of a state-issued Virginia debit MasterCard® (also referred to as an EPPICard – Electronic Payment Processing and Information Control card).

5. EW - The eligibility worker or other local department of social services staff with benefit issuance responsibility.

6. LDSS - The local department of social services.

7. Payment History - A history in ADAPT of the payments received by a case.

8. Specific Payment Inquiry - Information specific to an individual payment on the Payment History.

B. TANF Benefits – Availability Schedules

1. Monthly Cycle - Ongoing State-generated TANF and VTP benefits will be available on the debit card on the first day of each month. **Note: Benefits are typically posted after ADAPT cut-off to ensure availability on the first of the following month. Refer to SPARK broadcasts for the schedule of expected post dates for monthly benefits each year.**

2. Daily Cycle - Initial and supplemental payments generated by the State will be available on the debit card by the fourth business day after approval of the benefit for individuals who have requested debit card as the TANF issuance method but do not have a debit card. This will allow time for the card to be mailed and the client to activate the card. Benefits will be available on the next business day after approval of the case for individuals who have a pre-existing TANF debit card account.

C. How to Process a Debit Card Request

Responsible Party	Action
Client/ EW	• **As part of the interview with new applicants and re-applicants, the EW will advise the client of the issuance methods available for TANF benefits. If the client wishes to receive the benefits by debit card, she will state this intention to the EW. The EW will advise the client that only one debit card will be issued for each TANF case. (The card will be issued to the individual who is listed in the "Case Name – Person Number" field on the AECASE screen in ADAPT.) The EW should advise the client that a debit card will only be issued to individuals with a valid social security number.** **Note: If the client requests a debit card, she should be advised that Diversionary Assistance benefits can not be issued through a debit card. Additionally, Full Employment Program (FEP) benefits can not be issued through a debit card.**
EW	• **Debit card will be the default issuance method for ADAPT. If the client chooses debit card as the issuance method, the EW will simply process the case as she usually would. ADAPT will pre-fill all information on the Direct Deposit/ Debit Card (CUDDEP) screen including the cardholder name (as designated on AECASE) as the Account Name; "EPPICard" as the bank name; the routing number for Comerica; and "D" for debit card as the account type.**

D. How TANF Benefits Will Be Issued When the Request to Establish a Debit Card Account (Request a Debit Card) Is Rejected

Responsible Party	Action
ADAPT	• **When a debit card request is rejected, ADAPT will update the Direct Deposit/ Debit Card status field on the TANF Direct Deposit/ Debit Card (CUDDEP) screen to "Failed." ADAPT will automatically issue the benefits by check. An individual at the Home Office will receive an email from ACS stating**

the reason why the request for the debit card failed. The individual will contact the local agency if the EW needs to take any action. The individual will also take the appropriate action to resubmit the request to ACS. When the request is approved, ADAPT will update the Direct Deposit/ Debit Card (CUDDEP) screen to reflect a status of "Active" for the issuance method of debit card and future benefits will be issued by debit card.

D. How TANF Benefits Will Be Issued When a Payment Fails to Post to an Existing Debit Card Account

Responsible Party	Action
ADAPT	• **When a TANF payment fails to post to a debit card account (when the client has a debit card - not an initial request for a debit card), ADAPT will update the benefit payment status screen to flag the debit card with a "CD1" (Cancel Direct Deposit/ Debit Card).** • **ADAPT automatically updates the Public Assistance Specific Payment History screen (CHSPHS) with information that the debit card payment was returned to the state and places the entry on the EW's Check Local Agency Action Due Inquiry list.**
EW	• **The EW should review the Check Local Agency Action Due Inquiry list daily. A debit card payment that was not posted will appear on the list with the code of "CD1" (Cancel Direct Deposit/ Debit Card). To access the Check Action Due List, select option 8 – TANF Check Handling from the ADAPT Main Menu. Then select option 8 - Check Action Due List. The EW must update CUDDEP to reflect check as the issuance method then take action to mail a check for the current month's benefits to all clients listed. The EW must then access CUDDEP again to change the issuance method back to debit card for future payments.** • **The EW may issue the client a state check or local Check for the current month's benefits. Select Option 9 - TANF Benefit Adjustment from the ADAPT Main Menu. On the TANF Benefit Adjustment screen, select option 11, enter "u" in Access, enter the pay ID #, and the month for which the check is requested. Enter the appropriate information to issue the state or local check.**

F. How to Change the Benefit Issuance Method from Check to Debit Card

Responsible Party	Action
EW	**Client Request** **Upon receiving a request in writing or a completed Request for Change of Issuance Method form (032-03- 0996-00) available at http://localagency.dss.state.va.us/divisions/bp/tanf/ forms.cgi., the EW will select option 4 – Case Utilities from the ADAPT Main Menu. The EW will select option 12 - TANF Direct Deposit/ Debit Card Information then enter a "u" in the Access field and the ADAPT case number. When the Direct Deposit/ Debit Card (CUDDEP) screen appears, the EW will enter "D" for debit card in the Account Type field. After the EW transmits from the CUDDEP screen, ADAPT will pre-fill the remaining information on the screen including the cardholder name (as designated on AECASE) as the Name; "EPPICard" as the bank name; and the routing number for Comerica.**

G. How to Change the Benefit Issuance Method from Direct Deposit to Debit Card

Responsible Party	Action
EW	**Client Request** **Upon receiving a request in writing or a completed Request for Change of Issuance Method form (032-03- 0996-00) available at http://localagency.dss.state.va.us/divisions/bp/tanf/ forms.cgi., the EW will select option 4 – Case Utilities from the ADAPT Main Menu. The EW will select option 12 - TANF Direct Deposit/ Debit Card Information then enter a "u" in the Access field and the ADAPT case number. When the Direct Deposit/ Debit Card (CUDDEP) screen appears, the EW will change the Account Type field to "D" for debit card. A pop-up box will appear. The message will state "Warning: This will remove the authorization for TANF Direct Deposit. Y/N." If the EW enters a "Y" for yes and transmits, the Direct Deposit/ Debit Card status will be set to "pending" and the debit card**

request process will begin. If the client already has a debit card account, another card will not be requested. ADAPT will enter the pre-existing account number on CUDDEP.

Note: If the EW enters an "N" for no, no action will be taken and direct deposit will continue to be the issuance method.

H. How to Change the Benefit Issuance Method from Debit Card to Check

Responsible Party	Action
EW	**Client Request** **Upon receiving a request in writing or a completed Request for Change of Issuance Method form (032-03-0996-00) available at http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi.), the EW will select option 4 – Case Utilities from the ADAPT Main Menu. The EW will select option 12 - TANF Direct Deposit/ Debit Card Information then enter a "u" in the Access field and the ADAPT case number. When the Direct Deposit/ Debit Card (CUDDEP) screen appears, the EW will press the F5 function key. A pop-up box will appear. The message will state "Warning: This will remove the authorization for TANF Debit Card. Y/N." If the EW enters a "Y" for yes and transmits, the issuance method will be changed to check for future payments.** **Note: If the EW enters an "N" for no, no action will be taken and debit card will continue to be the issuance method.**

I. How to Change the Benefit Issuance Method from Debit Card to Direct Deposit

Responsible Party	Action
EW	**Client Request** **Upon receiving a request in writing or a completed Request for Change of Issuance Method form (032-03- 0996-00) available at http://localagency.dss.state.va.us/divisions/bp/tanf/ forms.cgi.), the EW will select option 4 – Case Utilities from the ADAPT Main Menu. The EW will select option 12 - TANF Direct Deposit/ Debit Card Information then enter a "u" in the Access field and the ADAPT case number. When the Direct Deposit/**

Debit Card (CUDDEP) screen appears, the EW will change the Account Type field to "C" for checking or "S" for savings. A pop-up box will appear. The message will state "Warning: This will remove the authorization for TANF Debit Card. Y/N." If the EW enters a "Y" for yes and transmits, the Direct Deposit/ Debit Card status will be set to pending. The EW will also enter the account name and number as well as the bank name and routing number on CUDDEP. This request must be entered at least seven days prior to the monthly ADAPT cut- off date to be effective for the following month.

If the direct deposit information is valid, future payments will be issued through direct deposit.

It is especially important that the EW check the Check Action Due List during the first five days of the month for direct deposit information. A direct deposit that did not post will be on the list with the code of "CD1" (Cancel Direct Deposit/ Debit Card). When this happens, the EW will follow instructions at Section 500, Appendix II D to issue the benefits by check.

Note: If the EW enters an "N" for no, no action will be taken and debit card will continue to be the issuance method.

J. Debit Card Reported Lost/Stolen by Cardholder

Responsible Party	Action
Client	The cardholder will contact **EPPICard** customer Service at 1-800-961-8423 to report a lost/ stolen card and obtain a replacement card.
EW	No action is required. The EW should advise the cardholder to contact **EPPICard** customer service to report **the** lost/ stolen card.

K. Debit Card/ **Debit Card Funds** Returned by Cardholder

Responsible Party	Action
EW	When a cardholder attempts to return a debit card to the LDSS, staff should refuse to accept the card and provide the cardholder with a copy of the Returned TANF Debit Cards information sheet (032- 03-0200). (See the exception for overpayments in the note below).

If the cardholder mails the debit card to the LDSS, the EW should mail the card back to the cardholder along with a copy of the Returned TANF Debit Cards information sheet(032-03-0200).
Note: Funds received by debit card may be used to repay a previous overpayment. The cardholder will have to obtain the funds from the card and provide the funds to DSS as a cash payment.

L. Change of Address Reported by Cardholder

Responsible Party	Action
EW	When a debit cardholder reports a change of address and states that she has reported this to ACS and ACS is unable to update the address in the EPPIC system, the EW will update the address in ADAPT then contact the Helpdesk to report that a change of address has been completed and an update to the EPPIC system should be completed as well.
Client	If the client needs to request a replacement card, she will contact ACS customer service after the EW has received confirmation from the Helpdesk that the address has been updated in the EPPIC system.

M. A Social Security Number and/or Date of Birth Has Been Corrected for a Debit Cardholder

Responsible Party	Action
EW	When an EW changes a date of birth and/or a social security number in ADAPT for a debit cardholder, the EW should contact the Helpdesk to request that the EPPIC system be updated as well.

N. A Name Change for a Debit Cardholder

Responsible Party	Action
EW	When an EW changes a name in ADAPT for a debit cardholder, the EW should contact the Helpdesk to request that the EPPIC system be updated as well.
Client	If the client wishes to receive a new debit card with the new name on it, she will contact ACS customer service after the EW has received confirmation from the Helpdesk that the name has been updated in the EPPIC system.

O. Reporting Non-Receipt of Debit Card Funds

Responsible Party	Action
Client	The cardholder must contact the EW within 45 days of the issuance date to report non-receipt of benefit funds into his EPPICard account.
EW	Whenever a client reports non-receipt of benefit funds deposited to his EPPICard account, the EW **will check AECASE in ADAPT to review the "case name/person number" the card was assigned to.** **If the "case name/ person number" is the client's number, the EW will advise the client to call EPPICard Customer Service at 1- 800-961-8423. If the "case name/person number" belongs to someone else on the case, the EW must put in a ticket to the help desk at 1(866) 537-8482 or vccc@vita.virginia.gov in order for the situation to be researched.** **If the client is unable to resolve the issue after contacting EPPICard Customer Service, the EW will put in a ticket to the help desk at 1- 866-637-8482 or by email at vccc@vita.virginia.gov in order for home office to research the situation.** **The client must report non-receipt of benefits to his EPPICard account within 45 days of the issuance date. If the client does not report non-receipt of benefits within 45 days of issuance, no assistance will be offered by the agency to obtain the benefits**. **Note: Once benefits are posted to a debit card, the benefits cannot be taken off the debit card by VDSS.**

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www.dss.virginia.gov/family/dcseoffices.cgi or
http://localagency.dss.virginia.gov/divisions/dcse/contacts.cgi

601.1 SUPPORT ENFORCEMENT PROGRAM -

A. Legal Base

Legislation enacted by the 1974 session of the General Assembly* provided for the establishment of a statewide support enforcement program with a support enforcement unit to carry the responsibility for initiating and maintaining such program. Amendments to the Social Security Act** effective August 1, 1975, make mandatory, on a national level, a Child Support Enforcement Program and set forth certain procedures relative to the payment and collection of child support and the establishment of paternity. Subsequent amendments to the 1974 legislation expanded the program to include collection of support paid on behalf of caretakers included in the assistance unit and establishment and enforcement of health care coverage. The Division of Child Support Enforcement (DCSE) was established within the State Department of Social Services to administer this program. Regional and district offices are located throughout the state. (See Appendix III.)

B. DCSE Responsibilities

DCSE has the responsibility for:

1. pursuing support from the absent parent(s);

2. establishing paternity;

3. locating the absent parent(s) if whereabouts are unknown;

4. determining ability to support;

5. collecting and distributing support from absent parent(s);

6. pursuing court action to secure support from the absent parent(s);

7. establishing and enforcing medical support obligations;

8. determining noncooperation with DCSE.

C. Local Agency Responsibilities

Local agencies carry the responsibility for:

1. determining the ability to support by the stepparent in the home;

* Code of Virginia, Sections 63.1-249 - 63.1-274.9
** Public Law 93-647

2. explaining the benefits of providing information to DCSE such as possible entitlement to receive up to a $100 disregard per month when support has been collected, monetary support for the child if the applicant/recipient loses TANF benefits, and future benefits or pensions for the children;

3. securing information regarding absent parent(s), and the amount of support, if any, which is received by or on behalf of the applicant/recipient from such persons;

4. reporting information about absent parent(s) to DCSE;

5. explaining the applicant/recipient's rights and responsibilities regarding the automatic assignment of rights to support (201.9), the requirement regarding cooperation in obtaining support and good cause for refusing to cooperate (201.10);

6. in pending applications where it appears from the applicant's statement that a putative father is living in the home, the local agency may pursue the establishment of paternity. An Acknowledgement of Paternity, form VS22, obtained from the local health department, should be used for this purpose. The form must be completed, signed by the putative father **and the mother**, and notarized. A copy of the notarized Acknowledgement of Paternity should be filed in the case record and the original sent to the Center for the Support of Families, PO Box 8536, Richmond, VA, 23226.

   Once a child becomes a recipient, the agency is not to pursue the putative father for the purpose of establishing paternity. However, the agency will accept an acknowledgement of paternity which is initiated by the putative father at any time. Paternity will be established by **a** notarized Acknowledgement of Paternity form **that has been signed by both parents**. There will be no instance in which the local agency initiates court action for the purpose of establishing paternity when the putative father is not in the home. Additionally, the local agency will not accept a notarized statement denying paternity under any circumstances.

7. determining good cause for not cooperating with DCSE;

8. determining noncooperation with the local department of social services;

9. determining exceptions to providing identifying information on the noncustodial parent in Section 201.10 A.1.c.).

601.2 REFERRAL OF CASE INFORMATION TO DIVISION OF CHILD SUPPORT ENFORCEMENT - Federal regulations specify that the local agency is responsible for reporting to the Division of Child Support Enforcement (DCSE) all identifying information regarding each absent parent including putative and legal fathers, to aid in the securing of support and establishing paternity for TANF cases.* This information must be provided concurrent with action approving the application or adding a child to a case, and is reported to DCSE. The information is collected on the Absence Deprivation/Paternity 501 series screens in ADAPT. The collected information is transmitted or forwarded to DCSE upon case approval or action to add a child.

Copies of documents, such as paternity statements, birth verifications, and court orders or divorce decrees, if available, are to be submitted at the time of case approval by attaching the legal document or supplement to the "Document Transfer Cover Form," form number 032-03-0275) and sending it via the courier pouch to the DCSE district office serving your locality.

A. Referral of TANF Cases

All TANF children with at least one parent absent from the home, including unestablished paternity, must be referred to the Division of Child Support Enforcement (DCSE).* This referral is to be completed for each absent parent (AP), including legal fathers and putative fathers (whether the putative father is living in the home or not).

A 501 must also be completed for SSI children with at least one parent absent from the home upon case application or action to add a child to an existing assistance unit. System coding prevents children with an ‘Exclusion Code’ of A17 (SSI or AG Recipient) on EDDRVA (Non Financial Results) to be transmitted to DCSE. This child will be considered Non- TANF and support collected for this child will be sent to the custodial parent.

Current support paid to DCSE and sent to the custodial parent for the SSI child will not display on the TANF Cases, Current Collected Support and Expected TMPs report**.**

No referral to DCSE is to be completed for a deceased legal parent, a deceased putative father, TANF-UP parents, a court convicted legal parent living in the home who is doing unpaid community service, the caretaker's absent spouse who is not a parent of one of the children in the assistance unit, or the absent parent of a child subject to the family cap provision, or the father of a child conceived by artificial insemination from an anonymous donor. In addition, no referral to DCSE is to be completed for an adoptive parent, a biological parent, or a putative father when there is a court ordered termination of Adoptive Parents Rights for a child. The client's statement is acceptable verification of the parent's status (reason for absence, including death), unless there is reason to question the information provided.

* 45 CFR 235.70

It is the responsibility of the eligibility worker to obtain as much information as possible at the time of application and when an individual is added to the TANF case. When any new information regarding the absent parent becomes known to the agency, **including information obtained during the renewal**, this information is to be transmitted to DCSE via the Absence Deprivation/Paternity 501 series screens in ADAPT.

In order for DCSE to have a "workable case," it is vital that certain key information be obtained by the Eligibility Worker when completing the form or transmitting information on the Absence Deprivation/Paternity 501 series screens in ADAPT.

When interviewing the applicant/recipient, concentrate on securing the following information:

AP's name;
AP's residence address (current and past);
AP's Social Security Number;
AP's employer's name and address (current and past) AP's date of birth; and
AP's parents' name and address (even if deceased).

Any of the above information, either in whole or a combination thereof will be beneficial to DCSE in locating the absent parent.

If the applicant/recipient cannot give the AP's name or can only provide the AP's name and no other identifying information, the Eligibility Worker should obtain as much information as possible on the Absence Deprivation/Paternity 501 series screens in ADAPT for submission to DCSE.

The following criteria are to be applied when referring an absent parent to DCSE:

1. In all cases where the child's parents are married or were married at the time of the child's birth and when someone other than that parent is identified as the child's father, the putative or acknowledged father is to be referred as well as the legal father.

2. If the father’s name appears on the child’s official birth certificate issued in 1996 or later by the Virginia Department of Health, Division of Vital Records, or by the vital records section of any other state government, evidence of paternity exists for TANF purposes.

3. When there is no legal parent or acknowledged father and more than one individual is named as a child's parent, refer all named individuals

4. If an applicant/recipient claims that the father of the child is unknown, a referral must be made. The reason that the father is unknown must be evaluated with the applicant/recipient to determine if failure to cooperate or good cause exists. (201.10 A.1.c and 201.10)

5. For an otherwise eligible child who has been emancipated by court order (Sections 16.1-331 through 16.1-334 of the Code of Virginia), a referral must be made on the absent parent(s). For an otherwise eligible child who has been emancipated by marriage, the referral will also be made on the absent parent(s).

B. TANF-UP Cases

The natural or adoptive parents residing in the home in a TANF-UP case are not referred to DCSE. Determine if an absent parent of a child(ren) in the assistance unit must be referred as per policy in this section.

C. Changes to TANF and TANF-UP Cases

Changes to TANF and TANF-UP case information will be transmitted to the Division of Child Support Enforcement by computer.

When a child is added to an existing case, all identifying information regarding the absent parent must be provided to DCSE on the Absence Deprivation/Paternity 501 series screens in ADAPT concurrent with action to add the child in accordance with Section 601.2 A.

When a child is removed from an existing case because he becomes ineligible, or leaves the household, the information will be communicated electronically from ADAPT to the DCSE automated system.

D. Contact with the Absent Parent

When the local agency determines that contact with the absent parent is necessary, such contact will be limited to verifying contributions being made directly to the assistance unit.

E. Automated Communication with DCSE

Non-cooperation information on the custodial parent is displayed as an alert in the ADAPT system to the eligibility worker.

601.3 LEGALLY RESPONSIBLE PERSONS - Under Virginia law the following persons have legal responsibility for support:

A. Husband, for wife*;

B. Wife, for husband*;

C. Parent, natural or adoptive, for child under 18, or child of whatever age who is incapacitated, unless such child is receiving federal or state assistance as permanently or totally disabled or is an adult qualifying for assistance to the blind.

D. A stepparent residing with a child(ren) of the natural or adoptive parent is responsible for such child(ren) who are receiving assistance and the parent as long as the stepparent lives with the natural or adoptive parent. The stepparent and the natural/adoptive parent will be considered living together regardless of absences due to military duty, employment, or other absences of convenience, as long as they consider themselves to be living as husband and wife. **Responsibility for the children does not exist once the natural or adoptive parent is absent from the home because of separation, divorce, or death.**

E. The father of a child born out-of-wedlock, if**

1. the father and mother have made a written statement acknowledging paternity, under oath, including acknowledgements of paternity made under oath by the father and mother prior to July 1, 1990; or,

2. the man, unrelated to any court action, voluntarily submitted to genetic blood testing which affirmed at least a 98 percent probability of paternity; or,

3. the court enters judgment on the basis of other evidence that the man is the father. Such evidence as specified in Section 20-49.4 of the Code of Virginia is limited to the following:

a. that he cohabited openly or had sexual intercourse with the mother at the probable time of conception;

* Section 20-61, Code of Virginia
** Section 20-49.4, Code of Virginia

b. that he consented to or acknowledged, by a general course of conduct, the common use of his surname by the child;

c. that he claimed the child as his child on any statement, tax return or other document filed by him with any local, state or federal government or any agency thereof;

d. results of medically reliable genetic blood grouping tests;

e. medical or anthropological evidence relating to the alleged parentage of the child based on tests performed by experts;

f. a true copy of an acknowledgement of paternity made on the Acknowledgement of Paternity (Form 032-11-VS22);

g. an admission by a male between the ages of fourteen and eighteen, provided a court has entered an order establishing paternity of a child based on his admission of paternity under oath or upon such other evidence as may be sufficient to support a finding of paternity. (**Note: In most circumstances, the Division of Child Support Enforcement will not pursue support from a minor parent for whom a court has established a support obligation as long as the parent is attending school in compliance with compulsory attendance laws.)**

602.1 REDIRECTION OF SUPPORT MONIES FROM NON-CUSTODIAL PARENTS - Federal regulations* state that in cases where an assignment of support is effective, support payments shall be made to Support Enforcement. The assignment is effective upon case approval. Therefore, any child support, including court ordered support, paid to the assistance unit from the non-custodial parent subsequent to case approval must be redirected to Support Enforcement. Once this support is redirected, it will not be considered in determining the amount of payment, until such time as the net support, when added to other countable income, is sufficient to meet the total needs of the assistance unit.

602.2 TREATMENT OF SUPPORT - There are three types of support that are routinely paid to TANF custodial parents which must be considered in determining initial and on-going TANF eligibility:

A. Current support paid by the non-custodial parent on behalf of TANF eligible children in the AU. Current support paid directly to the client during the application process will be treated as income with the exception of a disregard of up to $100. Following case approval, current support will be redirected to DCSE. Up to $100 of the current support payment will be sent by DCSE to the client and will be disregarded in determining the on-going TANF benefit. (See 305.4(E)2 for treatment of support for SSI children and capped children not the AU, and for situations in which support must be prorated for eligible and non-eligible children).

B. Arrearages paid by the non-custodial parent for periods in the past when the client received TANF. If, during the application process, arrearage payments are made directly to the client, and the period for which the payments are made was a time during which the client received TANF benefits, the payments will be treated as income. For an on-going case, the absent parent should make all child support payments directly to DCSE, including arrearage payments. Arrearage payments made on behalf of eligible children when the custodial parent received TANF on their behalf are retained by DCSE to discharge the non-custodial parent's debt to the state.

C. Arrearages paid by the non-custodial parent for periods in the past during which the custodial parent did not receive TANF. Such an arrearage payment made directly to the client during the application process will be treated as income. For an on-going case, any arrearage payment which is made to DCSE for a period during which the client did not receive TANF will be sent by DCSE to the client. If the payment is non-recurring, it should be treated as lump sum payments in accordance with 305.4C. If recurring, such payments will be treated as unearned income. **See guidance at 305.1(b)(2)a for determining the amount of unearned income to be counted when there is significant fluctuation from month to month in arrearage payments.**

The following sections will outline when support received from a non-custodial parent in cash or in-kind is to be considered available to the assistance unit and counted accordingly. The term "total needs" used in the following is the statewide standard of assistance. The local worker's responsibility is limited to determining the amount of support received by the applicant/recipient from non-custodial parents, and determining eligibility and amount of assistance payment based upon the policy set out below.

602.3 SUPPORT FROM NON-CUSTODIAL PARENTS ABSENT FROM THE HOME - During the initial determination of eligibility, the first $100 of current monthly child support received, or expected to be received, by the applicant will be disregarded in the eligibility screen and grant calculation. If the amount received or expected to be received is less than $100, the entire amount is to be disregarded. All remaining current support (net countable) will be considered as income for computing the amount of any payment made to the family for a period prior to the first TANF assistance payment. This procedure applies to A., B., C., and D. below.

* 45 CFR 302.32 (A)

If the family is determined to be otherwise eligible according to policy, assistance must be granted without delay. Child support received from non- custodial parents during the application processing stage, less the first $100 of total support received, or expected to be received, will be considered as income to the A.U. for any payment made to the family for a period prior to case approval. The disregard of the first $100 of child support is also applicable to support received, or expected to be received, from a putative father during the application processing stage. Additionally, this disregard will be applied to support from the putative father subsequent to case approval until the recipient redirects such support to the Division of Child Support Enforcement.

A. Absent Parent or Acknowledged Father

Determine the amount of support received from the non-custodial parent.

1. Subtract the first $100 from the total child support received to determine net support.

2. If net support when added to other countable income is sufficient to meet the total needs of the assistance unit, eligibility does not exist.

3. If such support when added to other countable income, is insufficient to meet total needs of the assistance unit, the budget will be computed showing total needs minus other countable income. The support received will not be counted as income after case approval. The applicant/recipient must be advised that all future support received must be forwarded to Support Enforcement. See 305.4.E.2. for exceptions.

B. Absent Spouse of the Caretaker who is a Relative Other Than Parent of Eligible Children - Determine if the absent spouse of such caretaker is paying support and/or alimony and the amount contributed. If the amount being paid, when added to other countable income of the caretaker, equals or exceeds that individual's needs, the caretaker will be excluded in determining the amount of assistance payment. If the amount is insufficient when considered as above, the caretaker will be eligible to be included in the assistance unit. Support/Alimony received by the caretaker must then be combined with gross support being received from the absent parent of the eligible children. (See Section 305.4.E.2 regarding the calculation of the initial payment(s)). Future support/alimony payments received after case approval must be paid to the Division of Child Support Enforcement and this income will be disregarded. The amount of assistance payment will be computed based on total needs minus countable income, up to the maximum reimbursable amount. (Refer to 302.2.) If the caretaker is receiving alimony only, (support not commingled with child support) this is to be retained by the assistance unit and counted as income to the unit. The **$100** disregard is not applicable.

C. Absent Spouse of the Parent of the Eligible Children - Support or alimony paid to an eligible child's parent in the assistance unit (this parent must be in the assistance unit unless one of the criteria in 302.6.D. exists) must be considered as income to the unit. Combine the support/alimony of the eligible child's parent with support received from the absent parent of the child. The first **$100** of total gross support received by the parent and eligible child(ren) will be disregarded in determining eligibility. If the net amount being received, when added to other countable income, equals or exceeds the appropriate standard of assistance, eligibility does not exist. (See Section 305.4.E.2 regarding the calculation of the initial month's payment(s)). If the amount is insufficient when considered as above, future payments received after case approval must be paid to Division of Child Support Enforcement and will be disregarded in determining the amount of the assistance payment. If the caretaker is receiving alimony only (support not commingled with child support) this is to be retained by the assistance unit and counted as income to the unit. The **$100** disregard is not applicable.

D. Putative Father Absent from the Home - Cash contributions from a putative father, less the first **$100**, will be counted as income against the grant, in the amount received by the assistance unit, until these contributions are redirected to the Division of Child Support Enforcement. (See 305.4.E.3. for treatment of cash contributions from putative fathers.) Once the contribution is redirected, the amount of the assistance payment will be computed based on the standard of assistance for the unit minus other countable income, up to the maximum reimbursable payment.

In all instances where support must be redirected to the State, it is essential that the worker make it clear to the applicant/recipient what is required and provide all information necessary to assist the individual in redirecting these payments. See Appendix I and Appendix III at the end of this chapter. The worker must also confirm the fact that the recipient is cooperating in redirection by reviewing the notification report.

602.4 SUPPORT FROM RESPONSIBLE PERSONS IN THE HOME

A. Support from Parents - In situations in which a caretaker is in the home, but not in the assistance unit (including a minor caretaker excluded because she is not in compliance with compulsory school attendance requirements, or excluded for any other reason listed at 302.7D), all income of the individual will be considered as income available to the assistance unit in accordance with Section 305.4.E.1.d.

B. Support from Stepparents – A stepparent, living in the home, married to the parent of the TANF child(ren), is responsible for support of his/her spouse and the eligible child(ren) of the spouse. The actual amount, if any, of support provided by the stepparent, will be the amount established in accordance with Section 305.4.F.

Note: If the parent of the TANF children is deceased, or not living in the home due to separation or divorce, the income of the stepparent will not be deemed to the children. See 305.4F(1).

A stepparent who is not living in the same home with the spouse who is the natural or adoptive parent of the TANF children is not responsible for support of the children. The stepparent remains legally responsible for the support of his/her spouse. **Spousal support, if any, paid by the stepparent living away from the home to the spouse, will be counted as income.**

602.5 HANDLING OF SUPPORT PAYMENTS COLLECTED BY THE STATE

State and federal regulations require that all support paid for or on behalf of a child or caretaker receiving TANF must be directed to the State as a refund toward public assistance paid on behalf of such children or caretaker.*

Federal regulations require the Support Enforcement agency to notify the agency administering the TANF program, of the amount of support collected which represents payment on the required support obligation for each month. The notification requirements are accomplished through the report, TANF Cases, Current Collected Support and Expected TMPs**, which is** displayed monthly and accessed by local agencies **thru TANF Supplemental Reports on SPARK.** This report shows support collected by the State in the prior month on the required support obligation. The report is available online by the 15th of the month following the month in which the support was collected. The local agency administering the TANF program is required, upon being informed of the report, **to review the report for the net support amount** to determine if **this amount is** sufficient to make the family ineligible for an assistance payment.**

Under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 states were given the option to continue the $50 disregard payments to TANF recipients, where appropriate. Based on the Deficit Reduction Act of 2005, Virginia opted to increase the disregard payment to $100.*** No disregard payment, shall be made, however, for a month in which there is no support collected.**** When support is collected from two or more absent parents, only the first $100 of the total support collected will be paid to the assistance unit and disregarded. The disregard will be issued to TANF recipients when the TANF case has a status of 'GR' (granted), 'GV' (granted VIEW), or GF (granted FEP).

TANF case with 'SU' (suspended) status for <u>any reason</u>, will be sent the current total collected support (including the $100 disregard) for the actual month of suspension by DCSE.

A. <u>Notification to Local Agencies</u>

The report, TANF Cases, Current Collected Support and Expected TMPs**,** displays current support payments paid to DCSE on the required support obligation from non-custodial parents for the month identified on the report. The monthly TANF benefit **amount and the net support amount** (total current monthly support, minus the disregard) will also display on the report.

This report must be accessed and reviewed monthly. The amount of support shown on the report should be used as outlined below:

* 45 CFR 302.32(a) and Section 63.2-1909, Code of Virginia
** 45 CFR 233.20
*** Public Law 109-171
**** 45 CFR 233.20

1. Compare the net support to the current monthly TANF amount.

2. If the net support does not exceed the monthly TANF amount no further action is needed on the TANF case.

3. If the net support is greater than the current monthly TANF amount ADAPT will suspend the payment.

4. When the net support is greater than the current monthly TANF amount for two consecutive months, **ADAPT will close the TANF case.**

5. When the report shows an 'R' in the 'Net Support" column, the worker must run ED/BC and grant the case before cutoff of the report month.

Redirected support paid to DCSE will not be screened at either 185% or the standard of assistance.

Payments made to DCSE in a month which exceeds the grant amount will be marked by one or two asterisks. The number of asterisks denotes how many months net child support exceeded the monthly TANF grant amount. Two asterisks will display when net support exceeds the TANF benefit for two consecutive months. ADAPT will automatically suspend cases marked with one asterisk.

ADAPT will automatically close TANF cases marked with two asterisks. When net support has exceeded the TANF benefit for two consecutive months, ADAPT will close the case in the month that the two asterisks appear on the *TANF Cases, Current Collected Support, and Expected TMPs* report. The closure will take place during the TMP process in ADAPT. Notices will be generated and mailed along with the regular TMP notices.

Support Enforcement will then, on all cases in which eligibility no longer exists, take action to redirect the support to the family in lieu of the public assistance payment.

Note: The report, TANF Cases, Current Collected Support and Expected TMPs and inquiry into the Automated Program to Enforce Child Support (APECS) through Systems Partnering in a Demographic Respository (SPIDeR) system are the only acceptable means of verifying support amounts that have been redirected to and are collected by the Division of Child Support Enforcement. One of these sources must be used in determining continuing eligibility for public assistance.

Support reported by a client is to be verified at the time it is reported if it has not yet been re-directed to DCSE.Timely action is to be taken to close the case if the support causes ineligibility.

The only exception to using the TANF Cases, Current Collected Support and Expected TMPs report or APECS inquiry is direct communication with the district DCSE representative. The DCSE representative should only be contacted when the recipient disagrees with the listed amount. The case record must be documented with the date, amount, and name of the DCSE representative.

However, the time frame for taking action remains the same. If the case is determined to be ineligible, the case must be suspended before cutoff of the month in which the **TANF Cases and Current Collected Support** report was received by the agency.

B. Handling of Support on Suspended TANF Cases

Suspended cases will have mailed to them from DCSE the current total (includes $100 disregard) collected support for the actual month of suspension.

Process

- TANF case is suspended in ADAPT in a current month, effective the 1st of the next month.
- ADAPT sends to DCSE the suspension status at the end of the month in which the suspension was entered.
- DCSE changes the case status in APECS from TANF to Non-TANF at the beginning of the suspended month.
- DCSE sends the client all support collected in the actual month of suspension, within two days of receipt.

Suspended TANF cases may be reinstated when the recipient has satisfied the requirements of the reason for suspension. Cases suspended due to net support exceeding the TANF payment amount (SU 013) must not be reinstated for the month of suspension.

When it is appropriate to reinstate the TANF case, change the status from 'SU' to 'GR', 'GV', or 'GF', and ensure payment is made for the appropriate month(s).

- If reinstating for the month of suspension complete a benefit calculation for the month of suspension counting the net support (minus the first $100) sent to the client from DCSE.

- The support for the month of suspension must be verified through APECS and the net support counted in the benefit calculation.

- Additional support payments sent from DCSE to the client in the month of suspension after the payment has been reinstated must not negatively impact the client.

- If the 'GR', 'GV', or 'GF' is for the month following the month of suspension ADAPT will calculate the payment amount.

Example 1: TANF case is suspended effective July 1 **because the agency is unable to locate the client**. **The client contacted the agency on July 12 and reported a new address.** The AU has zero countable income.

Eligibility worker is reinstating the grant on July 14th
APECS shows a total of $189 has been sent to the client **in July**.

Grant amount	$320.00	Mailed support	$189.00
		Disregard amount	- 100.00
			$ 89.00

Grant amount $320 - $89 = $231 TANF supplement for July

Another payment in the amount of $102 is made to DCSE on July 23rd and **deposited to the client's EPPICard account** on July 27th. The support payment **posted to the client's account will not be considered** an overpayment.

Example 2: The TANF Cases and Current Collected Support report in June shows case with a 'SU 013' - suspended due to excess support. The net support is $519**;** the monthly TANF payment is $320. One asterisk displays in the column 'Net Support'.

ADAPT has suspended this case effective July 1st.

ADAPT will send a 'trigger' to DCSE at the end of June.

DCSE will change this case to Non-TANF for the beginning of July.

All current support paid to DCSE from the non-custodial parent(s) in the month of July will be sent to the TANF recipient.

NOTE: This case must not be reinstated.

Example 3:

The 'TANF Cases and Current Collected Support' report in June shows TANF cases with a 'SU 010'- VIEW Sanction; 1st Sanction. The net support for May is $466 with a monthly TANF payment of $451. One asterisk displays in the column 'Net Support'.

ADAPT has suspended this case effective July 1st.

ADAPT will send a 'trigger' to DCSE at the end of June.

DCSE will change this case to Non-TANF for the beginning of July.

All current support paid to DCSE from the non-custodial parent(s) in the month of July will be sent to the TANF recipient.

VIEWrequirementsmetonJuly16th. TANFbenefitreinstatedJuly19th, effectiveAugust1st.

The worker does the following:

1. Runs ED/BC and authorizes the August payment with a 'GV'.

2. A supplemental payment is not issued for the month of July. (The VIEW fixed sanction period of one month must be served.)

INFORMATION TO BE GIVEN TO APPLICANT/RECIPIENT

In the process of determining eligibility, the local worker must explain thoroughly, the following:

A. Assignment of Rights (Section 201.9)
B. Cooperation in Obtaining Support (Section 201.10)
C. Redirect of Support Payments to State (section 602.1)
D. Referral to Support Enforcement (Section 601.2)
E. Legally Responsible Relatives (Section 601.3)

SCREENING PROCEDURE

ITEM TO BE EXPLAINED	DETAILS TO BE GIVEN
A. Assignment of Rights (Section 201.9)	A. 1. What the assignment of rights means to applicant/recipient; 2. How the assignment is executed; 3. When the assignment is effective; 4. What absent legally responsible relatives are covered by assign- ment of rights; 5. Assignment is automatic upon receipt of assistance - recip- ient relinquishes all right, title and interest in all support owed by absent responsible persons and must redirect. 6. Period of time assignment covers.
B. Cooperation in Securing Support and Good Cause (Section 201.10)	B. Advising applicant/recipient of their responsibilities as outlined in 201.10 and the penalty for failure to cooperate unless good cause exists.
C. Redirect of Support Payments (Section 602.1)	C. Applicant/recipient must be informed that: 1. Contact with absent legally responsible person will be made and such person will be instructed to mail support payment to the State.

SCREENING PROCEDURE

ITEM TO BE EXPLAINED	DETAILS TO BE GIVEN
	2. Should support payments continue to be received by the client, failure to send such payments to State will result in referral for prosecution for fraud, including recoupment from future assistance payments.
D. Referral to Support Enforcement (Section 601.2)	D. All information necessary to aid Support Enforcement in the securing of such support must be provided within two working days following the initial payment or redetermination of eligibility.
E. Legally Responsible Relatives (Section 601.3)	E. The applicant/recipient must be advised of the responsibility of each person specified in 601.3 to support, as it relates to each individual case or person for whom assistance is requested.

DCSE District offices information can be accessed at
www.dss.virginia.gov/family/dcseoffices.cgi, or
http://localagency.dss.virginia.gov/divisions/dcse/contacts.cgi

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701.1 PURPOSE OF THE TANF-UP PROGRAM

The Temporary Assistance for Needy Families - Unemployed Parent (TANF-UP) Program is intended to provide assistance to families with two able-bodied parents.

701.2 CATEGORICAL REQUIREMENTS AND CONDITIONS OF ELIGIBILITY APPLICABLE TO THE TANF-UP PROGRAM

A. Members of the assistance unit must meet existing categorical requirements and conditions of eligibility for TANF.

B. The child must reside in a home in which both natural or adoptive parents reside, and neither parent meets the criteria at 901.2 C. or D.

1. In the case of a putative father living in the home, an acknowledgement of paternity must be made in order to qualify for TANF-UP. A completed and notarized Acknowledgement of Paternity form VS22, obtained from the local health department, should be used for this purpose.

2. If the man's name appears on the child's official birth certificate issued in 1996 or later by the Virginia Department of Health, Division of Vital Records, or by the vital records section of any other state government, evidence of paternity exists for TANF purposes.

3. If the mother was married at the time of the child's birth, the mother's husband is the legal father **and is considered the child's father until a court has determined that he is not. After the court has excluded the husband as the father, DCSE can proceed to determine** the paternity status of the man named by the mother.

4. When a putative father in the home has not or refuses to acknowledge paternity for a child in the home, or when the putative father's paternity has not been established, the TANF-UP application must be evaluated as a TANF application.

C. The assistance unit must be in financial need.

D. Both parents must participate, as required, in the Virginia Initiative for Employment not Welfare Program (VIEW) unless one parent meets an exemption. Only one parent may qualify for an exemption (Refer to Section 901.2). If both parents are ineligible, i.e., do not meet citizenship/alienage requirements, they are not required/allowed to participate.

701.3 ASSISTANCE UNIT TANF-UP

A. The assistance unit is required to include one able-bodied natural or adoptive mother and one able-bodied natural or adoptive father, with at least one child in common and all minor siblings of that child(ren) who meet the categorical requirements listed in Section 201.1.A.

A putative father cannot be included in the TANF-UP assistance unit unless paternity has been established.

If one or both parent(s) meet the exemption criteria at 901.2. C. or D. or if one of the parents is a putative father for whom paternity has not been established, the case is a TANF case, not a TANF-UP case.

Note: If the only child in common is **ineligible based on the family cap provision at** 201.12, **the family may remain eligible for TANF-UP as long as there are other eligible children in the assistance unit.**

B. If, after receipt of TANF-UP benefits, one parent leaves the home and another parent enters the home who has a child in common with the custodial parent and who qualifies for TANF-UP, a new assistance unit is established.

701.4 FINANCIAL CRITERIA

A. All countable earned and unearned income of the assistance unit will be considered in determining financial need.

B. The case is to be closed if the income of the assistance unit causes ineligibility.

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Appendix 1 – Diversionary Assistance Examples

801.1 PURPOSE

The diversionary assistance program was established by HB 2001, passed by the 1995 General Assembly. Authorized by Section 63.2-617 of the Code of Virginia, this program is intended to prevent potential TANF recipients from becoming ongoing TANF recipients. If immediate intervention with short-term aid will resolve a one-time emergency or crisis situation and prevent the need for ongoing TANF, the assistance unit may be granted diversionary assistance.

It is anticipated that the applicant's emergency or crisis situation will be related to basic needs such as food, shelter, medical expenses, child care expenses or the costs associated with getting or keeping employment, including transportation costs. Local agencies shall strive to provide the most cost effective, appropriate solution to the one-time crisis or emergency situation. (This may include referrals to other community organizations for assistance when the receipt of diversionary assistance will not resolve the situation.)

801.2 SCREENING

The worker must explain the diversionary assistance program to all TANF applicants. The worker must screen all TANF applicants for eligibility for diversionary assistance at the time of application. The applicant will declare if she has a one-time emergency or crisis situation. The worker will determine whether diversionary assistance can resolve it.

801.3 VOLUNTARY

The eligibility worker and the applicant must discuss the appropriateness of diversionary assistance to the applicant's situation. If the applicant meets the eligibility factors for diversionary assistance, he may decide whether or not to receive diversionary assistance rather than TANF. Receipt of diversionary assistance is voluntary and in every case requires the written consent of the applicant. A signed Acceptance of Terms of Issuance of Diversionary Assistance will serve as written consent.All applicants for diversionary assistance must first sign the Acceptance of Terms before the application can be approved.

801.4 ELIGIBILITY DETERMINATION PERIOD

Local social services agencies must determine eligibility for diversionary assistance within five working days of the receipt of the final verification that substantiates eligibility, or within 30 calendar days following the date of receipt of the signed application, whichever occurs first. If the applicant fails to provide all needed verifications and/or sign the Acceptance of Terms by the 30th calendar day after application, the application will be denied. (Note: When the 30th calendar day falls on a weekend or holiday, the worker must provide a decision on the application on the last working day prior to the 30th day.) The applicant may file a new application for TANF or diversionary assistance at a future date.

801.5 ELIGIBILITY FACTORS

Only applicants may be approved for DA. Current recipients of TANF are not eligible. Additionally, a recipient who chose to receive TANF at the time of application may not close her TANF case after approval and become eligible for DA based on her circumstances at the time the TANF application was approved. Example: client applies for TANF on March 15 due to her spouse's incarceration (his wages were the only income for the household). She chooses to receive TANF assistance and is approved for March. On April 18, client requests her TANF case be closed. On May 1, client reapplies for assistance and requests DA based on the loss of income when her husband became incarcerated in March. The client is not eligible for DA.

Receipt of DA will not count toward either the 24 or 60-month limit on the receipt of TANF. However, an assistance unit that is in a period of ineligibility for TANF due to either the 24 or 60-month limit on the receipt of TANF will also be ineligible for DA. The applicant must verify all of the following factors and the worker must document the case record accordingly before an assistance unit can receive DA:

A. The assistance unit is eligible to receive TANF. A child is eligible for TANF by meeting the TANF requirements in Section 201.1.A (categorical requirements of age, relationship/living arrangements, residency, citizenship/alien status, and financial need).

The **following** conditions of eligibility in 201.1.B **(complying with the school attendance requirement, signing the VIEW APR or participating in VIEW, cooperating with DCSE) do not have to be met** to be eligible for DA, but citizenship or alien status of each applicant or other adult who will be included in the assistance unit for DA must be verified prior to case approval. (Note: The legal presence provision that allows up to 90 days for an applicant age 19 and over to verify his status (201.7.D) does not apply to DA.)

The caretaker shall be eligible for TANF unless one of the exceptions specified in 302.7. D or E is applicable. The caretaker does not have to meet the conditions of eligibility (including VIEW participation and cooperation with DCSE). However, if the caretaker has been referred for or is in a VIEW sanction or if the TANF case was previously closed due to DCSE noncooperation and the caretaker is not in good standing with DCSE at the time of the DA application, the entire assistance unit is ineligible for DA. The client cannot "cure" the sanction, or begin to cooperate with DCSE, in order to become eligible for DA. Note: Case closure due to failure to sign the Agreement of Personal Responsibility (APR) is not a VIEW sanction. Therefore, a DA case may be approved after a TANF case was closed for failure to sign the APR.

The "Do You Have a Disability?" form (032-03-0670) must be completed for a DA application. The Notice of Personal Responsibility for the TANF Program (032-03-0750), the Notice of Cooperation and Good Cause (032-03-0036), and the Notice of Intentional Program Violations and Penalties (032-03-0646) forms are not required for a DA application.

B. The assistance unit meets TANF income limits based on DA guidelines for the treatment of terminated and anticipated income at 801.6;

C. The assistance unit has:

- experienced a loss of income in the six months prior to the date of application which has resulted in the current emergency, or
- experienced a reduction in income in the six months prior to the date of application which has resulted in the current emergency, or
- a delay in starting to receive income resulting in the current emergency. (The income must be scheduled to start within 60 days following the date of application.)

The income that is lost or reduced must be the earned or unearned income of the applicant or other **adult** household member who would be part of the assistance unit for TANF purposes or whose income would be considered available to the assistance unit. (See 302.7) **Income from child support payments made on behalf of a child in the household will be considered income of the applicant or other adult household member.**

Income cannot have been voluntarily lost or reduced in order to qualify for Diversionary Assistance. The lost or reduced income cannot be the income **of a minor child or the income** of an individual who **cannot** be included in the assistance unit. **The lost or reduced income cannot have been received by the household as a gift. The lost or reduced income cannot be from TANF or Refugee Cash Assistance.**

The loss or reduction of income requirement will not be met if the loss or reduction of earned income is due to a voluntary quit without good cause. Good cause includes circumstances beyond the applicant's control, such as but not limited to, loss of child care, transportation, illness of the applicant or a family member, or another emergency situation.

D. The worker must have verification of the loss of income, reduction in income, or the anticipated start date of new income.

E. The worker must determine that diversionary assistance will resolve the one-time emergency or crisis situation.

F. The emergency or crisis situation does not result from debts owed as a result of receipt of TANF assistance in any state (including Virginia). This will include all previous TANF overpayments, overpayments for services, and debts incurred for child support. Note: Diversionary Assistance funds cannot be used to pay for debts owed as a result of the receipt of TANF assistance in any state.

801.6 DETERMINING THE AMOUNT OF THE PAYMENT

The exact amount of the diversionary assistance payment will be the maximum TANF amount for four months or the amount of the applicant's needs, whichever is less. The payment cannot exceed the total TANF payments that the recipient would otherwise be eligible to receive in four months. The diversionary assistance payment for applicants reapplying for TANF with four or less months remaining on the VIEW clock or the TANF 60 month clock will be calculated following the same guidelines as for other applicants.

In determining the applicant's need for assistance, consider the applicant's immediate ongoing income only. Do not include terminated income or anticipated income in determining the applicant's need. Do not enter terminated or TANF anticipated income in ADAPT. Follow these steps to determine the amount of the diversionary assistance payment:

A. Calculate a maximum DA amount - Compute the monthly grant amount for the assistance unit. Any ongoing income, such as social security income, will be counted. (Income from a terminated source, or income that has not started, is not considered ongoing income for DA purposes.) Multiply the monthly grant amount by four.

B. Determine the basic needs (as described in 801.1) of the assistance unit - The DA amount can cover more than one basic need and can include items such as shelter payments, utility payments, and transportation assistance. (Note: When the need is vehicle repair, the vehicle must be registered - either solely or jointly - in the name of at least one of the household members applying for assistance.) Document the case as to the needs that will be covered and the verified cost of providing for each need. The case record must contain copies of documents (such as bills, cut-off notices, rental agreements, and automobile repair estimates) that verify each need.

Choose the most cost-effective, appropriate solution to the applicant's needs. For example, if the emergency has created a need for transportation, the agency may calculate the cost of bus tickets versus the price of repairing the car.

C. Compare the amounts in A and B - The lesser amount of A and B is the amount of the DA payment.

Example: Ms. Z applies for DA for herself and two children. Her car broke down, and she is unable to get to work. As there is no countable income, the maximum she can receive is $1,280 ($320 x 4 = $1,280). There is no other transportation available, and Ms. Z needs her car to get to work. Ms. Z provides verification that the repairs to her car will cost $900. Since $900 is less than the maximum available DA payment amount of $1280 and Ms. Z did not report any additional needs, the DA **amount would be** $900.

D. Supervisory approval is required for all DA payments. It is the responsibility of the supervisor to ensure that the payment is made by a check to the vendor, or when that is not possible, by a check to the client. In no case is a DA payment to be made by debit card.

801.7 PERIOD OF INELIGIBILITY

A. If an assistance unit receives a DA payment, it shall be ineligible for TANF for up to 160 calendar days beginning with the date that the DA is issued. To determine the period of ineligibility follow these steps:

1. Determine the monthly amount of TANF for which the applicant is eligible. If an Intentional Program Violation (IPV) has been committed, exclude the disqualified individual's needs from the monthly grant amount. Follow IPV procedures in Section 102.3.A. Note: To determine how many months will be counted as months of disqualification to be deducted from the individual's IPV penalty period, divide the number of days that are covered in the payment amount (as determined in step 3 below) by 30. Round up to the next whole number.

2. Divide the amount determined in Step 1 by 30. This is the daily amount of assistance.

3. Divide the diversionary payment amount by the daily amount determined in Step 2 to determine how many days are covered in the payment amount. Round up to the next whole number.

4. Determine the number of days of ineligibility by multiplying the number of days determined in Step 3 by 1.33. Round up to the next whole number. This number cannot exceed 160 days.

5. Using the number of days determined in Step 4, determine the date that the period of ineligibility ends. Note: this date is automatically calculated by ADAPT and pre-filled on the AESANC screen.

B. An assistance unit which has received DA is not eligible for TANF again until the period of ineligibility expires. During this period of ineligibility, the case will be considered a public assistance (PA) case for SNAP purposes. Any AU member that is in a POI for DA is not eligible to receive TANF in any assistance unit until the POI has ended.

Example: Mr. Raymond received DA in one AU. He is now in a POI for DA. He moves to another AU. Mr. Raymond is not eligible to receive TANF in that AU until his POI for DA has ended.

C. A child(ren) born to a client who is in a period of ineligibility for TANF due to receipt of a DA payment is not eligible for TANF until the period of ineligibility expires.

D. An assistance unit can receive DA only once in a twelve- month period.

801.8 VENDOR PAYMENTS

DA payments are to be made in the form of vendor payments whenever possible in order to ensure that the specific emergency or crisis situation is resolved. These payments are issued as TANF supplemental checks to be sent directly to the vendor and are entered in ADAPT on the BATASC screen. The account number, and name on the account, if different from the case name, must be entered on the “secondary line” so the payment can be correctly credited by the vendor. The client should be instructed to contact the vendor when DA has been approved and advise the vendor to expect the check from the Virginia Department of Social Services. The EW should include a reminder about this on the Notice of Action.

Note: If the worker cannot issue a vendor payment due to systems limitations, or if a vendor payment is not appropriate based on the circumstances of the case, a payment may be made directly to the recipient. The recipient should be advised that she is expected to use the payment to pay the vendor.

Prior to beginning the process to reissue a check when a vendor reports non-receipt of a DA check, the worker should review the Check Actions Due Listing in ADAPT. If the check does not appear on the list, the worker should contact the Fiscal Processing Unit at Home Office to confirm that the check has not already been cashed.

DIVERSIONARY ASSISTANCE EXAMPLES

EXAMPLE #1**:**
Ms. Elliott applied for diversionary assistance on June 1st for herself and two children. She had been working full time but was laid off on May 24th. She will receive her final paycheck on June 4th in the amount of $403. She also has a part time job working 15 hours a week at $8 an hour.

Ms. Elliott is requesting assistance in paying off a $1200 medical bill. She is no longer able to make payments on it since she lost her full time job and has been threatened with court action. Her situation meets the Diversionary Assistance requirement of a crisis or emergency situation which can be solved by short-term aid.

Because the final check Ms. Elliott will receive is from a terminated source, that income will not be considered in determining her eligibility for diversionary assistance and will not be entered on the income grid. (Note: If the amount of the final paycheck is entered, it will be counted in determining eligibility even though it is from a terminated source.) Ms. Elliott has monthly income from her part time job of $516 ($8 per hour x 15 hours per week x 4.3 = $516). That income is ongoing and will be counted in determining DA eligibility.

Ms. Elliott's monthly income of $516 is less than **the $622** maximum family income for a family of 3 in a Group II **locality** and the case passes the 185% income screen. The Standard of Assistance for her family size is **$336,** but the case is eligible for only **$47** per month based on Ms. Elliott's income. The total diversionary assistance amount available to the family is **$188**. Ms. Elliott agreed that this amount would not help her situation. She needed a minimum of $600 to forestall court action. She decided to proceed with an application for TANF instead of diversionary assistance.

Earned Income	$ 516.00	(ongoing income)
Standard Deduction for 3	- 155.00	
Sub Total	$ 361.00	
20% Reduction	- 72.20	
Total Grant Reduction	$ 288.80	
Grant Amount	$ **47.00**	(Group II, SOA for 3 = **$336**; **$336 - $288.80** = **$47.20)**
Maximum DA period	x 4	months Total Diversionary Allowable
	$ **188.00**	
Applicant Need	$ 1200.00	(medical bill)
Diversionary Issued	None, based on client's decision to apply for TANF	

EXAMPLE #2**:**
Ms. Ortiz applies for diversionary assistance on November 2nd for herself and her two nieces. She works at a large retail nursery supplying herbs and produce to restaurants and grocery stores in the eastern states. The nursery closes from November 1st to February 28th each year.

Ms. Ortiz works between 25 and 40 hours a week and earns $8 per hour. She worked 30 hours the last week in October and will receive her final paycheck on November 9th. That paycheck, for gross income of $240, will be the only income, earned or unearned, that she and the children will receive for November. Ms. Ortiz states that she is optimistic that she will find a job in the next week or so, but does not have enough money to pay her November car payment of $325, her rent of $900 and her utility bill, including arrears, of $163.

Ms. Ortiz's situation meets the Diversionary Assistance requirement of a crisis situation which can be solved by short-term aid, and she meets TANF income and other eligibility criteria.

While Ms. Ortiz has $240 in earned income for November, the income is not counted in determining the amount of assistance since it is from a terminated source. The income is not entered on the income grid. Her needs total $1388 which exceeds the maximum diversionary assistance payment of **$1344**. The diversionary assistance granted is the maximum payment of **1344**. Ms. Ortiz's sister agrees to give her **$44** to combine with the maximum diversionary amount so that the crisis situation can be resolved.

The household has no countable income.

Grant Amount	$ **336.00**	(Group II, SOA for 3 = **$336**)
Maximum DA period	x 4	months
Total Diversionary Allowable	**$ 1344.00**	
Applicant Need	$ 1388.00	($325.00 car payment + $900.00 rent + $163.00 utility bill)
Diversionary Issued	**$ 1344.00**	

EXAMPLE #3**:**

Mr. and Mrs. Carter apply for diversionary assistance on July 25th for themselves and their three young children. Mr. Carter's employer, a small manufacturer supplying the automobile industry, closed abruptly on March 20th. The employees were given no notice and no severance pay. Mr. Carter received his last paycheck, which included his wages through the day the plant closed, in the mail the next week. Since then, the family has survived with the help of family and friends, and a hardship withdrawal of $12,000 from his small 401k. The balance in the 401k is now $2,000 and Mr. Carter is hesitant to use it since the family will then be destitute. The family is requesting help with August rent and utilities.

Since the Mr. Carter's employment income from March is from a terminated source and since the loss of income occurred within the six month preceding the application date, it is not considered in determining eligibility for Diversionary Assistance and is not entered on the income grid. The family has no other income and the case passes the 185% screen.

The Carter family's need for rental and utility assistance meets the Diversionary Assistance requirement of a crisis or emergency situation which can be solved by short-term aid. However, the family did not have copies of the children's birth certificates at the time of application so the agency was unable to immediately establish relationship and approve the DA application.

Mr. Carter returned to the agency on August 11th with the children's birth certificates and the agency was able to establish relationship. Mr. Carter told the agency at that time that his wife had begun caring for a neighbor's child after school and would be making $50 a week through the end of the school year. She was paid $50 for one week of work on August 9th.

Since the agency had not yet approved the DA application, and since Mrs. Carter has received income which will be ongoing, the agency must re-determine the family's eligibility for assistance.

Mrs. Carter's monthly income of $215 is less than the **$1043** maximum family income for a family of 5 **in a Group III locality** and the case passes the 185% income screen. The standard of assistance for a family of 5 in a Group III locality is **$564**. After the earned income disregards are applied to Mrs. Carter's income, the grant amount is reduced to **$549**. The maximum diversionary assistance payment is determined by multiplying the grant amount by 4, the number of assistance payments the family could receive in a 4 month period. The actual diversionary payment is the maximum amount, or the eligible needs of the applicant, whichever is less.

Earned Income	$ 215.00	(ongoing income)
Standard Deduction for 5	- 197.00	
Sub Total	$ 18.00	
20% Reduction	- 3.60	
Total Grant Reduction	$ 14.40	
Grant Amount	$ **549.00**	(Group III, SOA for 5 = **$564**; **$564** – $**14.40** = **$549.60**)
Maximum DA period	x 4	months
Total Diversionary Allowable	$ **2196.00**	
Applicant Need	$ 1225.00	($875.00 rent + $350 utilities)
Diversionary Issued	$ 1225.00	

EXAMPLE #4**:**
Mr. Lawrence, a former VIEW participant with 22 months on the 24-month VIEW clock, applied for diversionary assistance on March 28th for himself and one child. He had not been working steadily for some time but found what he believes to be secure employment one week before he applied for assistance. He makes $12 an hour and will receive his first paycheck in two weeks. He has been living with friends, but has been asked to leave now that he has income. He has located an apartment but needs help in paying the rent and security deposit of $575 each. His situation meets the Diversionary Assistance requirement of a crisis or emergency situation which can be solved by short-term aid.

Because Mr. Lawrence's income has not yet started, the income will not be considered in determining his eligibility for diversionary assistance. The delay in the receipt of income will meet the Diversionary Assistance guidance requirement. His anticipated income will not be entered on the income grid.

The Standard of Assistance for a family of two in a Group III **locality** is **$339**. The maximum diversionary assistance payment is **$1356**. (Note: The number of months used to calculate the maximum diversionary assistance amount is always 4 without regard to the number of months on the VIEW clock or 60-month clock at application).

Grant Amount	$ **339.00**	(Group III, SOA for 2)
Maximum DA period	x 4	months
Total Diversionary Allowable	$ **1356.00**	
Applicant Need	$ 1150.00	($575.00 rent + $575.00 security deposit)
Diversionary Issued	$ 1150.00	

EXAMPLE #5:
Ms. Clark applied for Diversionary Assistance on August 15th after her boyfriend, Mr. Lawrence, moved out earlier in the month. They had lived together for four years and he is the father of her two children. He had been the sole support of the family. Ms. Clark has an AS degree in Business but has not worked since her youngest child was born two years ago.

Mr. Lawrence did not pay the $827 mortgage on their home which was due August 1st, or the telephone and electric bills which total $125, or make the $235 car payment on Ms. Clark's car. Ms. Clark began looking for employment as soon as she realized that Mr. Lawrence had left permanently and has found full time employment at $11.20 an hour beginning August 20th. Her first paycheck for one week's pay will be received on September 3rd.

Because Ms. Clark has found employment and will be able to support her family in the future, the loss of income (from Mr. Lawrence) can be considered a temporary loss as required by Diversionary Assistance guidance. She meets the other criteria for Diversionary Assistance.

Grant Amount	$ **409.00**	(Group III, SOA for 3)
Maximum DA period	x 4	months
Total Diversionary Allowable	$ **1636.00**	
Applicant Need	$ 1187.00	($125.00 utilities + $235.00 car payment + $827.00 mortgage)
Diversionary Issued	$ 1187.00	

EXAMPLE #6**:**
Mrs. Noel applied for diversionary assistance on December 3rd for herself and four children. She has been employed by the same company for three years, working 30 hours per week, but has just received

notification that all employees would be cut back to 18 hours per week at least until February. The employer hopes to return all employees to their regular hours and pay at that time. Mrs. Noel makes $8an hour and received her last full pay check on November 28th in the amount of $240.

Ms. Noel is concerned that she will be unable to make her mortgage payments for December and January, and possibly February, and still keep up with her other bills. Ms. Noel has been purchasing her Habitat for Humanity Home for three years. Her mortgage payment of $483 per month is due on the 15th.

Mrs. Noel's income for December will be $619.20 ($8 per hour x 18 hours per week x 4.3 = $619.20) which is less than the $**812** maximum family income for a family of 5 in a Group I agency. The case passes the 185% income screen.

Her situation meets the Diversionary Assistance requirement of a crisis or emergency situation which can be solved by short-term aid, and she meets TANF income and other eligibility criteria.

The standard of assistance for a family of 5 in a Group I locality is **$439** but the case is eligible for only $**101** per month based on Mrs. Noel's income. The total diversionary assistance amount available to the family is **$404**. Mrs. Noel decided to rely on her family for help with her mortgage for December and January. The **$404** will not really help her with her mortgage payments, and she does not want to jeopardize her TANF eligibility in case her employer has to lay off employees in the future.

Earned Income	$ 619.20	(ongoing income)
Standard Deduction for 5	- 197.00	
Sub Total	$ 422.20	
20% Reduction	- 84.44	
Total Grant Reduction	$ 337.76	
Grant Amount	$**101.00**	(Group I, SOA for 5 = **$439**; **$439 - $337.76** = **$101.24**)
Maximum DA period	x 4	months
Total Diversionary Allowable	$**404.00**	
Applicant Need	**$1449.00**	**(mortgage - $483 per month x 3 months)**
Diversionary Issued	None, based on client's decision.	

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Appendix I - TANF VIEW Grant Calculation
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Appendix III – Federal Poverty Level

The Virginia Initiative for Employment not Welfare Program (VIEW) is a program of employment opportunities to assist individuals in attaining the goal of self- sufficiency.*

The program goals are to offer Virginians living in poverty the opportunity:

- To achieve economic independence by removing barriers and disincentives to work and by providing positive incentives to work;
- To provide work skills necessary for self-sufficiency;
- To allow families living in poverty to contribute materially to their own self-sufficiency;
- To set out the responsibilities of and expectations for recipients of public assistance;
- To obtain work experience through the Virginia Initiative for Employment Not Welfare (VIEW).

NOTE: All policy in this manual also applies to VIEW participants except for the specific differences indicated below.

901.1 PARTICIPATION - As a condition of eligibility, each recipient of TANF and TANF-UP must participate, as required in VIEW, unless otherwise exempt.

The eligibility worker in the local agency must determine which applicants and recipients are not required (exempt) to participate and which are required to participate (non-exempt). The eligibility worker will refer to the VIEW Program a non-exempt individual at the time of application approval or when an individual's VIEW status changes. Any previous or existing registrations or participation under another category of assistance no longer apply.

NOTE: JOINT TANF AND SNAP APPLICATIONS: In situations requiring joint processing of TANF and SNAP applications, the work registration form or affidavit, whichever is appropriate, is to be used for SNAP purposes in the event that the TANF application is denied. (Refer to Volume V, Part VIII, A. of the SNAP Manual).

901.2 EXEMPTION CRITERIA - An applicant/recipient of TANF or TANF-UP must participate in the VIEW Program unless the individual meets one of the following exemption criteria:

A. Any child, (including minor caretakers) coded as PC. Use Exemption Code V3 – EXEMPT, Age 17 and under, on the ESP/VIEW/FSET (AEGNFS) screen.

B. **Any minor, age 17 and under, who is a parent on his/her own case, and is coded as PR. Use Exemption Code V3 – EXEMPT, Age 17 and under, on the ESP/VIEW/FSET (AEGNFS) screen.**

C. Individuals at least 18, but no more than 19 years of age, coded as a PC who are enrolled full-time in elementary or secondary school, including vocational or technical school programs. The vocational or technical school must be equivalent to secondary school. For these individuals, use Exemption Code V4 – EXEMPT, 18 to 19 enrolled in school full time, on the ESP/VIEW/FSET (AEGNFS)screen. At no time is the V4 Exemption Code to be used for an individual coded PR on the case.

* Code of Virginia, Section 63.2-609

D. Individuals unable to participate because of a temporary medical condition that prevents entry into at least 20 hours per week of employment and training activities, as determined by a medical professional. For these individuals, use Exemption Code V5 – Exempt, Temporary Medical Condition, on the ESP/VIEW/FSET (AEGNFS) screen. (Note: Pregnancy does not exempt an individual from participation. However, complications of pregnancy, as diagnosed by a medical professional, may result in a medical exemption).

A medical professional is defined as a medical doctor, including psychiatrist, or doctor of osteopathy, or a licensed physician's assistant or nurse practitioner working under the auspices of a medical doctor or doctor of osteopathy. This definition of medical professional also applies in 901.2F below.

The individual must provide the local agency a completed Medical Evaluation (form 032-03-0654) completed by the medical professional that states the nature and scope of the incapacity, including abilities and limitations of the individual, and the duration of the incapacity. The duration indicated is measured from the date the form was completed and signed by the medical professional. If the medical form does not specify the duration of the medical condition, or if the form is otherwise incomplete, the eligibility worker must contact the medical professional to obtain the missing information before acting on the medical.

The form is to be completed by a medical professional with thorough knowledge of the condition(s) that are believed to limit or prohibit the client's ability or participate in VIEW. Typically, this is the doctor or other medical professional who is currently treating the client for the condition. If, however, in the opinion of the agency, the client's condition is such that it should be evaluated by a specialist, then the specialist should make the evaluation, complete and sign the form.

Medical exams necessary to determine exemption status for VIEW or to assess a VIEW participant's ability to participate in the program will be arranged through Medicaid when possible. When medical coverage does not exist, the agency will pay for the first medical exam using VIEW funds, or other funds the agency deems appropriate. The agency may pay for additional exams, but is not required to do so.

The agency may choose to request and pay for a 2nd evaluation from a medical professional whenever the 1st evaluation is deemed by the agency to be inadequate to determine the client's exemption status, or ability to work or participate, or is otherwise questionable.

Note: If the agency is unable to secure a medical evaluation for a person required to participate in VIEW, the individual will be referred to VIEW. The ESW will work with the participant to secure a medical evaluation as part of the VIEW assessment process.

If the individual is unable to participate in VIEW for at least 20 hours per week because of a temporary medical condition substantiated by a medical statement, the eligibility worker must obtain a new medical and reevaluate the exempt individual's incapacity immediately following the

anticipated end of the incapacity as originally noted. If the duration indicated on the form is for more than 12 months, or is identified as permanent, a new form must be obtained every 12 months. Disability is defined at 101.1D and in Chapter 1000, VIEW definitions).

If the physician indicates that the individual is able to participate in employment and training activities but is limited in the types of activities that can be performed, or the hours of participation, the eligibility worker must refer the individual to VIEW and share the information with the ESW so suitable accommodations can be arranged. The employment services worker must work with the individual to find suitable component assignments, taking into account any limitations indicated by the physician. The agency shall ensure that reasonable accommodations are made if needed.

Note: If there are two parents in the assistance unit and one parent is exempt because of a temporary medical condition or disability, the case is a TANF case rather than a TANF-UP case.

E. Individuals who are incapacitated, as determined by receipt of Social Security Disability (SSDI) benefits or Supplemental Security Income (SSI). The EW must answer "Y" to Disabled on AEDEM4 and complete the AEIDIS screen. For these individuals, use Exemption Code V6 – Exempt, Permanent Incapacity, on the ESP/VIEW/FSET (AEGNFS) screen.

The eligibility worker must provide all applicants/recipients who have a permanent incapacity with information about services provided by the Department of Rehabilitation Services (DRS) to assist SSI/SSDI recipients in finding employment. This information is available at www.vadrs.org/downloads/drsflyer.pdf.

Note: If there are two parents in the assistance unit and one parent is exempt because of a permanent incapacity as determined by receipt of Social Security Disability benefits or Supplemental Security Income, the case is a TANF case rather than a TANF-UP case.

F. Any individual 60 years of age or older. For these individuals, use Exemption Code VT – Exempt, Age 60 or Over, on the ESP/VIEW/FSET (AEGNFS) screen.

G. An individual who is needed on a substantially continuous basis to care for a family member living in the household. The family member must have a verified disability. The family member must have caretaking needs that will prevent the caregiver from participating in work activities. "Caretaking needs" that prevent the caregiver from participating in work activities include the need for attendance, supervision and home care, and other needs related to the family member's disability. When the family member who requires care is also a member of the AU, the EW must answer "Y" to Disabled for that individual on AEDEM4 and complete an AEIDIS screen for that individual. For the individual who will provide the care (caregiver), use Exemption Code V7 – Exempt, Caring For Disabled Household Member, on the ESP/VIEW/FSET (AEGNFS) screen.

A medical professional must complete a Statement of Required Presence of Caregiver form (032-03-0020) to verify the family member's condition, and the need for the individual to be available on a substantially continuous basis. The date the form was completed will be used in conjunction with the anticipated duration of the need for the caregiver's presence to determine when the exemption will end. For example, if the individual provides a form on November 1 which states the medical professional completed the form on October 1 and the expected duration of the need for a caregiver is 60 days, the exemption would be allowed until November 30 (60 days after October 1). If a new form was not provided by November 30, the caregiver would be referred to the Virginia Initiative for Employment not Welfare (VIEW) program.

A new Statement of Required Presence of Caregiver form must be obtained immediately following the anticipated end of the need for the caretaker. If the duration indicated on the form is for more than 12 months, or is identified as permanent, a new form must be obtained every 12 months. Exception: if the disabled individual who requires a caregiver is an SSI or SSDI recipient and the medical professional does not provide a specific duration of less than one year for the anticipated need for a caregiver, the form will be completed annually and the exemption allowed for 1 year.

If the documentation does not result in exemption from VIEW, the documentation must be forwarded to the VIEW worker. If the disabled family member is out of the home for substantial parts of the day, for example to attend school, then this exemption is not appropriate.

H. A parent or caretaker/relative of a child under twelve months of age who personally provides the care for a child. For these individuals, use either Exemption Code V1 (Exempt, Child in the AU Under 12 Months) or Exemption Code V9 (Exempt, Caring for Child Under 12 Months In Household, Not In AU) on the ESP/VIEW/FSET (AEGNFS) screen.

Virginia implemented the federal 12-month lifetime limit on V1 exemptions effective 7/1/2011. Beginning with that date, an individual is eligible for no more than 12 months of V1 exemptions in a lifetime.

In a double caretaker assistance unit in which one parent is incapacitated, the eligibility worker must refer the other caretaker for participation unless he can provide a written doctor's statement indicating that the incapacitated caretaker is unable to care for the child under twelve months.

NOTE: A parent who gives birth to a child subject to the family cap provision (refer to Section 201.12) may be granted a temporary exemption of not more than six weeks after the birth of the child. For these individuals, use V2 - Exempt 6 weeks after birth of family cap child, on the ESP/VIEW/FSET (AEGNFS) screen. This exemption status will also be used for a parent who has reached the 12 month lifetime limit for use of the V1/V9 exemption then gives birth to another child (who is not capped).

In the VIEW Program, a parent whose needs are removed from the grant must participate unless otherwise exempt. Reasons why the parent's needs have been removed from the grant include, but are not limited to, noncooperation with DCSE; disqualification for IPV violation; a drug felony conviction; failure to provide a Social Security number; and failure to establish citizenship, eligible alien status, or legal presence. In addition, a parent whose needs are not included in the grant due to the stepparent deeming requirements, 305.4.F., or due to the sponsored alien deeming requirements, 305.4.D., must participate in VIEW, unless otherwise exempt.

A parent who does not meet TANF categorical requirements (parent is an SSI recipient or parent is an ineligible alien) is not required or eligible to participate in VIEW. For aliens who are in the country illegally, use Exemption Code VU – Exempt, Illegal Alien, on the ESP/VIEW/FSET (AEGNFS) screen. For other individuals who are ineligible because they have not been in the country for five years from date of entry, including individuals who are lawful permanent residents, use code VR on the ESP/VIEW/FSET (AEGNFS) screen. Because these individuals are not part of the TANF AU, they will not be referred to VIEW despite the VR coding.

Unless otherwise exempt, a parent who is a court convicted offender serving a sentence while still living in the home should be referred to VIEW if he is allowed by the court to leave home to work or attend education/training activities.

TANF-UP - In a TANF-UP case, both parents must be referred for participation, unless one meets an exemption; only one parent can be exempt. If both parents meet an exemption criterion, they must decide who will be referred for participation. If the household's situation changes and the recipients wish to change the VIEW participant, they may do so upon request and after advisement from the ESW or EW. Exception: The recipients may not switch VIEW participants in order to avoid termination of the case or in order to avoid or cure a sanction.

When both parents in a TANF-UP case are under the age of 18, they are exempt. Use Exemption Code V3. (See 901.2B)

Volunteers – TANF recipients under the age of 18 cannot volunteer for VIEW. Additionally, recipients of SSI benefits and ineligible aliens cannot be included in the TANF assistance unit and therefore cannot volunteer to participate in VIEW. Ineligible aliens include individuals who are in the country illegally and those who are lawful permanent residents who have been in the country for less than five years.

To the extent that funding is available, agencies may serve TANF recipients who are exempt from VIEW and who choose to volunteer. Applicants can volunteer for VIEW only after the TANF application has been approved. They are eligible for the VIEW enhanced disregards in the month following the month the VIEW APR is signed. (Note: The APR cannot be signed before the initial VIEW assessment except when it must be signed prior to TANF approval as a condition of eligibility).

An individual who is exempt from participation can volunteer for VIEW only if she is able to meet the same participation requirements as a mandatory recipient. Volunteers unable to meet VIEW program requirements will not be enrolled in VIEW. An exempt individual who volunteers for VIEW gives up her exempt status and becomes a mandatory participant subject to the same participation requirements and penalties for non-participation as other mandatory VIEW participants. The EW will update the AEGNFS screen with VV and the date the APR was signed. The VW code will not be used.

If an individual volunteers and does not participate as required in the assigned activity, that individual will be referred for sanction. A sanction will be imposed unless the individual has good cause for not participating. Following the end of the fixed sanction period and compliance, the individual will continue as a mandatory participant. Exception: In the case of an individual with a V1 exemption who fails to comply and is sanctioned, the individual can reclaim her V1 exemption following the end of the fixed sanction period if she no longer wishes to participate in VIEW. Her V1 exemption will end when the child turns one year old or once she has used the balance of the 12-month V1 exemption period. She will then be referred to VIEW as a mandatory participant.

If the TANF case of an exempt client who volunteers for VIEW closes, and the client reapplies, the client's exemption status will be determined as part of the eligibility process. The client will be referred to VIEW if she is no longer exempt. If the client's previous exemption was for a temporary medical condition (V5) or for caring for a disabled household member (V7), she must secure a new medical if she states she is unable to participate in VIEW for either of those reasons. If the client is determined to be exempt at reapplication and again wishes to give up her exemption and participate, she may do so if funding is available.

Note: Non-parent caretakers who meet the financial requirements of Section 304.2 and are included in the assistance unit must participate in VIEW unless otherwise exempt. These individuals are mandatory VIEW participants, not VIEW volunteers. However, these individuals are not subject to sanction for failure to participate as required. Instead, the non-parent caretaker will be removed from the TANF grant and the TANF case will remain open as a child only case. If the case closes and the household reapplies for TANF, the non-parent caretaker who was removed from the TANF grant for failing to participate in VIEW must be referred to VIEW (unless otherwise exempt) if the individual wishes to be included on the TANF grant.

901.3 RESPONSIBILITIES OF THE ELIGIBILITY WORKER - Regarding VIEW, the eligibility worker must:

A. Determine VIEW or exemption status prior to the initial approval, at redetermination when adding an individual to the assistance unit, or when a change in the individual's situation would affect her VIEW status. Such determinations should be documented **on the comment screen for the AEGNFS screen**. Additionally, the appropriate system VIEW status code should be entered on **the** AEGNFS **screen**.

Explain the exemption criteria to all applicants at application and to recipients at redetermination, and explain their obligation to report changes affecting their status. The recipient must provide information and verify all reported changes in exemption status. The eligibility worker must change the exemption status in the month in which the change is verified.

Exempt individuals who lose their exemption status must be referred to VIEW **within three working days after the exemption ends.** Changes that result in VIEW status changing from exempt to non-exempt but which are reported late, do not constitute an overpayment.

Mandatory individuals who become exempt must be advised of the status change and their right to participate in VIEW as volunteers.

B. Provide a copy of the completed "Do You Have a Disability?" form (for the adult applicant or payee who completed the application for TANF) to the ESW for the VIEW record when the adult is referred to or volunteers for VIEW.

C. Explain the requirements of the VIEW Program and the related supportive services to all applicants/recipients at application and redetermination. Information should also cover the transitional child care and transitional transportation benefits available when the TANF case closes. All applicants and recipients, including non-parent caretakers in the assistance unit, who are not mandatory must be offered the opportunity to volunteer for the VIEW Program.

D. Advise all applicants/recipients of the sanctions/penalties that apply for failing/refusing to participate in VIEW, without good cause. The VIEW worker will evaluate good cause.

E. **Provide to persons with an incapacity, information from the Department of Rehabilitation Services (DRS) that explains employment services provided by DRS. The information is available at** www.vadrs.org/downloads/drsflyer.pdf.

F. Review the individual's exempt/non-exempt status when changes are reported and as a part of the TANF eligibility redetermination process, unless the eligibility worker determined the individual to be 60 years old or older, or permanently incapacitated.

G. Enter the date that the APR was signed on AEGNFS then run ED/BC. As of March, 2008 the EW will only have Inquiry access to the 24-month clock.

Note: The ESW will be responsible for starting and maintaining the 24-month clock in ESPAS.

H. Advise applicants/recipients who are exempt from VIEW that they may volunteer to participate in VIEW, unless they are SSI recipients; a parent who is a court convicted offender serving a sentence while still living in the home who is not allowed to leave the home to work or attend education/ training activities; or illegal aliens.

In the case of a recipient who has become employed and wants to volunteer for VIEW in order to receive the VIEW enhanced disregards, the EW will advise the individual to contact the VIEW Worker to schedule the VIEW initial assessment appointment.

I. Advise all volunteers that once they enter VIEW by signing the VIEW **APR they become mandatory participants subject to the same participation requirements and penalties for non-participation as other mandatory VIEW participants.**

J. Make appropriate changes in the computer system which affect the individual's VIEW status. The VIEW worker will be notified via the computer system of these changes. This includes, but is not limited to, the individual's:

1. Being removed from the assistance unit;
2. Obtaining employment;
3. Losing his employment;
4. Changing his exemption status (e.g., changing from exempt to non- exempt and vice versa);
5. Moving from one locality to another; or
6. Having a VIEW sanction lifted when advised by the VIEW worker or when a sanctioned individual becomes exempt after the minimum sanction period has elapsed;

K. Upon notification from the VIEW worker indicating that a non-exempt individual claims to be exempt, verify the exemption claim and notify the VIEW worker of the findings within thirty (30) days. If the eligibility worker is unable to verify an exemption claim, the individual will continue in non-exempt status in VIEW until verification is received.

L. Sanction the TANF case by suspending the grant based on the VIEW worker's recommendation. The EW will send the ANPA (032-03-0018) within three working days of receipt of the notification from the VIEW worker.

M. Upon notification by the VIEW worker that, prior to the scheduled date of the initial VIEW assessment date, the recipient has made a request that the TANF case to be closed, the EW will close the TANF case per the recipient’s request. The EW will send the ANPA (032-03-0018) within three working days of receipt of the notification from the VIEW worker.

If the recipient subsequently requests that the TANF case be reopened prior to the effective date of the case closure, she must complete the initial assessment appointment before the TANF case will be reopened.

N. Upon notification from the VIEW worker that the recipient has refused to attend an initial assessment appointment or refused to sign the Agreement of Personal Responsibility without good cause, close the TANF case. Enter a VB on the AEGNFS Screen. (The client will be required to sign the Agreement of Personal Responsibility as a condition of eligibility if she reapplies for assistance.) The EW will send the ANPA **(032-03-0018)** within three working days of receipt of the notification from the VIEW worker.

O. Obtain verification and impact the assistance payment when a recipient obtains employment.

P. Send the Advance Notice of Proposed Action to the recipient at least sixty days prior to the case termination effective date when the 24-months time limit is to expire.

Q. Upon notification from the VIEW worker indicating that the VIEW participant is being placed in a Full Employment Program (FEP) placement, suspend the TANF payment per 901.14. The eligibility worker must conduct a prospective determination of eligibility in the last month of the FEP placement.

R. When closing a TANF case with a VIEW participant, determine VTP eligibility. Inform the ESW when a VTP is started or terminated in ADAPT.

S. Close the VTP case when the client is no longer eligible.

T. Transfer the VTP case when a client moves to another locality in Virginia.
Note: It is the responsibility of the receiving agency to determine if the client continues to meet all of the VTP eligibility requirements.

Note: For a complete list of alerts received by the VIEW worker when the EW completes an action in ADAPT, please refer to Chapter L of the ESPAS manual http://spark.dss.virginia.gov/support/adapt/espas.cgi.

901.4 RESPONSIBILITIES OF THE VIEW WORKER - The VIEW worker must:

A. Send a Communication form, within three working days**,** to advise the EW when a recipient requests the closure of the TANF case prior to the scheduled date of the initial VIEW assessment.

Note: If the recipient subsequently requests that the TANF case be reopened prior to the effective date of the case closure, she must complete the initial assessment appointment before the TANF case will be reopened. The VIEW worker will make every effort to schedule this appointment prior to the effective date of the TANF case closure. Additionally, the recipient will be advised that if she fails to attend the appointment, the TANF case will be closed based on her original request.

B Have the recipient sign the VIEW Agreement of Personal Responsibility as part of the initial assessment interview.

Note: Explain Intentional Program Violation (IPV) reporting requirements and penalties to the participant. See Section 102.*

Obtain a copy of the "Do You Have a Disability?" form from the EW. If the EW failed to have the client complete the form, the ESW will complete the form with a client and give a copy to the EW for the TANF record.

C. Enter the date that the recipient signs the VIEW Agreement of Personal Responsibility as the assessment date in ESPAS. By transmitting from the EECLOC screen, the ESW will start the participation counter in ESPAS that will track the 24-months of TANF eligibility. The ESW will maintain the 24 month clock in ESPAS.

D. Advise the eligibility worker, within three working days, when a non-exempt recipient refuses to sign the VIEW Agreement of Personal Responsibility.

E. Determine in which component(s) an individual must participate and whether he complies.

F. Report to the eligibility worker, within three working days, any changes which financially impact the recipient, which have occurred in the VIEW activities of the TANF or TANF-UP recipient such as securing of employment or entering the Full Employment Program.

G. Advise the eligibility worker that a case is to be sanctioned and the appropriate sanction period.The EW will send the ANPA **(032-03-0018)** within three working days of receipt of the notification from the ESW.

H. The VIEW worker will advise the eligibility worker of the date the individual began to comply. However, the sanction will not be removed until the sanction time frame elapses. If participation begins after the fixed period, the grant will be prorated for the month in which he begins to participate.

* 2002 Acts of Assembly, Item 362

I. Notify the eligibility worker of changes associated with FEP participation that require action.Changes may include initiation of a FEP stipend, issuance of a supplemental payment to the participant, issuance of a replacement check to the employer, or evaluation of continuing eligibility upon termination of the placement. Notification is sent using the FEP Communication Form (032-03-655). The form is available online and may be sent by email. The online version can be accessed on the intranet at http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi.

J. Inform VIEW participants that they have a right to request screening at any time if the individual suspects that he or she may be having difficulty at an assigned activity as the result of a disability, and if the screening indicates that the individual is likely to have such a problem, he or she has the right to be referred for an assessment by a qualified professional to determine whether the individual does have such a problem.

K. Inform VIEW participants that screening and assessment to identify disabilities and other barriers to program participation are voluntary. Ensure that a copy of the "Do You Have a Disability?"form is in the VIEW record.

L. Inform VIEW participants that they have a right to meet with the VIEW worker to discuss the need to revise the Activity and Service Plan to reflect disabilities, or those of household members that affect the ability to engage in work activities or require accommodations.

M. Inform VIEW participants that they have a right to an Activity and Service Plan that includes the supports, services and any needed accommodations that will be provided to the individual that will enable the individual to participate in work activities or other program requirements.

N. Complete job follow-up for VTP and inform the EW when the participant is no longer eligible for the VTP.

O. Federal regulations require that protective services be made available to any child on whose behalf TANF is being requested or received when it appears that the child is being neglected, abused, or exploited or is in a situation which is otherwise detrimental to his welfare. If the VIEW worker has reason to believe that a child, on whose behalf TANF is being applied for, or received, is in an unsuitable environment because of known or suspected instances of physical or emotional injury, it is the responsibility of the VIEW worker to make a referral to the services staff for protective services.

Known or suspected instances of physical or emotional injuries include instances of sexual abuse or exploitation, and negligence and/or maltreatment of such child under circumstances which indicate that the child's health or welfare is threatened.*

Note: For a complete list of alerts received by the EW when a VIEW worker completes an action in ESPAS, please refer to Chapter L of the ESPAS manual http://spark.dss.virginia.gov/support/adapt/espas.cgi.

901.5 PARTICIPATION AND COOPERATION REQUIREMENTS

A. Agreement of Personal Responsibility - As a condition of eligibility, all non-exempt individuals must sign a written APR. **(Because applicants for DA are not required to meet all conditions of eligibility, including participation in VIEW, they are exempt from signing the VIEW APR).** Except in the circumstance outlined in D below, an individual who signs an APR is a VIEW participant at the point the APR has been signed and will be considered to be participating in VIEW unless notice is received from the VIEW worker that he has failed or refused to participate. If an individual fails/refuses to participate/cooperate without good cause, the case is not eligible to receive a grant.

The APR will, at a minimum, explain the 24- month time limit and the following participant responsibilities:

1. To seek employment to support his own family.

2. To participate in assignments made by the case manager.

3. To notify the case manager of any change in the participant's circumstances which will impact the participant's ability to satisfactorily participate in the program.

4. To accept a job offer. Refusal to accept a job offer may result in a sanction if so determined by the VIEW worker.

5. To arrange and find transportation and day care. The case manager will assist the participant if he has tried, but has been unable to find transportation or day care.

B. When an APR Must Be Signed:

1. At the initial VIEW assessment and upon re-referral following a reapplication or a period in which the individual was exempt.

2. When a TANF case was closed while a sanction was still in effect and the sanctioned individual later reapplies for TANF, a new APR must be signed at the time the individual returns to the VIEW program. (The individual will return to the VIEW program only after the sanction has been lifted because the minimum fixed sanction period has been served *and* the individual has completed an act of compliance.)

3. At the time of application if the client reapplies for assistance after the case was previously terminated for failure to sign the APR.

C. Refusal to Sign the Agreement of Personal Responsibility (APR) - If the VIEW Worker advises the EW that a mandatory individual has refused to sign the APR the TANF case must be closed as soon as administratively possible. **Prior to closing the TANF case in ADAPT, the EW will change the "VR" referral code to a "VB" on the AEGNFS screen**. **(Note: If the individual who failed to sign the APR is a non-parent caretaker, the EW will remove that individual's needs from the TANF grant and the case will remain open as a child only case. The individual cannot be included in the grant until an APR has been signed or the individual has become exempt.)** Refusal to sign the APR means overt refusal to sign or failing to appear without good cause for an initial assessment interview in which the APR was to be signed. The VIEW Worker will notify the EW that the client did not appear for the initial assessment interview by sending a communication form requesting the EW to send the Advance Notice of Proposed Action to the client.

D Subsequent Reapplication after Refusal to Sign the Agreement of Personal Responsibility (APR) - Upon a subsequent re-application for TANF, the applicant(s) determined to be VIEW mandatory must sign the APR before a final determination of eligibility and the issuance of benefits, if appropriate**. However,** the signing of the APR is not a condition of eligibility for TANF if the case has been closed **for** 24 months **or more**.

Either the EW or ESW may obtain the applicant's signature on the APR. This is the only instance in which the EW may obtain the signed APR **and the only instance when an APR is to be signed prior to approval of the TANF application**.

If the APR has not been signed within the application processing time frame (refer to Section 401.1.E), the TANF application must be denied.

- **No Countable Earnings**
  If the APR is signed within the application processing time frame and the household has no countable earnings, the EW should change the "VB" to a "VV" on the AEGNFS screen and enter the date the APR was signed then approve the case using a "GV" on the AEAUTA screen. The EW will keep a copy of the APR in the TANF record and will send the original to the ESW so the individual can be enrolled in VIEW.

- **Countable Earnings**
  If the APR is signed within the application processing time frame and the household has countable earnings, those earnings **will** be screened in accordance with guidance in Section 305. **The APR date should not be entered in ADAPT at this time - as the applicant is required to be eligible for TANF before the VIEW grant calculation should be applied (typically, the VIEW grant calculation would be applicable the month following the month the APR was signed).**

  - **If the applicant is eligible for TANF without the VIEW enhanced disregards, the application should be approved. The EW will then enter either a "VR" or "VA" on the AEGNFS screen. If a "VR"**

is entered, the case will be approved with a "GR". (The EW will then go back to the AEGNFS screen and enter the "VV" and the date the APR was signed. After running ED/BC, the EW will enter a "GV" on the AEAUTA screen.) If a "VA" is entered, the EW will enter the previous APR date and enter a "GV" on the AEAUTA screen. (The EW will then go back to the AEGNFS screen to enter the new APR date.) The EW will keep a copy of the APR in the TANF record and will send the original to the ESW so the individual can be enrolled in VIEW.

- **If the applicant is not eligible because the countable earnings exceed the countable income limit, the application will be denied. The EW should still have the applicant sign an APR as part of the application process. However, the EW will not enter the date the APR was signed on the AEGNFS screen in ADAPT. The signed APR will be filed in the TANF case record and the case thoroughly documented so the individual will not have to sign another APR as a condition of eligibility at a subsequent application. Additionally, a Communication Form will be sent to the ESW to notify him/her that the individual has signed an APR but the TANF application was denied.**

  If the individual reapplies, the EW will enter a "VR" on AEGNFS if the individual has not participated in VIEW in the past 24 months. If the individual had participated in the VIEW program in the past 24-months, the EW will enter a "VA" and the date of the APR that was signed when the applicant last participated in the VIEW program (not the date of the APR that was only signed as a condition of eligibility) on the AEGNFS screen.

901.6 SANCTIONS - Participants who fail to participate in the VIEW Program will be sanctioned.

A. The sanction will be imposed by suspending the TANF payment for the period of time specified at 901.6F.

B. For needy non-parent caretakers, the caretaker is to be removed from the grant, rather than suspending the payment. The caretaker may not be added back to the TANF grant during the current period of TANF assistance. If the caretaker files a new TANF application, and will be included on the TANF grant, she will be referred to VIEW unless otherwise exempt.

C. The ESW must advise the EW of the decision to sanction and the sanction count.

D. The EW is to sanction the participant unless otherwise advised by the VIEW worker. **If the participant requests that the TANF case be closed following the referral of the case for sanctioning, the EW will enter the sanction in ADAPT prior to closing the case.**

1. If the EW is aware that the participant might have been exempt during the required participation period, or was unable to participate for reasons of disability or language barrier, the EW must advise the ESW.

   The ESW is responsible for making the final decision as to whether to proceed with the sanction. If the ESW determines that the participant was exempt, or was unable to participate for reasons of disability or language barrier, the ESW will advise the eligibility worker to not impose the sanction.

   Exception: The EW will not impose the first sanction when the client obtains and provides verification of full-time employment (at least 30 hours per week) prior to the effective date of the proposed sanction. The EW will delete the sanction information from ADAPT and inform the ESW of the employment and that the 1st sanction was not imposed. Employment prior to the imposition of a 2nd or 3rd sanction will not impact the proposed sanction; the eligibility worker will impose 2nd and 3rd sanctions regardless of client employment status.

2. When a participant becomes exempt during a sanction period and the verified exemption still exists at the end of the minimum fixed sanction period, the EW may remove the sanction.

   If the EW is notified by the ESW that the sanction was imposed in error or that the client's failure to participate was due to disability or language barrier, the sanction must be lifted immediately by the ESW and deleted from the automated system by the EW.The sanction will not be included in the client's overall sanction count.

3. When a sanctioned individual becomes disabled or becomes required to care for a disabled family member living in the household during the 24-month POI, and such disability or situation prevents the individual from being self-supporting, the individual must serve the fixed sanction period before the individual can be eligible for TANF due to his/her disability, or need to care for the disabled family member, during the 24-month POI.

   Example: A VIEW sanction was imposed effective July 1, 2008 for six months. The client's 24th month of assistance is September 2008. The 24-month POI begins October 1, 2008. The client becomes disabled (unable to work) and applies for TANF on October 13, 2008. She still has to serve the remaining two months of the fixed sanction period (in this example, six months) before she can be eligible for TANF due to disability. The earliest date that she can be eligible for TANF due to disability is January 1, 2009.

E. The EW must apply the sanction effective the month following the month in which they receive notice to sanction, if administratively possible. If this cannot be done, the action must be taken for the second month. The EW must mail the Advance Notice of Proposed Action as soon as possible after receipt of the Notice to Sanction. The advance notice must indicate the duration of the sanction.

   Exception: In the case of a TANF-UP household, when one parent is participating in a FEP placement and the VIEW sanction is the result of non-compliance by the other parent, the ESW will advise the EW to delay imposition of the sanction until the month following the end of the FEP placement. This will allow the FEP placement to continue and not be disrupted by the closure of the TANF-UP case due to the sanction

F. The sanction time frames are as follows:

1. For the first sanction, the grant will be suspended for a minimum period of one month and will continue to be suspended until the client complies.

2. For the second sanction, the grant will be suspended for a minimum period of three consecutive months and will continue to be suspended until the client complies

3. For the third and subsequent sanctions, the grant will be suspended for a minimum period of six consecutive months and will continue to be suspended until the client complies.

   In determining the length of time that the sanction will be imposed, if the VIEW worker determines that a previous sanction was due to an

unaccommodated disability which prevented compliance, the current sanction should be imposed as if the previous sanction had not occurred. For example, if this would have been the second sanction but the ESW determines that non-compliance with program requirements that resulted in the first sanction was the result of a disability, the second sanction will be treated as if it is the first sanction and the penalty for a first sanction will be applied.

G. While a grant is suspended for a sanction period, the assistance unit members are considered TANF recipients for all other purposes. The time clock for VIEW participants continues during the sanction.

H. The ESW will advise the eligibility worker of the effective date of compliance. If the date of compliance is during the fixed sanction period, the sanction will be lifted effective the first day of the month following the end of the fixed period. (Note: If the case is approved in a sanction, and the payment suspended, each of the month(s) of suspended payment, including a partial month, will count toward the fixed sanction period.) If the date of compliance is after the fixed period has ended, the sanction will be lifted as of that date and the grant for that month will be prorated.

I. When the sanctioned individual becomes exempt after the minimum sanction period has elapsed, the sanction will be lifted effective with the date the exemption was verified.

An underpayment will not exist when an exemption change which should result in an increased benefit amount is reported or verified late.

Exception: If the ESW verifies that the non-compliance with program requirements that resulted in the sanction was the direct result of a disability, the need to care for a household member with a disability, or limited English proficiency, the ESW will notify the EW, who will immediately lift the sanction, reinstate benefits, and enter the exemption information into the computer system.

J. Sanctions when a client reapplies following case closure:

If the sanction is in the fixed period when the case closes, the sanction resumes at approval at the point it left off when the case closed.

Example - **A second VIEW sanction was imposed effective 1/1. Client requested that her TANF case be closed effective 1/31. Client reapplied for TANF on 6/15. The application is approved on 7/12 with payments suspended for June and July since the minimum sanction period has not been served. June (though a partial month) and July will count as the second and third months of the three-month sanction period.** Once the fixed period has ended and the client has complied with program requirements, the ESW will schedule the client for reassessment at which time a new APR will be signed.

1. If the fixed sanction period passed **while the client was on assistance, but she did not cure the sanction, the TANF case will be approved in a suspended status if she applies for assistance again.**

The eligibility worker will not issue a payment until notified by the ESW that the client has complied.

EXAMPLE: The client failed to complete her job search assignment and was sanctioned for one month beginning 4/1. She notified the worker on 4/12 that she had moved and was now living out of state. Her case was closed effective 4/30. On 8/15, the client reapplied for assistance. Because the sanction was still in place, she was instructed to contact the VIEW worker in order to cure the sanction. She agreed to complete a job search assignment, but because she did not do so by the end of the 30-day processing timeframe, her application was approved in a suspended status (case approved for the first month in ADAPT; those benefits immediately deleted so they will not be issued; then, case suspended for future months). The client successfully completed the job search assignment on 10/27 thereby curing the sanction. The VIEW worker notified the EW of the client's compliance on that date, the suspension was lifted and the client's benefits began 10/27, the date she completed the activity.

In both sanction situations, the time clock for the twenty-four month time limit, which includes months in which partial payments were made, resumes at reapproval. The client is still allowed the VIEW disregards when employed and in a sanction.

K. Sanctions when a client moves to another case: When a sanctioned individual moves from one case to another, the sanction continues uninterrupted. The sanction always follows the adult VIEW participant; it does not follow the children or the case.

L. When a sanctioned VIEW participant leaves the household in a sanctioned month, the grant for the remaining household members will be reinstated for the following month. The agency must verify the date on which the sanctioned individual left the home.

EXAMPLE: Household consists of mom, father, and three children. The father of the children was sanctioned effective 7/ 1 for non-compliance with VIEW. The payment to the family is suspended as a result of sanction. The father leaves the household 7/ 8 and this is verified by the landlord. The month of July remains a sanctioned month. The grant is reinstated effective 8/ 1 as long as the father has not returned to the home.

M. VIEW Appeal Procedures: The following procedures must be followed at all appeals involving VIEW Sanctions:

1. A representative from the Employment Services Program Service Staff (VIEW) must be present during the appeal hearing.

2. The hearing officer will notify Employment Services Staff of the date and time of the appeal hearing.

3. The summary of facts must be prepared jointly by the Eligibility Staff and Employment Services Staff to ensure that both ESP eligibility and participation issues are stated in the summary.

4. If the appeal is filed timely and benefits continue pending the hearing decision, the sanction must be imposed as soon as administratively possible when the decision sustains agency action. There is no overpayment in this situation.

901.7 VIEW PAYMENT CALCULATION - To reward work, a VIEW participant may earn up to the assistance unit's federal poverty level (or up to 150% of the federal poverty in the case of TANF-UP households) and remain eligible for TANF for up to twenty-four months from the date that the initial Agreement of Personal Responsibility is signed.

A. The VIEW payment calculation applies to the following:

1. Unsubsidized employment and,

2. On the job training or subsidized training listed in Chapter 1000, Section 7.C.4.

B. This calculation does not apply to the following:

1. FEP Program in Chapter 1000, Section 7.C.2, and

2. Hardship cases (Section 901.9).

The VIEW payment calculation differs from the grant calculation located in Appendix 3 to 305.

An individual who is working when they sign the Agreement of Personal Responsibility is entitled to the VIEW earned income calculation the month following the month in which they sign the Agreement. If it is not administratively possible to impact that payment, a supplement must be issued.

For those VIEW participants who obtain unsubsidized employment during VIEW participation, the VIEW earned income calculation is to be used for grants effective the month following the month when employment begins. If it is not administratively possible to impact that payment, a supplement must be issued.

VIEW participants do not have earned income screened at 185% and the standard of assistance. They may receive the standard deduction from gross income and 20% of the remainder,* and child or adult care costs as disregards.

To calculate the VIEW payment (TANF grant), the eligibility worker must follow the steps in Appendix 1 to this chapter.

See Chapter 900, Appendix 1 for the VIEW Grant Calculation, Appendix 2 for VIEW Income Examples, and Appendix 3 for the Federal Poverty Level table.

A TANF recipient who enters the VIEW program erroneously, i.e., the recipient did not report earnings that he received or expected to receive prior to entering VIEW that would have made the case ineligible for assistance using the 185% and standard of assistance income screenings, must have continuing eligibility determined by using 185% and standard of assistance screenings (see Section 305.1.A.) If the case does not pass the 185% and standard of assistance screenings, the case must be closed as soon as administratively possible. If the case is eligible at the standard of assistance screening, the VIEW grant calculation is appropriate for the month following the month in which the earnings were reported to the agency. Overpayments should be calculated per 503.7.

Note: For a case that contains an individual who is a VIEW participant, the VIEW grant calculation applies to the total countable earnings of all required assistance unit members.

*22 VAC 40-295-60

901.8 VEHICLE VALUE LIMIT – Repealed effective December 1, 2003.

901.9 TWENTY-FOUR MONTH LIMIT FOR TANF ELIGIBILITY - An assistance unit participating in the VIEW Program is limited to twenty-four months of TANF eligibility. The twenty-four months of eligibility is an accumulated period of time, which includes any month that an individual was a mandatory participant on the first day of the month.

A month in which the TANF grant is suspended is counted as a month of participation. When a mandatory VIEW participant becomes exempt, the case is placed in inactive status, or the TANF case closes, the 24-month count stops. If a TANF case closes with months remaining in the 24-month period, the count will resume at the point it stopped, when a new TANF application has been approved and a new Agreement of Personal Responsibility has been signed.

An assistance unit (AU) that had time left on the clock when the TANF case closed begins a new twenty-four month period if the AU did not receive TANF for at least twenty-four months after case closure. (Note: This does not apply to cases that were not closed but were in a suspended status. For TANF purposes, a suspended TANF case is considered to be an open TANF case even though no benefits are issued for the month of suspension. Therefore, if the reason the AU did not receive TANF for a particular month was due to suspension instead of closure, that month will not be included in the count of months in which the AU did not receive TANF.) Sanctions will not carry over into a new twenty-four month period.

Hardship Exception to the Twenty-Four Month Time Limit:
The VIEW worker may grant a hardship exception according to the hardship criteria found in Section 1000.24. The VIEW worker must notify the eligibility worker when the hardship exception is to end, allowing time for the ten-day Advance Notice of Proposed Action to be mailed by the eligibility worker to the participant. The eligibility worker must close the TANF case. A hardship exception is an extension of the time limit and cannot be granted during the period of ineligibility (see 901.11).

A TANF case that is granted a hardship extension is not eligible for the VIEW grant calculation. (See 901.7.)

24-Month Time Limit Rules for Two-Parent Cases:
Prior to March, 2008, the 24-month clock advanced simultaneously for both parents even if only one parent participated in VIEW. Effective March 1, 2008, the 24 month clock will advance based on actual months of VIEW participation for each parent.

1. Each parent will have his own VIEW clock. The months on the clock will advance only when the parent participates in VIEW, or is in a VIEW sanction.

   When a VIEW participant leaves the assistance unit for any reason, the time on his clock stays on his individual clock. If the other parent did not participate in VIEW, she does not have a 24-month clock.If she has participated in VIEW, her VIEW months will stay with her.

   Note: When either parent reaches 24 months on the VIEW clock, the TANF case will close. All family members in the household at the time of the TANF case closure will be subject to a VIEW period of ineligibility.

Example 1: Mr. and Mrs. X and their children receive TANF-UP. Mr. X enrolled in VIEW in December, and his VIEW clock started in January. He has 6 months on his clock. In June, Mr. X moved out along with one child, and applied for TANF for himself and the child. The months on the VIEW clock for Mrs. X are 0 because she did not participate in VIEW.

2. When one parent leaves, the children are subject to the time limit and period of ineligibility of the parent with which they reside.

3. When a caretaker who has never participated in VIEW is added to a case with a person who has a VIEW clock he is not subject to a clock until he participates in VIEW.

   Example 1: Mr. Y and his six month old child move into the home with Mrs. Y. Mr. Y is the father of Mrs. Y's child, so this will be a TANF-UP case. Mr. Y has never received TANF. He does not have a VIEW clock and is exempt from VIEW because he is the caretaker for his six month old child.Mrs. Y has a clock count 10 months. Mr. Y will not have a VIEW clock until he begins to participate.

4. When a caretaker who has participated in VIEW (has a VIEW clock) is added to a case where the other caretaker has also participated in VIEW (has a VIEW clock) each caretaker will retain his/her individual VIEW clock.

   Example 1: Both Mr. and Mrs. Y have received TANF and participated in VIEW for the past 6 months. Mr. Y leaves the household and moves in with Ms. A, who is a VIEW participant with a VIEW clock of 3 months. Mr. Y will have a clock count of 6 months and Ms. A will have a clock count of 3 months.

5. When a caretaker who participated in VIEW is added to a case with a non-VIEW participant, he will keep the months on his clock. The non-VIEW participant will not have a clock until she begins to participate in VIEW.

   Example 1: Mr. and Mrs. Y receive TANF and each has 6 months on their VIEW clock. Mr. Y leaves the household and moves in with Ms. A and their three month old child. Ms. A is exempt from VIEW as the caretaker for the three month old child and does not have a VIEW clock. Mr. Y will have a clock count of 6 months and Ms. A will not have a VIEW clock until she begins to participate.

901.10 NOTICE AND APPEAL OF THE TIME LIMIT* - ADAPT will generate an Advance Notice of Proposed Action **to the agency printer** at the beginning of the twenty-second month of VIEW participation. The notice, **along with the leaflet, Appeals and Fair Hearings (form #032-01-0901-22), must be mailed by the agency (**or **made** available at the local agency in the case of an assistance unit which is homeless) at least sixty (60) days before the effective date of the action. **The sixty day time period excludes** the date of mailing and the effective date **of TANF case termination** due to the twenty-four month time limit. The notice **will** also inform the participant of the circumstances which constitute a hardship exception and how **application is made**. In addition, the ESW must make a good faith effort to inform the person verbally.

If a case is not in approved status in the system on the first of the month of month twenty-two, the eligibility worker must send a manual Advance Notice of Proposed Action. This notice must inform the recipient that financial assistance is scheduled to terminate due to the twenty- four month time limit and that they and their family will be ineligible for financial assistance for at least twenty-four months after termination of TANF. Information regarding circumstances which constitute a hardship and how to apply for one must also be provided.

If an applicant is reapplying for TANF, and has already received a 60-day notice, the agency must note the number of remaining VIEW months on the Notice of Action to approve the case.

In the event the notice is not issued in a timely manner, the agency must not close the case due to the 24-month time limit until the full 60-day advance notice period has expired. Any benefits received after the 24th month are an overpayment and must be recovered.

If a hearing is requested prior to the effective date of the proposed change to terminate benefits due to the 24-month time limit, a participant appealing such change shall have the right to continued direct payment of TANF benefits pending final administrative action on such appeal.

Termination of financial assistance due to expiration of the time limit is the only circumstance which requires a 60-day notice.For any other action, adhere to policy found at manual sections 401.1 - 401.6 regarding notification.

* Code of Virginia, §63.2-612

901.11 PERIOD OF INELIGIBILITY

A. A VIEW participant, and all other adults and children in the assistance unit at the time of TANF case closure due to receipt of twenty-four months of assistance, is ineligible for TANF (including Diversionary Assistance) for a period of twenty-four months. The period of ineligibility (POI) begins with the effective date of TANF case closure. Individuals subject to the twenty- four month VIEW period of ineligibility include:

1. A parent who is a VIEW participant;

2. A non-parent caretaker who is a VIEW participant. (Note: In no circumstance can the non-parent caretaker be removed from the assistance unit after the 60-day ANPA has been sent in order to create a child-only case for the purpose of avoiding imposition of the period of ineligibility);

3. Any other adult who is part of the VIEW participant's assistance unit, including a second caretaker or a person considered essential to well-being (EWB);

4. An individual whose needs are not included on the grant due to a penalty but who otherwise is a required member of the assistance unit;

5. All children in the assistance unit. (See 305.4A(36) for treatment of income of a child who is ineligible for assistance as the result of a VIEW POI);

6. All natural or adoptive children of the participant who move into the participant's home during the period of ineligibility, even if the child did not receive TANF with the participant during VIEW participation or received assistance only for part of the time. **The same child will no longer be subject to the POI if he/she subsequently leaves the participant's home;**

7. A baby who is born to the participant or to a minor caretaker who is part of the assistance unit during the period of ineligibility. (Note: See Exception (2) at 901.11A for child of a minor parent who applies in her own right after becoming 18); and,

8. A child subject to the family cap provision.

The 24-month period of ineligibility status remains with any participating family member who moves out of the caretaker's home during the period of ineligibility unless the individual meets one of the exceptions outlined in 901.11B.

The eligibility worker must inform the individual who applies for TANF for such children when the period of ineligibility expires.

Example #1: Ms. Smith's TANF case was closed effective January 1998, due to expiration of the period of eligibility while she was participating in the VIEW Program. Her son, Joe, who was an assistance unit member while Ms. Smith participated in the VIEW Program, moved to his grandparent's home in June 1998.

In that same month, Joe's grandmother filed an application for TANF, for herself and Joe. The application for TANF is denied due to the fact that Joe was an

assistance unit member during Ms. Smith's VIEW participation in which the period of eligibility had expired. Joe will remain ineligible for receipt of TANF until the entire 24-month period of ineligibility has expired.

Example #2: Ms. Smith, who is a TANF recipient with her sons Josh and Joe, began participating in the VIEW Program in March 1996. Josh moved out of Ms. Smith's home in June 1996 to move in with his aunt. The aunt applied for TANF, on Josh's behalf, in June 1996. The aunt's TANF application for Josh may be approved, if Josh is otherwise eligible, because Ms. Smith's TANF case was not in a period of ineligibility when Josh left.

B. EXCEPTIONS: (1) If the caretaker dies during the period of ineligibility, the children may receive TANF with another relative, if otherwise eligible. (2) A minor parent or child who turns 18 during the period of ineligibility may apply and receive TANF in her own right for herself and her child(ren), if otherwise eligible. (3) If it is determined that the caretaker (both caretakers in a two-parent TANF household) became totally disabled during the period of ineligibility or became required to care for a disabled family member living in the household, and such a disability or situation prevents the individual from being self supporting, the caretaker and children in the family may receive TANF benefits without regard to the period of ineligibility. The worker must assist the parent in pursuing other benefits, as appropriate. (4) If a child is removed from the home of a parent as a result of a child protective services report or complaint during the period of ineligibility and is placed in the home of a relative, the relative may be eligible to receive assistance if otherwise eligible.

A Medical Evaluation (032-03-0654) completed by a medical professional will be used to verify the disability of the caretaker. (The client's disability will be considered total if the medical indicates that she cannot work **20** hours a week or more). The disability must be re-evaluated based on new verification at the end of the anticipated duration as noted on the medical statement or every 90 days whichever occurs first. If the medical form is incomplete, the eligibility worker must contact the medical professional to obtain the missing information before acting on the medical.

When the caretaker is needed on a substantially continuous basis to care for a family member who is living in the household (the family member does not have to be included on the TANF grant), the family member must have a verified physical or mental disability and must have caretaking needs that prevent the caregiver from being self supporting. These caretaking needs include the need for attendance, supervision, and home care, and other needs related to the family member's disability. A medical professional must complete a Statement of Required Presence of Caregiver form (032-03-0020) to verify the family member's condition, and the need for the caregiver to be available on a substantially continuous basis. If the disabled family member is out of the home for substantial portions of the day, the caretaker will not be considered to be needed on a substantially continuous basis, and the TANF benefits will not be extended beyond the 24th month.

When the disabled caretaker is eligible to receive Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI), on-going verification of the disability will not be required. When the disabled family member who requires a caregiver is eligible to receive SSI or SSDI, additional verification of the need for a caregiver for the disabled family member will

be required annually. In addition, when the medical professional has indicated a specific duration that the caregiver will be needed, the eligibility worker will request verification of the need for the caregiver at the end of the anticipated duration as noted on the Statement of Required Presence of Caregiver form.

The TANF case is to be closed as soon as administratively possible upon verifying that the caretaker is able to work or is no longer needed to care for a disabled family member living in the home. Once the TANF case is closed, the 24-month POI will resume.

Example: Mrs. Waters began her 24-month POI on August 1, 2008. On October 15, 2008 she applied for TANF. On the date of application, she provided a medical form verifying she was expected to be disabled from September 20, 2008 to June 30, 2009. She is approved for TANF beginning October 15. Since any month the client receives TANF is not counted toward the 24-month POI, October will not be a POI month.

Mrs. Waters furnished additional medical forms every 90 days as required to verify her continued disability. A medical form was submitted on June 15, 2009 which indicated she was no longer disabled. The worker closed the case effective June 30, 2009. Mrs. Waters had 22 months (24 months minus the two POI months she completed – August and September) remaining in her 24-month POI. The POI resumed July 1, 2009. Mrs. Waters' ADAPT case was updated to reflect the new POI period and AESANC screens were entered for all AU members for July 1, 2009 to April 30, 2011.

901.12 TRANSFERS - Active VIEW cases transferred to another agency should be treated as follows:

A. All attempts should be made to transfer the benefit and VIEW record together within 5 working days of notification.

B. When a VIEW case with no earned income and not in a sanction transfers to another agency, the VIEW time clock stops until such time as the VIEW worker in the receiving agency completes an assessment and re-starts the clock. The receiving agency is responsible for adjusting the clock after the assessment. The 60-month clock continues to advance for each month TANF is received.

C. When a VIEW case with earnings transfers to another agency, the VIEW clock continues. In the case of a UP household in which one participant is employed, there will be no break in the months on the individual's clock. When the new agency opens the client's ESPAS enrollment, the ESW should make sure the appropriate months are reflected on the 24-month clock. The clock for the other participant will stop unless she was in a sanction at the time of the transfer. Her clock will resume in the month after the ESW completes an assessment and updates her APR.

Example: Mr. and Mrs. Waters' case is transferred from locality A to locality B on May 26. Mr. Waters is employed when the case transfers. Locality B will restart his clock beginning with the month of June. Mrs. Waters is participating in VIEW but is not employed and not sanctioned. Locality B will restart her clock the month after an assessment is completed and the APR is updated.

D. A sanction period continues when a sanctioned VIEW case transfers to another agency.

901.13 Transitional Benefits - A VIEW participant may be eligible for transitional services for up to 12-months beginning with the month following TANF case closure. VIEW transitional services are child care, medical/dental services, work-related expenses, emergency intervention services, transportation, Transitional Employment and Training Services (TET) and the VIEW Transitional Payment (VTP). The exact period of eligibility will depend on the specific service and the client's employment status. Eligibility criteria for transitional child care paid from Child Care funds are located in the Child Care Guidance Manual. Eligibility for all other transitional services, including transitional child care paid from VIEW funds, is located in Chapter 1000 of this manual.

A. VIEW Transitional Payment (VTP)

The purpose of the transitional payment is to encourage job retention. The amount of the VTP is $50 for each VIEW participant who meets the criteria listed below. The VTP amount is $100 for a two parent household in which both parents meet the VTP criteria. If one parent leaves the home, the payment must be reduced by $50.

Criteria for Receipt of the VTP:

1. The TANF case closes for any reason other than no eligible child in the home (including a child ineligible due to truancy) or because the client cannot be located.

2. The TANF recipient must not be in an IPV penalty period for TANF at the time of the TANF case closure.

3. The TANF recipient is a VIEW participant at time of the TANF case closure. (Note: It is important that the EW confirm that the VIEW worker has opened the ESPAS enrollment before closing the TANF case to establish the VTP. The VIEW worker will not be able to open the VTP in ESPAS once the TANF case has been closed.)

4. The VIEW participant must be employed at least 30 hours per week, and earning at least minimum wage at the time of TANF case closure. (Note: If the client's scheduled hours of employment for a given week fall below 30, a VTP may still be established as long as the average weekly scheduled hours for the month are 30 or more).

5. The VIEW participant must not be referred for a VIEW sanction or be in a VIEW sanction at time of the TANF case closure. Note: In a two parent household, if either parent has been referred for a VIEW sanction or is currently in a VIEW sanction at the time of the TANF case closure, the entire household is ineligible for a VTP.

Additional Considerations in Establishing a VTP:

1. **An** individual is considered a VIEW participant if she **has been assessed**, has a current APR and an open TANF case, even if she does not have a current component assignment. **In most circumstances, a VIEW participant will be assigned to a component activity at the time she becomes eligible for a VTP. In some rare circumstances, this will not be the case but the client will still meet the definition of a VIEW participant and may be determined eligible for a VTP.**

Example: Client is sanctioned, but reports employment after the end of the fixed sanction period, thereby curing the sanction. Prior to any action by the EW, the VIEW worker will open the VIEW enrollment and notify the EW to lift the sanction. If the client's income from employment makes the client ineligible for the next month, the client will still be evaluated and approved for VTP if she meets the VTP eligibility criteria. The VIEW worker will close the VIEW enrollment and open the VTP enrollment in ESPAS. (Note: Individuals who report employment during the fixed sanction period do not meet VTP eligibility criteria.)

2. Prior to establishing a VTP, the EW must verify the client's wages. For previously reported employment, the wage verification cannot be more than 30 days old. If the wage verification is more than 30 days old, the client must provide current verification of employment prior to the effective date of the TANF case closure. For new employment, the client will have 10 days from the date the new employment is reported to verify the employment. This 10 day period may extend beyond the effective date of the TANF case closure. (For example, TANF case is closing effective April 30. Client reports new employment on April 29. The client will have until May 9 to provide verification of the new employment.

3. The client may be eligible for VTP if he/she meets all other VTP eligibility criteria. Client statement may be used for prospective calculations to determine ongoing TANF eligibility but not for the establishment of the VTP. In all instances, a VIEW case must already be open prior to the establishment of a VTP.

   The first of the twelve VTP payment months should be the month established by the ADAPT system following TANF case closure. This will be either the month immediately after the TANF case is closed or the next month.

   Example: The EW enters the TANF case closure on February 14 effective February 28. The EW does not enter the VTP until February 27, after the February 26 cut-off date. The VTP period will then begin April 1, the first month when the action can be implemented. The client will not receive a TANF payment or a VTP payment for March. However, the client will be entitled to a full twelve months of VTP as long as she continues to meet VTP eligibility criteria. The VTP period will run from April 1 through March 31.

4. VTP payments cannot be established retroactively. Once a VTP is established, the TANF closure should not be rescinded in order to manipulate the VTP date.

5. When the client is eligible for a VTP, the EW will contact the VIEW worker to make sure that the ESPAS enrollment is open prior to closing the TANF case. The EW will then enter information in ADAPT to establish the VTP and generate the monthly payment. The EW will print and mail the Notice of Action (NOA) to notify the individual of the VTP approval and reporting requirements.

6. If a client who is approved for, and begins receiving a VTP, appeals the TANF case closure and requests that the TANF grant be reinstated during the appeal, the VTP will be stopped. If the client loses the appeal and the TANF case is closed, the EW will again evaluate eligibility for a VTP following VTP guidelines. If the client is eligible for VTP, the 12 month VTP eligibility period will begin with the month after the second TANF case closure.

7. If the client relocates to another locality in Virginia, the agency will transfer the VTP case. The client will continue receiving VTP as long as VTP eligibility requirements are met. If the client is no longer eligible, a notice must be sent to advise the client of this.

Criteria for Termination of VTP:

1. The client is no longer working at least 30 hours per week.

2. The client's earnings fall below the current federal minimum wage.

3. There are no TANF eligible children in the home. Note: If the only eligible child(ren) in the home at the time the TANF case closed reaches the age of 18 (or has already reached the age of 18 but had remained eligible for TANF because he/she was scheduled to graduate before reaching age 19 and he/she has now graduated) during the VTP period, the caretaker's eligibility for VTP will not be affected.

4. The client files a TANF reapplication.

Additional Considerations in Terminating a VTP:

1. If the VTP closes for any of reasons listed above, or if the VTP is closed automatically by ADAPT at the end of the 12-month period, **no notice is** required prior to case closure. If the VTP closes per client request, a notice is required.

2. When employment ends, hours fall below 30 per week, wages decrease to below the current federal minimum wage, or the only eligible child leaves the home, the VTP must be closed and cannot be re-established. The VTP must be terminated if there is a job change causing a break in employment which results in the average hours for the month falling below 30 per week.

3. The VTP must also be ended if the employment is with an educational or training institution and the job ends because the employer closes for summer break (lasting more than thirty days).

   Official closures by educational or training institution employers for quarter or semester breaks (lasting less than thirty days) during which the client cannot work will not impact the VTP payment.

   Instructions on how to establish, reinstate, reissue, close and cancel a VTP is located in the ADAPT Training Materials located at http://spark.dss.virginia.gov/support/adapt/training.cgi.

901.14 Full Employment Program - The Full Employment Program (FEP) is a subsidized, training-oriented employment activity for VIEW participants who have been unable to find a job on their own. FEP uses government funds to directly subsidize wages paid by the employer. Wages are paid through the regular employee payroll based upon hours worked in lieu of TANF benefits. A monthly stipend is issued to the employer for the duration of the FEP placement.

The FEP placement and stipend periods are a fixed six-month period unless the case will reach either the 24-month or 60-month limit on the receipt of TANF. Under those conditions, a shorter placement (of at least three months) can be established so that the placement end will coincide with the end of the receipt of TANF benefits. The placement begins the month FEP employment begins and ends on the last day of the final month of the placement, e.g., placement begins June 10 and continues through November 30, and the corresponding stipend period begins on July 1 and ends on December 1. The begin date of placement cannot be a date within the last 11 days of the placement month due to notification requirements for TANF recipients (as the TANF payment is suspended during the FEP placement).

Any caretaker who is participating in VIEW may participate in FEP. Generally, only one person in a case should be in FEP at any time. However, if the employer agrees (in writing) to accept one stipend for two case members who will be assigned to an FEP placement for the same time period, the VIEW worker can enroll more than one person in FEP. No member of a case serving a VIEW sanction can participate in FEP unless the minimum sanction period has elapsed.

A. TANF Payment Diverted To Employer – When notified by the VIEW worker of the FEP placement, the eligibility worker must take action in ADAPT to enroll the individual as a FEP participant and divert monthly payments to the employer. The EW must send an Advance Notice of Proposed Action (032-03- 0018-29) informing the recipient that the TANF payment will be suspended. Note: Suspension in the context of FEP participation means that no monthly payment will be issued to the FEP participant while in the placement. It does not mean that action to suspend the payment should be taken in ADAPT, as this would prevent issuance of the monthly stipend to the employer. The recipient is enrolled in FEP by completing the VIEW Full Employment Program (AEVFEP) and Case Information 2 (AECAS2) screens in ADAPT. The AEVFEP screen must be completed first. In order for the stipend to be issued to the employer, AECAS2 must be completed using a payee type of FP.

If the Eligibility worker receives notification of a FEP placement during the 10-day notice period, the ADAPT system should not be updated until the first of the following month. It will be necessary to issue the initial employer stipend out of Benefit Adjustment. The EW should act on the reported change within 3 business days whenever possible. However, the EW must act on the reported change within 10 days.

Example: On May 23 the Eligibility Worker receives the FEP Communication Form from the VIEW Worker indicating a FEP Placement began on May 18. The Eligibility Worker should wait until June 1 to enter the information into the ADAPT system. A TANF payment will be made to the client for June.

This is not an overpayment since the Eligibility Worker was not able to provide timely notice. The initial employer stipend for the month of May should be issued out of TANF Benefit Adjustment at the beginning of June. The June employer stipend will be issued through the monthly batch process and will be received by the employer at the beginning of July.

B. TANF Eligibility During FEP Placement – A participant remains eligible for TANF for the duration of the FEP placement, with two exceptions:
1. no eligible children remain in the home, and
2. a VIEW sanction is imposed on the FEP case as a result of non-compliance with the VIEW program by the FEP participant. See 901.6.

Eligibility continues during FEP participation even though changes reported would otherwise cause the case to be ineligible, e.g., a parent with income in excess of 130 percent of the federal poverty level.

1. During placement in FEP employment, the recipient must continue to report required changes (Section 401.2.B.2.), and the changes must be entered in ADAPT. Although the information entered does not affect eligibility of the TANF case, the changes must be evaluated in accordance with SNAP and Medicaid requirements and may impact the assistance unit's eligibility for SNAP or Medicaid.

2. If a redetermination is due anytime during the FEP placement and the case is receiving TANF and SNAP, the redetermination must be completed when due. Changes in the participant's circumstances will not affect TANF eligibility during the FEP placement, except as noted in paragraph B above.

3. If the case is TANF only, the eligibility worker may postpone the redetermination until the last month of the FEP placement, since a full evaluation of eligibility must be completed at that time. In determining ongoing eligibility following termination of the FEP placement, the EW must take into account any changes that have occurred during the placement. If the FEP participant is retained by the employer following termination of the placement, wages received are evaluated the same as for unsubsidized employment.

4. If the FEP participant meets the criteria for interim reporting during the FEP placement, an Interim Report will be sent. However, no negative action can be taken if the Interim Report is not returned and/or completed. ADAPT keeps FEP cases active so as not to interrupt issuance of the stipend to the employer.

C. Issuance Of Stipend Payments To The Employer – The employer stipend is a monthly payment paid as partial reimbursement of expenses incurred by the employer for wages and training provided to the FEP participant. The stipend is a predetermined, fixed amount of $300 monthly. Stipends are normally issued on the first of each month through the monthly batch process. However, the first stipend must be issued through Benefit Adjustment when ADAPT cannot be updated because of the 10-day timely notice period.

Stipends are paid beginning the month after the participant enters a FEP placement. FEP stipends are issued for up to six consecutive months unless notified by the VIEW worker to discontinue the payments prior to the end of the placement. In no instance are stipends to be paid for more than six months.

D. Issuance Of Tanf Payments During The Fep Placement – A supplemental payment to the recipient may be issued in the following situations:

1. The EW is notified by the VIEW worker that the participant worked less than an average of 20 hours per week, with good cause. Good cause means that the failure to work was outside the control of the FEP participant, such as, but not limited to, loss of child care, transportation, illness of the FEP participant or a family member, or another emergency situation. The number of hours worked and good cause are determined by the VIEW worker. If the VIEW worker determines good cause does not exist, no supplement is to be issued.

The EW will issue a supplemental payment through Benefit Adjustment using gross earnings information provided by the VIEW worker and other countable income received in the month for which the supplement is issued. The amount of the payment is determined using the VIEW calculation. Use ADAPT Option 11 to create the payment. If an overpayment or penalty is in effect, the payment to the FEP participant must be reduced accordingly.

2. Both a TANF payment and monthly FEP stipend must be issued in the final month of the FEP period.

E. Issuance Of Employer Bonus – The VIEW worker will notify the eligibility worker on the Full Employment Program Communication Form (032-03-655) when a bonus payment must be issued. The bonus payment is a predetermined, fixed amount of $500 payable to the employer. A bonus is paid if the participant is hired permanently at any time during the placement period or within 30 calendar days after the placement has ended. The EW will issue the bonus payment through Benefit Adjustment. Only one bonus payment may be issued per VIEW participant per FEP placement.

The bonus cannot be issued in the same month a stipend has been issued. For example, if the final stipend payment is issued in October, the bonus payment cannot be issued until November.

F. Treatment Of Child Support Payments – FEP participants must continue to redirect all support to the Division of Child Support Enforcement (DCSE) while in a FEP placement. DCSE will issue to FEP participants all child support payments they would otherwise be entitled to receive. This includes $100 disregard payments and other support payments they would receive if they were receiving a TANF payment.

G. Replacement Of Stipend Or Bonus Checks – The FEP employer will contact the VIEW WORKER if check replacement is necessary, and the VIEW WORKER will notify the EW using the Full Employment Program Communication Form (032-03-655). If a stipend is reported as lost, stolen, or mutilated, follow procedures in Section 502.5.D. and Appendix I to Chapter 500 to stop payment.

The employer must complete the required three copies of the Affidavit on Check Endorsement. The employer will determine the appropriate person to complete and sign the affidavit. This is usually an employee in the accounting department with responsibility for endorsing checks received. If the employer endorses his checks with a stamp, the endorsement stamp should be stamped once on the signature section at the end of the affidavit.

ADAPT coding applicable to FEP check replacements is the same as for reissuing or replacing TANF or DA checks. Once the worker is notified of a lost/stolen/ mutilated/returned check, the worker must update the status of the check in Check Handling. If the check was cancelled or mutilated, the replacement check must be issued through TANF Benefit Adjustment. If a Stop Payment is placed against the check, the stipend must be reissued through Check Handling. Under no circumstances should a local check be written to replace the original check as no process exists to reimburse the locality.

VIEW GRANT CALCULATION

STEP 1: Determine the total gross earned income of all required assistance unit members. Compare the total gross earned income to the Federal Poverty Level (see Federal Poverty Level Chart found in Appendix 3 of this Chapter) for the appropriate AU size. The federal poverty level is to be applied uniformly in all of the three groupings of localities in Virginia.

If the gross countable earned income equals or exceeds the federal poverty level, the case is ineligible.

If the countable gross earned income is less than the federal poverty level, go to STEP 2.

STEP 2: Determine countable unearned income and compare **it** to the standard of assistance for the AU. f the countable unearned income equals or exceeds the standard of assistance, the case is ineligible.

If the countable unearned income is less than the standard of assistance, the difference is the deficit amount. Go to STEP 3.

STEP 3: Use the gross earned income total of all required assistance unit members.

In the following order:

a. Deduct the standard deduction* per assistance unit from total gross earned income if the assistance unit qualifies for this deduction and the income is not exempted. The standard deduction is defined in Section 305.3.B.3; standard deduction amounts by family size are listed at 305.1.A.2b.

b. Deduct 20% of the remainder.*

c. Deduct anticipated expenses, up to the allowable maximum as specified in Section 305.3.B.5 for care of each child or incapacitated adult included in the assistance unit if the member qualifies for this disregard.

* 22 VAC 40-295-60

STEP 4: Add the total net countable earned income and the TANF deficit from STEP 2. The net countable earned income plus the TANF deficit shall not exceed the federal poverty level. **(Note: If the net countable income plus the TANF deficit exceeds the federal poverty level, reduce the TANF payment so the poverty level is not exceeded.)**

STEP 5: Subtract any penalties from the TANF payment.

NOTE: If the TANF payment calculates to $9.99 or less, the assistance unit will be ineligible for a money payment but the case will be deemed to be eligible for TANF (VIEW) and will be carried as an active TANF case.

TANF-UP GRANT CALCULATION

STEP 1: Determine the total gross earned income of all required assistance unit members. Compare the total gross earned income to 150% of the Federal Poverty Level (see Appendix 3 of this Chapter) for the appropriate AU size. One-hundred fifty percent of the federal poverty level is to be applied uniformly in all of the three groupings of localities in Virginia.

If the gross countable earned income equals or exceeds 150% of the federal poverty level, the case is ineligible.

If the countable gross earned income is less than 150% of the federal poverty level, go to STEP 2.

STEP 2: Determine countable unearned income and compare to the standard of assistance for the AU. If the countable unearned income equals or exceeds the standard of assistance, the case is ineligible.

If the countable unearned income is less than the standard of assistance, the difference is the deficit amount. Go to STEP 3.

STEP 3: Use the gross earned income total of all required assistance unit members.

In the following order:

a. Deduct the standard deduction as defined in Section 305.3.B.3. for the assistance unit from total gross earned income if the assistance unit qualifies for this deduction and the income is not exempted.

b. Deduct 20% of the remainder*.

c. Deduct anticipated expenses, up to the allowable maximum as specified in Section 305.3.B.5 for care of each child or incapacitated adult included in the assistance unit if the member qualifies for this disregard.

* 22 VAC 40-295-60

STEP 4: Add the total net countable earned income and the TANF-UP deficit from STEP 2. The net countable earned income plus the TANF-UP deficit shall not exceed 150% of the federal poverty level. If necessary, reduce the TANF-UP payment so that the total of the net earned income plus the TANF-UP payment equals 150% of the federal poverty level.

If the TANF-UP payment calculates to $9.99 or less, the assistance unit will be ineligible for a money payment; but the case will be deemed to be eligible for TANF-UP (VIEW) and will be carried as an active TANF-UP case.

VIEW GRANT CALCULATION

EXAMPLE #1 - Earnings

Assistance unit of 2 in a Group II locality. Mom earns $456 gross income each month.

Step (1) - Screening at Federal Poverty Level

$ 456.00	Gross Monthly Earnings <
$1,328.00	Monthly Federal Poverty Level for 2

Step (2) - Unearned Income

$267.00	Standard of Assistance for 2
- 0	Unearned Income
$267.00	TANF Deficit

Step (3) - Earned Income Disregards

$456.00	Gross Monthly Earnings
- 155.00	Standard Deduction for 2
$301.00	x 20% = 60.20
- 60.20	
$240.80	Net Earned Income

Step (4) - Add Net Earned Income and TANF Deficit

$240.80	Net Earned Income
+**267.00**	TANF Deficit
$507.80	< Monthly Federal Poverty Level for 2
$267.00	VIEW Payment (TANF Grant)

EXAMPLE #2 - Earned and Unearned Income

Assistance unit of 2 in a Group II locality. Mom earns $305 gross monthly and the assistance unit also receives $120 unearned income monthly.

Step (1) - Screening at Federal Poverty Level

$ 305.00	Gross Monthly Earnings <
$1,328.00	Monthly Federal Poverty Level for 2

Step (2) - Unearned Income

$267.00	Standard of Assistance for 2
-120.00	Unearned Income
$147.00	TANF Deficit

Step (3) - Earned Income Disregards

$305.00	Gross Monthly Earnings
-155.00	Standard Deduction for 2
$150.00	x 20% = 30.00
- 30.00	
$120.00	Net Earned Income

Step (4) - Add Net Earned Income and TANF Deficit

$120.00	Net Earned Income
+**147.00**	TANF Deficit
$**267.00**	< Monthly Federal Poverty Level for 2
$147.00	VIEW Payment (TANF Grant)

EXAMPLE #3 - Earnings Result in Ineligibility

Assistance unit of 4 in a Group III locality. Mom earns $2,021 monthly gross income.

Step (1) - Screening at Federal Poverty Level

$2,021.00	Gross Monthly Earnings =
$2,021.00	Monthly Federal Poverty Level for 4

The assistance unit is ineligible.

EXAMPLE #4 - Maximum Reimbursable

Assistance unit of 6 in a Group I locality. Mom earns $457 gross monthly income.

Step (1)- Screening at Federal Poverty Level

$ 457.00	Gross Monthly Earnings <
$2,715.00	Monthly Federal Poverty Level for 6

Step (2) - Unearned Income

$494.00	Standard of Assistance for 6
- 0	Unearned Income
$494.00	TANF Deficit
$465.00	Maximum Reimbursable Amount

Step (3) - Earned Income Disregards

$457.00	Gross Monthly Earnings
- 226.00	Standard Deduction for 6
$231.00	x 20% = 46.20
- 46.20	
$184.80	Net Earned Income

Step (4)- Add Net Earned Income and TANF Deficit

$184.80	Net Earned Income
+**465.00**	Maximum Reimbursable TANF Deficit
$649.80	< Monthly Federal Poverty Level for 6
$465.00	VIEW Payment (TANF Grant)

EXAMPLE #5 - Earned Income Case with Immunization Penalty

Assistance unit of 2 in a Group III locality. Mom earns $966 gross monthly income. One member of the AU receives $60 SSA monthly. There is a $50 immunization penalty.

Step (1) - Screening at Federal Poverty Level

$ 966.00	Gross Monthly Earnings <
$1,328.00	Monthly Federal Poverty Level for 2

Step (2) - Unearned Income

$339.00	Standard of Assistance for 2
- 60.00	Unearned Income
$279.00	TANF Deficit

Step (3) - Earned Income Disregards

$966.00	Gross Monthly Earnings
- 155.00	Standard Deduction for 2
$811.00	x 20% = 162.20
- 162.20	
$648.80	Net Earned Income

Step (4) - Add Net Earned Income and TANF Deficit

$648.80		Net Earned Income
+**279.00**		TANF Deficit
$927.80		< Monthly Federal Poverty Level for 2
$279.00	=	VIEW Payment (TANF Grant)

Step (5) - Apply Immunization Penalty

$279.00	VIEW Payment
- 50.00	Immunization Penalty
$229.00	Net VIEW Deficit
$229.00	VIEW Payment (TANF Grant)

EXAMPLE #6 - TANF-UP Household

Assistance unit of 4 in a Group II locality. Dad earns $1505 gross income.

Step (1) - Screening at 150% of the Federal Poverty Level

$1,505.00	Gross Monthly Earnings <
$3,032.00	150% of the Monthly Federal Poverty Level for 4

Step (2)- - Unearned Income

$ 401.00	Standard of Assistance for 4
- 0.00	Unearned Income
$ 401.00	TANF Deficit

Step (3) - Earned Income Disregards

$1505.00	Gross Monthly Earnings
- 168.00	Standard Deduction for 4
$1337.00	x 20% = $267.40
- 267.40	
$1069.60	Net Earned Income

Step (4) - Add Net Earned income and TANF Deficit

$1069.60	
+ 401.00	TANF Deficit
$1470.60	< 150% of the Monthly Federal Poverty Level for 4
$ 401.00	VIEW Payment (TANF Grant)

2015 FEDERAL POVERTY LEVELS

Size of Family Unit	Monthly Poverty Guideline
1	$ **981.00**
2	$ **1,328.00**
3	$ **1,675.00**
4	$ **2,021.00**
5	$ **2,368.00**
6	$ **2,715.00**
7	$ **3,061.00**
8	$ **3,408.00**

For each additional person add $**347**

150% of the Federal Poverty Level
(for TANF-UP Families)

Size of Family Unit	150% of the Federal Poverty Level
1	$ **1,472.00**
2	$ **1,992.00**
3	$ **2,512.00**
4	$ **3,032.00**
5	$ **3,552.00**
6	$ **4,072.00**
7	$ **4,592.00**
8	$ **5,112.00**

For each additional person add $**520**

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DEFINITIONS

The following words and terms, when used in this **guidance**, shall have the following meaning:

Adult Basic Education (ABE) - remedial or other instructional activities aimed at enhancing basic educational performance levels including reading, writing and mathematics.

Agreement of Personal Responsibility (APR) - the written individualized agreement of personal responsibility outlining the responsibilities of the VIEW participant as required by the Code of Virginia 63.2 - 608 and this **guidance**.

AmeriCorps – AmeriCorps is a national network of programs that provide individuals with opportunities for community service. AmeriCorps includes local programs operated through the state or national AmeriCorps organizations, AmeriCorps VISSTA, and the AmeriCorps National Civilian Community Corps. Information about AmeriCorps is available at http://www.americorps.org.

Applicant - a person who has applied for TANF or TANF-UP benefits and for whom the disposition of the application has not yet been made.

Basic Literacy Level - a literacy level equivalent to grade 8.9 or greater.

Case Management - the process of assessing, monitoring, coordinating, delivering and/or brokering activities and services necessary for VIEW participants to enter employment or employment-related activities.

Case Management Services - services which include, but are not limited to, assessment, placement in program activities, arrangement of supportive services, and monitoring.

Case Manager - the worker designated by the local department of social services to provide case management services. The case manager can be a local agency employee, or the employee of another public agency, private sector contractor, or private community-based organization including non-profit entities, churches, or voluntary organization that provides case management services.

Child Care Program - a regularly operating service arrangement for children in which during the absence of a parent or guardian, a person or organization has agreed to assume responsibility for the supervision, protection, and well-being of a child under the age of 13 (or for a child up to 18 years of age if the child is physically or mentally incapable of caring for herself or is subject to court supervision) for less than 24 hour period.

Child Care Services - the arrangement and/or purchase of child care in order to assist eligible families to obtain or maintain employment, education or training.

Community Work Experience Program (CWEP) – unpaid work in a public or private non-profit organization designed to improve the employability of the participant.

Component - one of several activities in which a person may participate while in the VIEW Program.

Core Work Activity – an activity in which a client must participate for a minimum of 20 hours weekly prior to any additional assignments so that the participant's total hours of participation can be counted in the federal participation rate calculation. The core work activities are unsubsidized employment, the full employment program (FEP), on-the-job training (OJT), community work experience program (CWEP), public service program (PSP), vocational education and training, and job search/job readiness. Both vocational education and training and job readiness/job search are time limited and do not count toward the 20 hour core activity requirement once those time limits are reached.

Department - the Virginia Department of Social Services.

Disability – A disability, as defined by the Americans with Disabilities Act of 1990 as amended, is a physical, developmental, cognitive or mental health condition or learning disability that limits the ability of the individual to perform life activities. "Life activities" include, but are not limited to: the operation of a major bodily function, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. Chronic health problems such as asthma, diabetes, and hypertension may also be considered disabilities if these conditions limit the individual's ability to function. For the purposes of the VIEW program, a disability must limit the participant's ability to **participate** in program activities or to work. All disabilities and their impact on program participation and work must be verified by a qualified professional.

A child has a disability if he or she has a physical, developmental, cognitive or mental health condition or learning disability that limits the ability to perform any of the activities listed above, or other activities, as compared with other children of the same chronological age.

Displacement – as applied to employment and employment programs, an illegal practice in which an employer fills a vacancy that exists because another individual is on layoff from the same or equivalent job; or when an employer fills a vacancy created by an involuntary reduction in the work force or by the termination of another employee for the purpose of filling a vacancy with a VIEW participant. No VIEW placement, including placements into the Full Employment Program (FEP), Community Work Experience Program (CWEP) or Public Service Program (PSP), may displace other workers.

Earned Income Disregards - a certain amount of earned income which is not counted when determining the amount of the TANF benefit.

Earned Income Tax Credit – a credit against the federal income tax of employed, low income workers. The earned income tax credit may be received as an addition to the paycheck of an eligible individual or as a refund from federal taxes due.

English as a Second Language (ESL)/ English for Speakers of Other Languages (ESOL) – programs of English language instruction for **individuals** who are not native English speakers.

ESW - Employment Services Worker The local agency worker responsible for managing the client's VIEW case. In agencies in which one worker is responsible for both VIEW and TANF eligibility, the position may be referred to as a self-sufficiency worker rather than as an ESW.

EW - Eligibility Worker. The local agency worker responsible for managing the client's TANF case.

Exempt – status of a TANF or TANF-UP applicant or recipient who meets one of the Virginia Initiative for Employment not Welfare (VIEW) program exemption criteria and, therefore, is not required to participate in VIEW in order to be eligible for public assistance.

Full Employment Program (FEP) - subsidized, training-oriented employment, that replaces TANF benefits with wages paid by an employer. This employment is designed to train the recipient for a specific job, increase her self-sufficiency and improve her competitiveness in the labor market.

Full-time Employment - employment which is at least 30 hours per week at minimum wage or greater.

GED – General Educational Development is a test made up of five sections – language arts, writing, social studies, science, reading and mathematics - that certifies that the individual successfully completing it has academic skills equivalent to those of a high school graduate.

Good Cause – a mitigating circumstance determined by the VIEW worker to satisfactorily explain a participant's failure to comply with program requirements with the result that a sanction will not be imposed.

Grant - the monthly TANF benefit payment.

Hardship Exception – an extension of the 2-year limit on TANF benefits allowed under certain very limited circumstances for specific prescribed reasons.

Household member - any child or adult residing with the applicant/recipient. The individual need not be a member of the applicant/recipient's assistance unit to qualify as a household member.

Job Finding – the identification of available and appropriate jobs.

Job Follow-Up – contact with the client, no less than monthly, during which the ESW provides case management services to assist with job retention and upgrading once the program participant has become employed.

Job Placement - placing a participant in **an** unsubsidized or subsidized job. Job placement is the result of job finding and job matching.

Job Readiness – instruction in skills needed to seek or obtain employment. Job readiness may include instruction in workplace expectations, help in developing resumes and interviewing skills, and life skills training. Job readiness may also include preparation for employment through participation in short term substance abuse or mental health treatment, or in rehabilitation activities for those who are otherwise employable. Such treatment must be determined necessary by a qualified medical professional.

Job Search - a structured, time -limited period during which the participant is required to search for employment. In order to complete the job search, the participant is required to perform a specified number of hours of job search and document the job search contacts, or find and accept employment.

Job Skills Training - general training that prepares an individual for employment (examples may include keyboarding or computer literacy classes) or job specific training required by an employer in order to obtain, keep, or advance in a specific job or occupation, or training needed to adapt to the changing demands of the workplace; all training and education programs, including post-secondary associate, certificate, and baccalaureate level programs, that are included in the definition of Vocational Education and Training; instruction in a second language for participants who have a high school diploma or GED; unpaid practicums or internships offered by a college or training program, or by an employer.

Limited English Proficiency – the limited ability of a person whose native language is one other than English, or who lives in a family or community environment where a language other than English is the dominant language, to speak or understand the English language.

Local Agency or Local Department - any one of the local social services or welfare agencies throughout the Commonwealth that administers the TANF and VIEW programs.

Local VIEW Annual Plan - a yearly plan submitted to the department by each local agency which describes the locality's VIEW program.

Making Good Progress / Satisfactory Progress - A consistent standard of progress based on written **guidelines** as developed by the educational institution or training agency and measured periodically at intervals of less than one year such as a term or quarter for VIEW clients in educational or training placements.

Non-Core Work Activity - one of the activities to which a participant can be assigned and which can be included in the federal participation rate calculation once a minimum 20 hour assignment to a core activity has been made if the total hours equal the federal requirement. The non-core work activities are education below the post secondary level and job skills training.

On-the-Job Training (OJT) – a type of paid employment in which an employer provides training to an employee in order to increase the employee's skills on the job.

Other Activities – an activity to which a participant may be assigned to increase her employability but which does not meet the definition of a work activity or count in the federal participation rate calculation. "Other locally developed" is the only Other Activity.

Other Locally Developed – an activity developed or used by a local agency to increase a client's employability, but which does not meet the definition of a work activity, or the definition of post secondary education, and which will not be included in the federal participation rate calculation.

Participant - a TANF or TANF-UP recipient who has signed the Agreement of Personal Responsibility and is participating in the VIEW program.

Part-Time Employment - employment less than 30 hours per week at minimum wage or greater.

Pending - a non-active program component to which a participant who cannot move immediately into an active component is assigned.

Post-Secondary Education - a program of instruction beyond the high school level offered by an institution of higher education as determined by the Secretary of Education in accordance with the Higher Education Act of 1965.

Public Service Program (PSP) — unpaid work in a public or private non-profit organization designed to improve the employability of the participant while providing a clearly defined public service. Public Service Program placements must be limited to projects that serve a useful community purpose in

fields such as health, social service, environmental protection, education, urban and rural development, welfare, recreation, public facilities, public safety, and child care.

Queue – the list of TANF recipients who are referred by the eligibility worker for mandatory participation in the VIEW program.

Reasonable Distance – for VIEW placements, a reasonable distance is considered to be no more than one hour travel time each way from the participant's place of residence to the site of the activity.

Sanction – a suspension of a VIEW participant's TANF grant for non-compliance with program requirements; to suspend a participant's TANF grant for noncompliance.

Satisfactory Participation – participation in a program activity equal to the hours assigned to the activity for a stated time period. For job search assignments, satisfactory participation equals the completion of all required job search contacts, or employment.

Self-Initiated Participant - a participant who has enrolled in post-secondary education or in training activities prior to enrollment into the VIEW program.

Supplemental Nutrition Assistance Program (SNAP) Employment and Training (SNAPET) - The employment and training program for SNAP recipients.

Standard Operating Procedures (SOP) – a guide developed by the local agency that specifies the procedures to be followed in administering the VIEW program. The SOP is part of the local VIEW Annual Plan.

Subsidized Employment – employment in which government funds are used to directly subsidize the participant's wages. The Full Employment Program (FEP) is considered subsidized employment.

Supportive Services - services such as child care and transportation provided to a VIEW program participant with an open TANF case to enable the participant to take part in program activities or to work.

TANF-UP – a 2-parent TANF household in which the parents have at least one child in common and in which neither parent is disabled.

Termination – closure of the TANF case for failure of a mandatory VIEW recipient to sign the Agreement of Personal Responsibility.

Temporary Assistance for Needy Families (TANF) - the cash assistance program for families with children in Virginia, based on the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) as amended by the Deficit Reduction Action (DRA) of 2005.

Time Limitations – limitations on the period of time a family is eligible for TANF assistance based on federal and state statutes

Transitional Services – a category of services available to former VIEW participants once the TANF case is closed. Transitional services include services such as child care, transportation, Transitional Employment and Training services (TET), and the VIEW Transitional Payment which may be provided to a VIEW participant whose TANF case has been closed.

Unsubsidized Employment - employment in which the participant is paid at least minimum wage and for which no government funds are used to subsidize the wages earned by a participant.

VIEW Transitional Payment (VTP) – an incentive payment designed to encourage job retention. It is available to VIEW participants who are working at least 30 hours a week and earning at least minimum wage at the time TANF closes.

Virginia Independence Program (VIP) – the welfare reform initiative enacted by the Virginia General Assembly and implemented in 1995.

Virginia Initiative for Employment Not Welfare (VIEW) – the Commonwealth's employment services program for TANF recipients. It was implemented in 1995 as part of the Virginia Independence Program (VIP) to assist participants in attaining self-sufficiency.

Vocational Education and Training – training or education designed to prepare the participant for a specific trade, occupation, or vocation requiring training other than ABE, GED, ESL, or **an** advanced degree **beyond the baccalaureate level.**

Work Activity – one of the VIEW program components which can be counted toward the federal participation rate calculation. Work activities include the following core work activities: unsubsidized employment, the Full Employment Program (FEP), on-the-job training (OJT), the community work experience program (CWEP), the public service program (PSP), vocational education and training, job search, and job readiness. Additionally, work activities include two non-core work activities: education below post-secondary and job skills training.

1000.1 The Virginia Initiative for Employment not Welfare (VIEW)

The Virginia Initiative for Employment not Welfare (VIEW) is a program providing employment, education, and training opportunities to recipients of Temporary Assistance to Needy Families (TANF). VIEW is based on the conviction that all citizens deserve the opportunity to progress to self-sufficiency.

VIEW offers Virginians living in poverty the opportunity to:

1. Obtain work experience and work skills necessary for self-sufficiency
2. Contribute to the self-sufficiency of their families
3. Achieve economic independence

In addition to the program and client goals listed above, the Virginia Department of Social Services and local agencies must meet federal requirements regarding types and intensity of client participation in VIEW in order to maintain federal block grant funding.

The VIEW Program offers a number of education, training, and work components designed to meet the individual needs of the TANF recipients required to participate in VIEW and to meet federal requirements. These components, referred to generically as work activities, are divided into core and non-core work activities.

Participants who are age 18 or 19, and who are enrolled in high school or GED programs, and who are meeting attendance requirements are considered to have met all VIEW program requirements. **In order for their participation to be captured for federal reporting, 35 hours must be entered into ESPAS for assigned hours <u>and</u> for actual hours.**

Unless full-time employed, including employment in On the Job Training (OJT) positions, each client referred to VIEW must be assigned to a minimum of 35 hours per week in work activities to ensure that the client's actual hours of participation can be counted in Virginia's participation rate calculation. In all situations **(with the exception of participants age 18 or 19, enrolled in high school or GED and meeting attendance requirements)** the first 20 of these hours must be in a core work activity or combination of core work activities. Additional hours needed to meet the participation requirement can be made up of additional hours from the same core work activity or activities, a different core work activity, or a non-core activity.

A. <u>Core Work Activities</u>

The core work activities, and any limitations on their use for federal participation rate calculations, are described below.

- Job Search/ Job Readiness. The initial assignment for most VIEW clients will be to job search. Clients may also be assigned to job readiness before, during, or after a job search assignment.

  Job search includes applying for and interviewing for jobs through participation in group job search or job club, or through individual job search.

  Job readiness includes many of the activities that are part of structured job search programs such as group job search or job club – instruction in work place expectations, help in developing resumes and interviewing skills, and life skills training. Additionally, federal regulations allow job readiness to include substance abuse treatment, mental health treatment, and rehabilitation services necessary to help a participant become job ready.

  Limitations: For purposes of the federal work participation rate calculation, an assignment to job search and/or job readiness (including job readiness for the purpose of substance abuse, mental health, or rehabilitation services), cannot count for more than 4 consecutive weeks.

Additional consecutive weeks cannot be counted in the calculation of the federal participation rate.

During a **federal** fiscal year, the total **countable hours** of **participation in** job search and/or job readiness assignments cannot exceed **120 hours for a single parent with a child under age 6 in the home or 180 hours for all other individuals** . **(This is equivalent to 6 *weeks* of participation in the work activity.)** Additional **participation in** job search and/or job readiness in a fiscal year can be assigned and entered into ESPAS, but will not be counted in the calculation of the federal participation rate.

- Unsubsidized Employment, including Self-Employment. Unsubsidized employment is employment in which no government funds are used to directly subsidize the individual's salary and in which the individual earns at least the federal minimum wage. Minimum wage means an hourly rate directly equaling the federal minimum wage or an hourly rate of at least $2.13 which, when supplemented by tips, equals at least the minimum wage.

- Subsidized Employment. Subsidized employment is employment in which government funds are used to directly subsidize the participant's wages. Subsidized employment is designed to provide training while the participant works on the job. The VIEW Program provides one subsidized employment component – the Full Employment Program (FEP). FEP is subsidized employment in which the employer receives a fixed monthly stipend and the client receives wages instead of a TANF check.

- Community Work Experience Program (CWEP). CWEP is an unpaid work placement in a public or private non-profit organization. An assignment to CWEP is appropriate for participants who need to learn or improve skills or work behaviors, or to secure a job reference, in order to find paid employment. The number of hours of a CWEP assignment is based on the TANF grant amount and SNAP allotment.

- Public Service Program (PSP). Public Service Program placements are similar to work experience in that the client will be engaged in unpaid work in a public or private non-profit organization with the goal of improving employability. PSP placements must additionally provide a clearly defined public service. Examples of public service activities include court-ordered, unpaid work, as well as participation in other programs or placements that benefit the community. TANF and SNAP benefits are not considered in the calculation of public service hours. Public service assignments will in no case exceed 35 hours per week, with the exception of court-ordered assignments of greater length.

- On-the-Job Training (OJT). On-the-job training is training provided by an employer to a paid employee to help the employee become proficient on the job. A portion of the employee's wages are typically reimbursed to the employer. OJT includes paid on-the-job training offered through WIA, paid college work study programs and internships, apprenticeship programs, and AmeriCorps placements in which the individual is paid a stipend to cover living expenses.

- Vocational Education and Training. Vocational education and training is training or education directly related to employment designed to prepare the participant for a specific trade, occupation, or vocation. It does not include advanced degree education. It does not include ABE, GED, or ESL. Examples of activities that can be classified as vocational education and training are technology, business, and health sciences programs leading to certificates, associate degrees, or baccalaureate degrees in such areas as HVAC repair (heating and air conditioning), information technology, medical equipment repair, accounting administration, medical assisting, and practical or registered nursing. Programs meeting the definition of vocational education and training are offered by a wide range of institutions including vocational-technical schools, community colleges, 4-year colleges, other post-secondary institutions, proprietary schools, and secondary schools offering vocational education.

Limitations: Vocational education and training included in the calculation of the federal participation rate is restricted to a lifetime limit of 12 months for each individual. The months do not have to be consecutive.

B. Non-Core Work Activities

The non-core work activities are described below. Hours assigned to non-core work activities can be used in the calculation of the participation rate only after the minimum 20 hour assignment to a core activity or activities has been met.

- Job Skills Training. Job skills training shares a vocational emphasis with vocational education and training. It includes both general training that prepares an individual for employment such as a keyboarding or computer literacy class, and job specific training required by an employer to get, keep, or advance in a specific job or occupation, or to adapt to the changing demands of the workplace. It also includes all training and education programs, including post-secondary associate, certificate, and **baccalaureate** level programs, that are included in the definition of Vocational Education and Training. It may include language instruction for participants who have a high school diploma or GED. Unpaid practicums or internships offered by a college or training program, or by an employer, are also considered job skills training.

- Education Below Post-Secondary. Education below post-secondary is an allowable program activity for participants who have not received a high school diploma or General Education Development (GED) certificate and whose employability would be enhanced by additional education. It includes ABE, GED and ESL programs as well as secondary school and may be offered in non-traditional as well as traditional settings.

C. Other Activities

In some circumstances, an agency may wish to assign a participant to an activity which will not count in the calculation of the participation rate but which will contribute to the client's employability.

- Other Locally Developed. Any activity developed or used by a local agency to increase a client's employability, but which does not meet the definitions of a core or non-core activity, must be reported as other locally developed. It will not be included in the participation rate calculation.

1000.2 – PARTICIPATION REQUIREMENTS

A. VIEW Program Requirements

The participation requirements that govern the VIEW program are:

- 35 hours per week for TANF families; 30 hours if the participant is employed full time at minimum wage, including employment in an On the Job Training (OJT) position.

- 35 hours per week for each parent in a TANF-UP household in which both parents are required to participate (70 hours total); 30 hours for each parent who is employed full time at minimum wage, including employment in an OJT position.

- 35 hours per week for TANF-UP families in which only one parent is required to participate; 30 hours if the participant is employed full time at minimum wage, including employment in an OJT position.

Note: Refugee families receiving TANF or TANF-UP payments are subject to VIEW participation requirements. (Refugee families who are not eligible for TANF or TANF-UP, but who receive Refugee Cash Assistance (RCA), are not eligible to participate in VIEW.)

The participation requirements are designed to meet the needs of participants, assist participants in achieving self-sufficiency and to meet the federal work participation rate. In some respects, the VIEW requirements are different from the federal requirements regarding work participation rate calculations.

B. Federal Work Participation Rate Requirements

A participation rate is a ratio. The federal work participation rate represents who is participating in work activities out of all those expected to participate. To count toward the numerator of the monthly participation rate, a TANF recipient must be in an allowable activity for at least a minimum average number of hours per week:

- 20 hours per week for single parents with children under 6,
- 35 hours per week for two-parent families (55 hours if child care is provided),
- 30 hours per week for all other families.

Each State must meet two separate work participation rates:

- the two-parent rate--based on how well it succeeds in helping adults in TANF-UP families participate in work activities, and
- the overall rate--based on how well it succeeds in placing adults in both TANF and TANF-UP families in work activities. Each State must achieve an overall participation rate of 50% and a two-parent rate of 90%.

If the state fails to meet either minimum work participation rate for a fiscal year, it is subject to a severe financial penalty. The state loses 5% of the TANF block grant ($7.9 million) for failing to meet the rate. In addition, the state must increase state spending to make up the loss of federal funds and such spending does not count toward the state's spending requirement. Additionally, the state's spending requirement increases by $8.5 million. Local funding for VIEW will be impacted if the state is penalized.

C. Computation of the Overall Federal Work Participation Rate

The overall participation rate for a fiscal year is the average of the state's overall participation rates for

each month in the fiscal year. The monthly participation rate is computed as follows:

(1) The number of families receiving TANF assistance that include an individual who is engaged in a work activity for the appropriate number of hours for the month (i.e., the numerator), divided by,

(2) all families receiving TANF assistance or the VIEW Transitional Payment minus:
- a) cases with a child under age one **in which the caretaker has not reached the lifetime limit (12 months) of being exempt from the federal work participation requirement**; and
- b) cases which do not include an adult receiving assistance unless such a person is a parent (payee cases); and
- c) cases in which the only adult(s) receives SSI or SSDI; and
- d) cases in which the only adult(s) is ineligible to receive assistance due to her immigration status; and
- e) cases in which a parent is providing care for a disabled family member living in the home who does not attend school on a full-time basis, provided that the need for such care is supported by medical documentation.

Cases subject to a VIEW sanction are not included because they are not receiving assistance.

Example:

Numerator:	10,000	cases engaged in work activities with sufficient hours
Denominator:	35,000	total cases receiving assistance
	- 9,000	9,000 payee cases
	- 1,500	1,500 SSI cases
	- 500	500 SSDI cases
	- 2,500	2,500 cases with a child under age one
	- 1,000	1,000 cases with ineligible aliens
	- 500	500 cases with a parent caring for a disabled household member
Adjusted Denominator:	20,000	

Federal Work Participation Rate 10,000 / 20,000 = 50%

D. Computation of the Federal Two-Parent Work Participation Rate

The two-parent participation rate for a fiscal year is the average of the state's two-parent participation rates for each month in the fiscal year. **Although Virginia does not report participation data for two-parent families (since these benefits are paid completely with State funds), the** two-parent work participation rate is computed as follows:

(1) **The number of two-parent families receiving TANF assistance that include two individuals who are engaged in a work activity for the appropriate number of hours for the month (i.e., the numerator), divided by,**

(2) The number of two-parent families receiving TANF assistance during the month.

If a family includes a disabled parent, the family is not considered to be a two-parent family.

E. Countable Work Activities for the Federal Work Participation Rate

(1) The countable work activities are:
- Unsubsidized employment;
- Subsidized private-sector employment (FEP);
- Community work experience (CWEP);

- On-the-job training (OJT);
- Job search and job readiness;
- Public Service Program;
- Vocational education and training;
- Job skills training (including post-secondary education directly related to employment);
- Education below post-secondary – high school, ABE, GED.

(2) An individual counts as engaged in work for a month for the overall rate if:
- she participates in work activities during the month for an average of at least 30 hours per week; and
- At least 20 of the above hours per week come from participation in the core activities:
  - unsubsidized employment
  - subsidized employment (FEP)
  - CWEP
  - on-the-job training
  - job search and job readiness assistance
  - PSP
  - vocational education and training

(3) Above 20 hours per week, additional core activities or the following non-core work activities may count as participation:
- job skills training (including post-secondary education directly related to employment)
- below post-secondary education

(4) Post-secondary education <u>not</u> directly related to employment and locally developed components do not count toward the work participation rate.

(5) An individual counts as engaged in work for the month for the two-parent rate if:
- an individual and the other parent in the family are participating in work activities for an average of at least 35 hours per week during the month, and
- At least 30 of the 35 hours per week come from participation in core activities.
- Above 30 hours per week, non-core activities may also count.

If the family receives federally funded child care assistance, then the participants must be engaged in work activities for an average of at least 55 combined hours per week to count as a two-parent family engaged in work for the month. At least 50 of the 55 hours per week must come from participation in core work activities.
Above 50 hours per week, non-core activities may also count as participation.

Federal Work Participation Rate Examples

Whether or not a client is counted in meeting the federal participation rate for a given month is dependent on the actual hours of participation entered into ESPAS. The following examples illustrate in a general way how hours count or do not count toward participation. See Appendix J, Understanding Federal Participation, for detailed examples.

Example 1 **<u>Month 1</u>:** Ms. A participates in job search for 36 hours in week 1**;** 33 hours in week 2**;** 24 hours in week 3**;** and 39 hours in week 4. She counts toward the participation rate for the month because she participated in core activities averaging at least 30 hours per week.

<u>Month 2:</u> Ms. A continues job search. In week 1, she is in job search for 33 hours. She is in job search in week 2 for 36 hours. She then gets a job and works for 30 hours each in weeks 3 and 4. **Job search which counts for federal participation is limited to no more than four consecutive**

weeks. Because Ms. A had four weeks of job search in month 1, her first week of job search in month 2 cannot be counted. She will not count toward the work participation rate for month 2 because her hours for the month will average less than 30 a week.

Month 3: Ms. A works 35 hours per week throughout the month. She counts toward the work participation rate.

Example 2 **Month 1:** Ms. B starts receiving assistance on **January 25** and is referred to VIEW. For January, she is included in the denominator, but does not count toward the work participation rate because **she has not yet become a VIEW participant and has not been assigned to** any activities.

Month 2: On February 13, Ms. B is assessed and assigned to job search. She participates in job search for 36 hours per week for the remainder of February. Her two weeks of job search in February are not enough to **allow her to count** toward the work participation rate in February.

Month 3: She continues her job search through March 14. Her job search ends and she is assigned to community work experience starting on April 1. Due to the gap in participation between March 14 and April 1, she does not count toward the work participation rate in March because she did **not have enough hours of participation to** average 30 hours per week.

Example 3 Ms. C participates in unsubsidized employment of 20 hours per week and 15 hours per week in vocational education and training for the entire month. **Both are core activities.** She counts toward the work participation rate because she has participation of at least 30 hours per week.

Example 4 Ms. D participates in CWEP for 18 hours per week and GED for 17 hours per week in September. Though she participated in activities averaging at least 30 hours per week, she did not have at least 20 hours per week in a core work activity **and, therefore,** will not count toward the work participation rate.

F. Limitations/Special Provisions

- Vocational education and training may count for only a total of 12 months for any individual. This is a lifetime limit.

- In counting individuals for each participation rate, not more than 30 percent of individuals engaged in work in a month may be included in the numerator because they are:
  - Participating in vocational educational training; or
  - Individuals deemed to be engaged in work by participating in educational activities.

- Hours spent in post-secondary education not directly related to employment do not count toward the work participation rate.

- An individual's participation in job search and job readiness assistance counts for a maximum of 120/180 hours in any 12-month period. At any time, only four weeks of job readiness/job search may be consecutive.

G. Data Reporting

Data from ADAPT and ESPAS is sent to the federal government on a quarterly basis. It is very important that all information in ADAPT and ESPAS is accurate and entered in a timely manner. Actual hours of

participation are to be entered into ESPAS. States are required to provide data on a quarterly basis. This data is used to compute federal work participation rates as well as to determine Virginia's compliance with other federal requirements. To meet the federal deadline for reporting, data will be extracted from the system on the first day of the second month following the end of a calendar quarter.

To make sure that the locality and state get credit for all of the cases that are engaged in work activities and to avoid the possibility of a sanction, it is imperative that work participation data is accurately entered into ESPAS by the 15th of the following month. When recording participation hours in ESPAS, the final result of calculated hours must be rounded up or down using the standard rounding rules (.50 or greater is rounded up; .49 and below is rounded down). Virginia will not receive credit for the cases that do not have current work participation rate data entered into ESPAS. **Utilize the Actual Hours Calculator on SPARK, http://spark.dss.virginia.gov/divisions/bp/tanf/training.cgi. for the quick and accurate calculation of hours to be entered into ESPAS.**

Actual hours of participation must be entered in the system and must be supported by documentation in the case file. With the exception of unsubsidized employment and OJT, the hours entered into the system on a monthly basis must be verified each month. Self-reporting by a participant is not sufficient documentation.

For unsubsidized employment and OJT, the ESW may enter projected actual hours of participation for up to six months based on current, documented actual hours of work. Verification of employment may be obtained from the EW, but a copy of the verification must be retained in the VIEW record. After six months, or at any point the ESW becomes aware that the hours of employment have changed, the actual hours of participation in unsubsidized employment or OJT must be verified. After the changed employment hours are verified, projected hours of participation should again be entered for up to six months.

Actual hours are defined separately for paid employment, including OJT positions, and for unpaid activities.

Employment and OJT: Actual hours for participants who are employed or in OJT mean hours of paid employment, including paid vacations, paid sick leave, and paid holidays observed by the business.

Job Readiness, Group Job Search, CWEP, PSP, Vocational Education and Training, Job Skills Training, Education below Post-Secondary: Actual hours for participants in unpaid activities, with the exception of individual job search, are actual hours of participation, and hours during which the client would have participated but was unable to because the placement was not available due to holiday closure. Based on federal requirements, only the following ten holidays can be included in the calculation of actual hours of participation for participants in unpaid activities: New Year's Day, Martin Luther King Day, President's Day, Memorial Day, Independence Day, Labor Day, Veteran's Day, Thanksgiving Day and the day after, and Christmas Day. Closures for other holidays, or closures by educational or training institutions for quarter or semester breaks during which the placement is not available to the participant cannot be considered as holiday closures.

In addition to the 10 holidays, 80 hours of excused absences may be counted toward participation in the preceding 12-month period for clients in unpaid activities. Excused absence hours should be counted toward participation only when the hours will enable the client to meet the participation requirement which otherwise would not have been met.

Excused absences that may be counted as actual hours of participation include:

- court dates
- appointments with CPS or Division of Child Support Enforcement (DCSE) which cannot be scheduled outside participation hours
- unavailability of the scheduled activity due to strike, lockout, or shutdown

- unavailability of the scheduled placement site due to closures for holidays not included in the list of the ten holidays specified by federal requirements
- unavailability of the scheduled placement site due to closures due to weather or natural disasters
- illness or medical need of the participant or family member residing in the home
- interruptions in child care arrangements
- domestic violence issues
- transportation problems or auto accident funeral or death of a family member

For clients who have not participated in VIEW in the past and who sign the APR on or after October 1, 2009, the 12- month period begins the month after the APR is signed. For current VIEW clients, or former VIEW clients returning to the program, the 12-month period includes the current month and the preceding 11 months. No more than 16 hours of excused absences may be approved in any month. In order for the excused absence to be considered as actual hours of participation, the client must have been scheduled to participate in the activity for that time period. The decision to consider an absence as excused and to include it in determining actual hours of participation will be made by the local agency within the limitations described above.

Example 1: Mr. A signed the initial APR on October 16, 2009 and was assigned to a job readiness workshop for the period October 23, 2009 – November 30, 2009. In November, he missed 18 hours of job readiness class, 16 hours of which were counted as excused absences. Beginning December 1, he was placed in a PSP position with the Extension Service. During his 6-month placement, he had absences of 8 hours in December, 23 hours in January, 8 hours in February, 19 hours in March, 16 hours in April, and 16 hours in May. Because his countable excused absences from November through April totaled 80 hours, neither the May absences nor absences for other months in the 12-month period (November 2009, the month after he signed the APR, through October 2010) can be counted as participation. The first month in which excused absences can again be counted as participation is November 2010. At that time, the preceding 12-month period is November 2010 back through December 2009 and the 16 hours of excused absences counted for November 2009 are no longer included in the 80 hour allowable maximum.

See completed Holidays and Excused Absences for Participants in Unpaid Activities form for Example 1
http://spark.dss.virginia.gov/divisions/bp/tanf/training.cgi

Example 2: Ms. B was enrolled in VIEW from February 2008 until December 2008 when she moved to New York. Ms. B had excused absences of 16 hours for October 2008, 16 hours for November 2008, and 16 hours for December 2008. Ms. B returned to Virginia in April 2009 and reapplied for TANF. She was approved for TANF and was referred to VIEW effective April 2009. She signed a new April 5, 2009 and was assigned to a Work Experience placement effective June 2009. (See 1000.4C for reasons for exemption from initial job search). Ms. B had excused absences of 16 hours for June 2009 and 16 hours for July 2009. She also missed 20 hours for August 2009 but those hours could not be counted toward participation since Ms. B had already used the maximum 80 hours of excused absences in the period August 2009, back through September 2008.

In September 2009, Ms. B will still have used a maximum 80 hours within the previous 12 months (September 2009 back through October 2008). In October 2009, 64 hours will have been used (October 2009 back through November 2008; the October 2008 hours are no longer counted) and up to 16 hours of excused absences are available for that month.

Ms. B misses 3 hours in October which are counted for a total of 67 hours in the 12-month period. In November 2009, 51of the maximum 80 hours will have been used in the 12 month period (November 2009 back through December 2008; the November 2008 hours are no longer counted.) Ms. B has 30 hours of absences for that month; 16 hours, the maximum for one month, can be counted. For the November 2009 back to December 2008 12-month period, absences will again total 67 hours.

See completed Holidays and Excused Absences for Participants in Unpaid Activities form for Example 2:
http://spark.dss.virginia.gov/divisions/bp/tanf/tools/view.cgi

Example 3: Ms. A is scheduled to participate in community work experience for 6 hours each day, Monday through Friday. She is placed in the local school library. The library was closed on Christmas Day and the day after Christmas. Christmas day is one of the ten holidays that can be included in the calculation of actual hours. The day after Christmas cannot be counted as a holiday. Since Ms. A has only one previous excused absence for 4 hours in December, and since her excused absences total only 30 hours in the preceding 12-month period, the 6 hours for the day after Christmas when the placement site was not available can be included in the calculation of actual hours as an excused absence.

Example 4: Ms. B is participating in CNA classes that meet 6 hours each day. Ms. B's grandfather passed away in New York on May 26th, a Friday. Ms. B left for New York that weekend, and missed the entire next week - May 29th, May 30th, May 31st, June 1st, and June 2nd – a total of 30 hours. Since she had not had any previous absences from the program in May, and no excused absences in the preceding 12-month period, 16 of the 18 hours she missed on 5/29, 5/30, and 5/31 can be counted as excused absences. Both June absences, 6/1 and 6/2, totaling 12 hours, can be counted as excused and counted as actual participation.

Example 5: Continuing with example 2, Ms. B had to return to New York the last week in June to help with her grandfather's estate. She attended class on Monday and Tuesday, the 26th and 27th, but was absent on the 28th, 29th, and 30th, , a total of 18 hours. Since she had used 12 hours of excused absences for the month of June when she went to New York the first time, only 4 hours of the 18 hours from her second visit to New York can be counted as an excused absence.

Example 6: Mrs. C was working at the Guy Noir Detective Agency. She earns 6 days of paid sick leave a year, but had used them by November when she was out of work for a week with the flu. Since she had already used all her leave, she was not paid for those five days, totaling 40 hours, even though her boss sympathized with her situation. None of the 40 hours can count as actual hours of participation. (Only hours of paid employment, including paid vacations, paid sick leave, and paid holidays can count as actual hours for clients who are working or are in OJT).

Unpaid activities - individual job search: It is the responsibility of the participant to record actual hours for each job contact listed on the Job Search form. Actual hours include travel time between interviews. Actual hours do not include travel time to the first interview or from the last interview. Questionable contact information will be verified by the agency with the employer. If travel time incorporated into actual hours reported appears questionable, verify **the expected travel time through** MapQuest or **a** similar site. Only actual hours reported (and verified, if questionable) can be counted in determining participation.

Since individual job search does not have to be conducted within a fixed daily schedule, and can be scheduled around holidays and other appointments, holiday closures and excused absences cannot be considered in determining actual hours of participation.

Case Record Documentation: The case record must be thoroughly documented using the Holidays and Excused Absences for Participants in Unpaid Activities form (032-03-0106) whenever holidays or excused absences are counted as actual hours of participation for unpaid activities.

1000.3 - VIEW Annual Plan

It is the responsibility of each local agency to submit a VIEW Annual plan to the TANF/VIEW Field Consultant for approval. The plan will be developed in accordance with guidelines issued by VDSS and will ensure that the agency is able to meet federal participation rate requirements. **Beginning in 2009, the complete (full) VIEW Annual Plan will be due biennially by July 1 of each odd numbered year. The complete VIEW Annual Plan will consist of the four sections listed in Item A below. On July 1 of each even numbered year, each local agency will be required to submit a partial VIEW Annual Plan which will consist of Section 2-4 listed in Item A below.**
Note: The local agency may choose to submit the complete VIEW Annual Plan by July 1 of each year.

Example: Each local agency will submit a complete VIEW Annual Plan (Section 1, 2, 3, and 4) to the agency's TANF/VIEW Field Consultant for 7/1/09. For 7/1/10, the local agency may choose to submit a partial VIEW Annual Plan (Sections 2, 3, and 4). For 7/1/11, each local agency must submit a complete VIEW Annual Plan (Sections 1, 2, 3, and 4).

A. The plan will describe the agency's VIEW Program and must include the following **sections**:

1. Standard Operating Procedures

2. Budget Allocations

3. Contacts and Interagency Agreements Summary

4. Employment Services Staff Report

B. Changes to the VIEW Annual Plan are to be made under the following circumstances:

1. When a program component is modified.

2. When there is a change in the numbers of participants to be served, or in planned expenditures, of 15% or more.

Plan changes are to be submitted to the TANF/VIEW Field Consultant in advance.

Approval of local agency requests for additional funding must be submitted through the **Budget Request System (**BRS). Approvals and denials will be made based on funding availability and performance.

1000.4 - VIEW Program Flow

The VIEW Program is designed to promote the self-sufficiency of program participants through intensive and continuous engagement in program activities until the client finds employment. This may result in periods during which a client may be assigned to an activity that promotes self-sufficiency but which does not contribute to the agency's overall participation rate. It is expected that each local agency will meet the work participation rate of 50% for the locality.

A. **The ESW will complete an initial assessment of the participant within 10 (calendar) days if possible, but in all cases within 30 (calendar) days of the referral from the EW**. The **30** days begins with, and counts, the date the client was assigned to the queue.

The assessment will include an explanation of VIEW program opportunities and requirements. Additionally, it may include an explanation of the availability of screening for learning disabilities, mental health problems, and alcohol and substance abuse, and of reasonable accommodations if needed. The participant must be told about the availability of disability screening within 90 days of signing the APR if it is not explained at the initial assessment.

B. The ESW will review and explain the VIEW Agreement of Personal Responsibility (032-02-0310) individually with the participant at the time of the initial assessment, and then both the ESW and the client will sign the document.

C. In most situations, the client's initial assignment will include one of the following program activities:

1. Individual Job Search
2. Group Job Search
3. Job Club

The client may also be assigned to Job Readiness, a separate component activity, as part of the overall initial job search assignment. Job Readiness may be offered before, during, or after an assignment to one of the three job search components.

The length of the initial job search assignment will depend on the type of job search and the point in the month at which the assignment is made.

Clients who are assigned to individual job search should have the assignment begin immediately, as long as any needed supportive services are in place, and continue through the end of the month. If the client does not find employment, she should be reassigned to a full month of job search beginning on the first day of the next month. If the client and/ or agency needs to arrange supportive services before the client can begin to participate in the program, this will be completed during the month of the initial assessment and the first assignment will begin on the first day of the month following the initial assessment.

Agencies who operate 4-week group job search or job search programs may wish to begin the programs at the start of the month and assign the client to individual job search until that time. Agencies who operate their 4 week group job search programs on a Monday-Friday basis may need to begin the activity at the end of one month, continue through the next month, and add an individual job search assignment at the end in order to have the client fully engaged for the entire month.

Agencies who are able to offer longer group job search or job club programs can assign the client immediately once the initial assessment is completed, and then reassign the client to 4 weeks of the activity beginning with the next month.

In the following specific circumstances, the initial assignment to job search and/or job readiness may be waived:

- when the client is working full time and earning at least minimum wage
- when the client has already completed an assignment to job search/job readiness during her current 2-year period of TANF eligibility and would benefit from direct assignment to a component activity designed to lead to employment
- when the client is in the last three months of pregnancy and would benefit from an assignment to another VIEW activity.
- when the individual **was** participating in education or training **activities prior to coming into into the VIEW Program and the activities have been approved by the VIEW worker and incorporated into the participant's Activity and Service Plan**. See 1000.13.A.3.

(Note: The agency should be aware that an assignment to Job Search/ Job Readiness activities will not count toward the TANF Work Participation Rate if the client has already completed the maximum number of hours in Job Search/ Job Readiness activities during the previous 11 months.)

D. The VIEW worker may assign the client to activities for the month of assessment (which may be a partial month). Additionally, the VIEW worker must assign the client to activities for the next three full months after the month of assessment. All assignments will be recorded on an Activity and Service Plan (032-02-0302) and will be entered into ESPAS no later than 3 working days after the Activity & Service Plan is completed. (Note: The worker will enter the initial job search assignment into ESPAS immediately. The additional assignments will not be entered into ESPAS until the required reassessment is completed at, or near the end of, the job search assignment.) If it becomes necessary to change an assignment included on the initial Activity and Service Plan, a new plan will be completed.

E. If the participant obtains full-time employment (30 hours a week or more at minimum wage or greater), she will not be required to participate in other VIEW activities. While the client is not required to participate in other program activities, she is required to respond to any correspondence from the VIEW worker and to keep all appointments, including reassessment appointments.

F. If the participant obtains employment that is not full-time or employment less than minimum wage, she will be required to fully participate in VIEW program activities designed to help her find full time employment. She will be assigned to activities that combined with employment hours, total at least 35 hours a week.

G. If the participant has not obtained unsubsidized full or part-time employment at minimum wage or greater at the completion of the job search component, she will be reassessed and placed immediately into another program activity.

It is anticipated that the client's specific program assignment will be to an activity/activities that most directly leads to employment and which allows the client's participation to be included in the federal participation rate calculation.

H. At the end of each component assignment, the client will be reassessed and assigned to another work activity. The focus of the reassessment will be on the client's progress in the activity, and an evaluation of the client's needs for additional program activities and services in order to secure unsubsidized employment.

The reassessment will include an exploration of any barriers, including a verified disability, limited English proficiency, lack of reasonable accommodations or support services, or other barriers, that may make it difficult for the client to search for or obtain employment.

The ESW will offer the client screening for learning disabilities, mental health problems, and alcohol and substance abuse if a disability determination has not been made and if it seems likely that a disability may be affecting the client's progress in the program. All VIEW participants must be offered the screenings within 90 days of signing the APR. If the screening indicates that the client may have a disability, the ESW will refer the client to a qualified professional for an in-depth disability evaluation.

The client's Activity and Service Plan will be revised and updated to reflect all needed services and any accommodations relating to disabilities or other barriers to participation.

I. Unless the client is employed full time and earning at least minimum wage sixty days prior to the end of her two-year limit on assistance, the ESW will reassess the client and assign her to Individual Job Search, Group Job Search, or Job Club and to either FEP, CWEP, PSP, or OJT. If the participant is currently working at least 30 hours at minimum wage or greater 60 days prior to the two-year time limit, she is not required to participate in additional component activities.

If a VIEW participant is employed full time and earning at least minimum wage 60 days prior to the end of her 24-month period then loses her job, her hours decrease to less than 30 hours per week, or her wages decrease to less than minimum wage, she will be assigned to Individual Job Search, Group Job Search, or Job Club, and also to either FEP, CWEP, PSP, or OJT for the remainder of her VIEW enrollment.

This assignment will be made even if the client has already participated in the maximum 6 weeks of countable Job Search for the fiscal year.

J. A participant can apply for a hardship exception during the 60-day period prior to the end of the two-year time period. Clients who are granted a hardship exception will have the period of TANF eligibility extended.

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1000.5 - LIMITATIONS ON THE RECEIPT OF TANF BENEFITS

A. The Two-Year VIEW Time Limit

TANF recipients who are required to participate in VIEW are subject to a two-year limit on receipt of TANF benefits. Once 24 months of benefits have been received, the client is ineligible to receive TANF benefits again until 24 months from the date of the TANF case closure. The months of TANF assistance that count toward the two-year time limit are recorded by the **ESW** on the 24 month VIEW clock. Months of participation in the TANF employment programs of other states are not counted on the 24 month clock.

1) The two-year time limitation for receipt of TANF benefits begins the first of the month after the date the Agreement of Personal Responsibility is signed. The VIEW status of the TANF recipient on the first of each month determines if the month will count toward the two year period.

2) The months in which the participant meets any of the following conditions on the first of the month will not count toward the two-year time period:

   a) she is exempt from VIEW;

   b) she does not have an open VIEW supplement, for reasons other than sanction;

   c) she is assigned to inactive.

3) The months in which the participant meets any of the following conditions on the first of the month will count toward the two-year time period:

   a) she is assigned to pending;

   b) she is assigned to an active component (this will also apply if she is assigned to an active component at any time during the month AND was already enrolled in VIEW but not assigned to Inactive on the first day of the month);

   c) she is sanctioned;

   d) her TANF benefits are continuing due to an appeal;

   e) she is employed at the time the case transfers from another locality and is receiving the VIEW enhanced disregard.

B. The Five-Year Federal Life Time Limit

Sixty months is the federal lifetime limit to receive TANF. The 60 month clock is based on months for which the client received TANF cash assistance. The 60-month clock works independently of the VIEW clock. **The 60-month clock advances for each month a TANF payment is issued, to include when a client is in an Inactive status. The 60-month clock will not advance during any TANF suspension.** TANF assistance that a client received in another state is counted on the 60-month clock.

1000.6 VIEW VOLUNTEERS

A. To the extent that funding is available, agencies may serve TANF recipients who are exempt from VIEW and choose to volunteer. An individual who is exempt from participation can volunteer for VIEW only if she is able to participate for the required number of weekly hours after any needed accommodations are provided. (See 1000.7). It should be made clear to these individuals that by volunteering, the individual gives up her exempt status and becomes a mandatory participant subject to the same participation requirements and penalties for non-participation as other mandatory VIEW participants.

B. If the TANF case of an exempt client who volunteers for VIEW closes, and the client reapplies, the client's exemption status will be determined as part of the eligibility process. The client will be referred to VIEW if she is no longer exempt. If the client's previous exemption was for a temporary medical condition (V5) or for caring for a disabled household member (V7), she must secure a new medical if she states she is unable to participate in VIEW for either of those reasons. If the client is determined to be exempt at reapplication and again wishes to give up her exemption and participate, she may do so if funding is available.

C. Applicants can volunteer for VIEW only after the TANF application has been approved. They are eligible for the VIEW enhanced disregards in the month following the month the VIEW APR is signed at the initial assessment. Note: The APR cannot be signed prior to the initial assessment except when it must be signed prior to TANF approval as a condition of eligibility. (See 1000.9)

D. **If a volunteer is assigned to an activity and does not participate as required, that individual will be referred for sanction. A sanction will be imposed unless the individual has good cause for not participating. Following the end of the fixed sanction period and compliance, the individual will continue as a mandatory participant. Exception: In the case of an individual with a V1 exemption who fails to comply and is sanctioned, the individual can reclaim her V1 exemption following the end of the fixed sanction period if she no longer wishes to participate in VIEW. Her V1 exemption will end once she has used the balance of the 12-month eligibility period and she will then be referred to VIEW as a mandatory participant**.

1000.7 - VIEW Participants with Disabilities

Some VIEW participants have disabilities, including temporary medical conditions, or are caring for family household members with disabilities, that may affect program participation. Disabilities may be identified during the application process when the client is given the "Do You Have a Disability" form, or later as a result of VIEW screening or evaluation. When the ESW has documentation of a verified disability and the effect of the disability on program participation, accommodations can be put in place so that the participant is not denied the opportunities available through VIEW. Having a disability does not mean that an individual cannot achieve.

The Medical Evaluation Form (032-03-0654-03-eng) will be used to determine if a client referred to VIEW should be made exempt or when the client's ability to work or participate in the program is unclear. See Chapter 901.2.C for specific guidelines regarding medical evaluations.

Accommodations may include, but are not limited to: part-time or flexible hours for work activities, providing the individual with work activities in a specific work environment that enables the individual to participate in work activities, providing particular types of jobs or work activities that are consistent with the person's limitations, activities that are scheduled so they do not conflict with ongoing medical or mental health treatment, additional notice of program appointments, additional explanation of program rules, job coaches, additional time to complete program requirements, and additional intervention before an individual is sanctioned for non-compliance with VIEW program requirements.
See the Job Accommodation Network site for an extensive list of accommodations by disability http://www.jan.wvu.edu/media/atoz.htm.

Some individuals are caring for family household members with a disability, and can only participate part-time, during particular hours, or on a flexible schedule. When an individual has such a limitation, the employment services worker must find work activities for the individual that do not conflict with the individual's care-taking responsibilities. **The Statement of Required Presence of Caregiver form (032- 03-0020-00-eng) will be used to verify** the family member's condition, as well as the necessity for care that limits the individual's availability for work.

Some individuals have disabilities that limit when they can carry out work activities. For example, some individuals have appointments for medical or mental health treatment, substance abuse treatment, or rehabilitation services such as physical therapy. When an individual has such appointments, the employment services worker will coordinate program assignments with the verified treatment-related appointments.

Examples: Ms. A lost her job because she frequently gave customers the wrong amount of change. It is determined that she has a learning disability that makes such transactions very difficult. The worker may arrange for training that will teach Ms. A techniques that will allow her to make accurate change despite her disability. Alternately, the worker might assist Ms. A in identifying suitable jobs that do not require this skill.

Ms. B is caring for a child with a disability and keeps losing her job because she is frequently called away from work by the child's school to deal with health-related emergencies. The worker helps Ms. B locate employment that allows the flexibility she needs.

Ms. C frequently leaves TANF due to employment, but just as frequently reapplies after losing her job. It is determined that a mental impairment prevents her from handling many work situations. The worker helps Ms. C find employment with fewer challenges and provides intensive job follow-up to help Ms. C work through any problems before they result in job loss.

1000.8 - VIEW Initial Assessments

A. Overview - Local Agency Responsibilities.

Each local agency will establish a process so that the initial assessment of VIEW clients includes the following:

1. An identification and evaluation of the participant's job readiness skills, occupational skills and interests, education, work history, and family/life circumstances including disabilities.
2. A determination of the participant's functional literacy if the participant does not have a GED, associate degree, or bachelor's degree.
3. An initial identification of the program activities that will be needed if the client does not find full time employment.
4. A detailed evaluation of child care and other supportive service needs.
5. The signing of the Agreement of Personal Responsibility (APR).

B. Scheduling the Initial Assessment Interview

1. **The ESW will assess the participant within 10 calendar days if possible after assignment to the queue, but in all cases within 30 calendar days of assignment**.
2. The assessment will take place during an individual, face-to-face interview between the participant and the ESW. The assessment interview will be scheduled at a time that does not conflict with work hours, or with previously scheduled medical or mental health appointments, whenever possible. When necessary, the worker can meet with the participant at a mutually agreed upon location outside the agency.
3. The ESW will send the participant a letter informing her of the date of the assessment interview. The letter will explain that appearance for the assessment interview is a condition of continued eligibility for TANF and that failure to attend the interview and sign the Agreement of Personal Responsibility (APR) may result in termination of the TANF grant. The letter will also tell the participant how to contact the ESW if she is unable to attend the interview and needs to reschedule it.

Note: When the VIEW client is a refugee in a locality served by a Refugee Resettlement agency, the local agency should initiate contact with the resettlement agency to coordinate employment and training services. (See Appendix I for refugee resettlement agency contact information and local agencies served.) The resettlement agency will be responsible for sending the local agency a copy of the refugee's Individual Employment Plan (IEP) which details the employment services the resettlement agency will provide. Some of these services may count toward the client's VIEW participation requirement, but the overall responsibility for insuring that the refugee meets VIEW program requirements, including assignment of additional hours if needed, and verification of participation, remains with the local agency.

Refugees who receive Refugee Cash Assistance (RCA) rather than TANF or TANF-UP are not eligible to participate in VIEW and are not referred to the VIEW program. The responsibility for meeting their employment and training needs rests solely with the refugee resettlement agency serving the locality.

C. Client Failure to Attend the Initial Assessment Interview

If the recipient requests the closure of her TANF case prior to the scheduled date of the initial assessment

appointment, the ESW will send a Communication form to advise the EW to close the case. If the recipient subsequently requests that the TANF case be reopened prior to the effective date of the case closure, she must complete the initial assessment appointment and sign the Agreement of Personal Responsibility before the TANF case will be reopened. The VIEW worker will make every effort to schedule this appointment prior to the effective date of the TANF case closure. The recipient will be advised that if she fails to attend the appointment, the TANF case will be closed based on her original request.

1. If the participant does not appear for the interview, the ESW must attempt to contact the client verbally. If the ESW determines from the contact that the participant did not have good cause for missing the appointment, or if the ESW is unable to contact the client verbally, the ESW must take action to begin the termination process. Based on agency procedures, the ESW will either send the client the VIEW Notice of Sanction/ Termination (032-02-0307) or the Advance Notice of Proposed Action within 3 business days of the missed appointment. Alternately, the ESW will immediately notify the EW who will send the ANPA within 3 business days of receipt of the notification.

2. The ANPA notifies the client that she must contact the ESW within 10 days from the date of the notice with documented good cause or the agency will take action to terminate the TANF case.

3. If the client decides to be interviewed by the ESW and to sign the APR, and does both prior to the effective date of case closure as specified on the ANPA, the case will not be closed.

D. Client Failure to Attend the Initial Assessment Interview After Having Signed the APR as a Condition of TANF Eligibility.

If a client's TANF case is closed because she refused to sign the APR, she must sign the APR as a condition of eligibility if she reapplies for TANF. If her TANF case is approved and she is referred to VIEW, and if she then fails to keep the appointment for the initial assessment interview, her case will be sanctioned, not terminated.

E. The VIEW Assessment Interview

The ESW will conduct a face-to-face interview with the client to determine her prior education, training, work experience, service needs and current job readiness. The interview will be strength-based, and will focus on the client's strengths in all areas of life and work rather than on deficits or barriers.

The interview will include:

1. An identification and evaluation of the participant's job readiness skills, occupational skills and interests, education, work history, and family/life circumstances. The assessment will focus on the skills and abilities the participant already possesses that would allow her to find immediate employment. The VIEW Assessment form (032-02-0303), or other assessment instrument approved by the agency's TANF/VIEW Field Consultant, will be used to record the information obtained in the interview.

2. A determination of the participant's functional literacy. If the participant does not have a GED, associate degree, or bachelor's degree, her functional literacy will be determined through use of the Information Sheet (032-03-0311) or other literacy assessment tool such as the Test of Adult Basic Education (TABE). Prior test scores such as the TABE, which

establish an approximate educational/basic literacy level, can be used in place of the Information Sheet if the score is no more than one year old. [Note: The literacy determination can be made at the initial assessment, or can be conducted later; in all cases, it must be completed by the first reassessment].

3. An initial identification of the client's employment/educational goal(s) and the types of program assignments that may be completed throughout the client's VIEW participation. The VIEW Assessment form, Part 2 (032-02-0303) will be used to record this information.

4. A detailed evaluation of child care and other supportive service needs.

5. An initial discussion of possible disabilities of the client or family household member that may interfere with the client's ability to participate in VIEW and/or to work. A copy of the "Do You Have a Disability" form must be in the case record.

   a. All VIEW participants must be offered screening for learning disabilities, mental health disabilities, and alcohol and substance abuse within 90 days of signing the APR. Examples of valid screening tools can be found in "Screening for Employment Barriers: Issues and Tools" which can be accessed from the TANF Guidelines and Procedures page on SPARK at **http://spark.dss.virginia.gov/divisions/bp/files/tanf/policy/employmentbarriers.pdf**

   b. Participants whose screenings indicate the possible presence of a disability will, with the client's agreement, be referred for an in-depth evaluation.

   c. All individuals, including those who choose not to be screened, and those who have been screened and referred for an in-depth evaluation, will be assigned to an appropriate program activity based on the initial assessment.

   d. If the in-depth evaluation indicates the existence of a disability, treatments and/or services to address the disability will be made part of the client's required program assignments and will be recorded on the Activity and Service Plan.

6. An evaluation of other issues that may clearly affect program participation or employment. Such issues may include verified barriers to employment.

   Verified barriers to employment include mental and physical disabilities, learning disabilities, substance abuse and domestic violence. Barrier codes are entered into ESPAS after verification of the barrier by another agency or professional qualified to identify the specific barrier. Verification may be provided by agencies such as domestic violence shelters or substance treatment programs, as well as by professionals qualified to assess learning disabilities, health or mental health conditions. In all cases in which the worker receives documented confirmation of the condition or situation from the referral source, the worker will enter the appropriate code or codes:

   01 – Learning Disability
   02 – Domestic Violence
   03 – Mental Health
   4 – Physical Disability
   5 – Substance Abuse

   Note: The barrier codes are used to record a client's verified barrier(s) and are

considered in making program assignments. They are not the basis on which hours of participation can be reduced except in the case of domestic violence when the specific VIEW assignment is identified as putting the family's safety in jeopardy. All other reductions in the hours of participation must be based on a Medical Evaluation signed by a medical professional. (See 901.2C)

7. An explanation to the client of the following:

   a. program goals and philosophy

   b. program requirements, including an explanation of the responsibilities and expectations of participants in the VIEW program

   c. the right to disclose a disability to the agency, and the benefits of doing so

   d. role of the Agreement of Personal Responsibility in describing the mutual responsibilities of the client, worker, and agency

   e. the consequences of not signing the Agreement of Personal Responsibility

   f. the beginning of the two-year limitation on the receipt of TANF benefits which begins the month after the month the Agreement of Personal Responsibility is signed

   g. the requirement to be involved in work activities throughout the two-year period of VIEW participation

   h. the benefits of immediate employment (eligibility for the enhanced disregard, increase in skill level, employability, and income)

   i. the benefits of "banking" months in order to save TANF eligibility

   j. penalties for failure to comply with program requirements including sanctions and consequences for hardship exception requests

   k. good cause reasons for not complying with program requirements

   l. the requirement to respond to all agency correspondence

   m. the name and phone number of the ESW and/or other agency contact

   n. the availability of the VIEW Transitional Payment (VTP) as an incentive for retaining employment

8. Signing the Agreement of Personal Responsibility (APR)

9. Following the interview, the ESW will assign the client to the appropriate program activity. The assignment will be located within a reasonable distance of the participant's home. The Activity and Service Plan (032-02-0302-05) will be used to record this information.

1000.9 – VIEW AGREEMENT OF PERSONAL RESPONSIBILITY

A. The Agreement of Personal Responsibility (032-03-0310) outlines the participant's responsibility:

1. to seek employment to support her own family;
2. to participate in assignments made by the ESW;
3. to notify the ESW of any change in circumstances which would impact the participant's ability to satisfactorily participate in the program;
4. **to notify the eligibility worker of changes as indicated on the Change Report form and the consequences for withholding or giving false information.**
5. to accept a job offer. Refusal to accept a bona fide job offer will result in a full household sanction;
6. to arrange and find transportation and child care. The ESW will assist the participant when the participant has tried but has been unable to find transportation and child care.

Additionally, it provides notification to the client of the two year time period for receipt of TANF benefits, and the enhanced disregards available to the participant if unsubsidized employment is obtained.

B. The participant and the ESW will sign a new Agreement of Personal Responsibility (APR) at the time of the initial assessment; at each subsequent referral following approval of a TANF reapplication; at re-referral following a period in which the individual was exempt; and when a former VIEW participant whose TANF case closed while she was subject to a VIEW sanction reapplies and subsequently returns to the VIEW program after the sanction has been lifted. (The sanction will not be lifted until the minimum fixed sanction period has been served *and* the individual has completed an act of compliance.) If the client refuses to sign the APR at the initial assessment, the worker must sign it and date it. The worker must note on the APR that the client refused to sign. The worker must also document the case record that the client refused to sign.

Examples of when a new APR must be signed:

Example 1: At each reapplication for TANF.

Client is approved for TANF effective 08/11/07 and is mandatory for VIEW participation. Client signs the APR 09/03/07 and remains on TANF as a VIEW participant until 03/31/08 when the TANF case is closed. Client reapplies for TANF and is approved effective 06/01/08. Client is again mandated to participate in VIEW and is referred using a VA code. Client must sign a new APR. Failure to sign the APR will result in case closure.

Example 2: In a TANF UP household, each time one of the parents is referred.

TANF-UP case is approved effective 09/01/07 and the dad is mandatory for VIEW. The mom is exempt based on caring for a child under 12 months old. The dad signs the APR on 09/15/07 and eligibility continues. The child turns 12 months old on 12/23/07, and mom is referred to VIEW. She is required to sign an APR, but refuses. The TANF case will close.

Example 3: In an ongoing case, each time an individual cycles in and out of the VIEW program due to exemptions.

TANF is approved effective 03/01/07; client is mandatory for VIEW. The client signs the APR on 03/11/07. Client provides a medical on 06/04/07. (Medical exempts the client for 06/04/07 – 09/04/07). The EW will code the client as a V5 on AEGNFS and the ESW will close the ESPAS enrollment with a closure code of 02.

Client is released to return to work on 09/05/07 and is again referred to VIEW (using a "VA" code). Client must sign a new APR. If she refuses, the TANF case will close.

Example 4: When the TANF case is closed due to the client's failure/refusal to sign APR, the client must sign a new APR as a condition of eligibility at reapplication for TANF.

TANF is approved effective 12/15/07. Client fails, without good cause, to appear for the initial assessment on 12/24/07. The TANF case is closed effective 01/31/08.

Client reapplies 05/14/08, and does not meet a VIEW exemption. (If the client is exempt at reapplication, she is not required to sign the APR as a condition of eligibility.) She must sign a new APR prior to case approval. If the client fails to sign the APR, the TANF application will be denied. If the client signs the APR then fails to attend the initial assessment interview after TANF case approval, she (and the TANF case) will be sanctioned.

Example 5: After reapplication for TANF **(**TANF case was closed while client subject to sanction) when the client has served the minimum fixed period and completed an act of compliance to cure the sanction.

Client is sanctioned for 5/1/08 – 7/31/08. Client requests closure of the TANF case on 8/15/08. TANF case closed effective 8/31/08 with sanction still in place as client has not completed an act of compliance.

Client reapplies 10/10/08. EW advises client to contact ESW to cure sanction. Client contacts the ESW on 10/10/08 and completes an act of compliance. ESW advises EW to lift sanction effective 10/10/08. After the TANF case is approved, the ESW will schedule a reassessment appointment with the client to sign a new APR and assign the client to VIEW activities. The EW will enter the new APR date on the AEGNFS screen and run ED/BC.

Note: If the TANF case had not closed (remained open in a suspended status throughout the sanction period), a new APR would not have been required. The ESW would review the 24-month clock and advise the client of the number of months left on the clock as part of the reassessment process when the client resumes her VIEW participation.

C. If the participant chooses not to sign the Agreement or fails to keep the initial assessment appointment at which the APR is to be signed, the agency will take action to terminate the participant's TANF grant. If a TANF-UP participant chooses not to sign the Agreement, the entire household will have its TANF benefits terminated regardless of whether another eligible TANF-UP participant is in the household.

D. If the Agreement was signed as a condition of TANF eligibility, the household will be sanctioned rather than terminated for missing the initial assessment appointment.

E. An individual who has refused to sign the Agreement of Personal Responsibility and has had her case closed must sign the APR prior to approval of the TANF application as a condition of eligibility. The signed APR may be obtained by either the EW or the ESW. (Note: This is the only instance in which the EW may obtain the signed APR). Local agencies should develop a procedure by which the APR is signed as quickly as possible to ensure that the processing of the TANF application will not be delayed. The failure of the client to sign the APR in these circumstances will result in the denial of the application.

In these situations, the queue or start date entered in ESPAS will be the TANF approval date rather than the date the APR was signed. However, the two-year clock will begin the first of the following month after the APR was signed. **The Employment Services Worker will adjust the two-year clock.**

1000.10 - TERMINATION OF TANF BENEFITS

If a **mandatory** participant fails to report for his initial assessment, or refuses, without good cause, to sign the VIEW Agreement of Personal Responsibility, the household's TANF benefits will be terminated. **Note: If a non-parent caretaker who is receiving TANF assistance fails to report for his initial assessment, or refuses, without good cause, to sign the VIEW Agreement of Personal Responsibility, the non-parent caretaker's needs will be removed from the grant and the TANF case will remain open as a child-only case.**

A. Notice of Termination Procedures

1) If the participant does not appear for the interview, the ESW must attempt to contact the client verbally. If the ESW determines from the contact that the participant did not have good cause for missing the appointment, or if the ESW is unable to contact the client verbally, the ESW must take action to begin the termination process. Based on agency procedures, the ESW will either send the client the VIEW Notice of Sanction/Termination (032-02-0307) or the Advance Notice of Proposed Action (ANPA) within 3 business days of the missed appointment. Alternately, the ESW will immediately notify the EW who will send the ANPA within 3 business days of receipt of the notification.

2) The Advance Notice of Proposed Action will inform the participant that she failed to meet the specific requirement and that in order to establish good cause the participant must contact the ESW within 10 days from the date of the notice to discuss the reasons for the claim of good cause. Merely contacting the EW or ESW does not constitute good cause. The Notice will inform the participant that her TANF benefits will be terminated if good cause does not exist. If the participant contacts the ESW within the 10 day grace period (with or without good cause) and is given another initial assessment appointment date, the appointment date will be documented in the case record. If a new appointment letter is sent, it should state that the termination will be imposed if that appointment is not kept. A new Advance Notice of Proposed Action is not required.

3) If the participant fails to contact the ESW within 10 days to establish good cause or does contact the worker but does not present good cause, the EW will proceed to terminate the household's TANF benefits. The ESW must complete a new communication form, and a copy must be sent to the EW to stop the termination, if the client presents acceptable documentation of good cause for the non-compliance.

4) The ESW will not enter the termination in the automated system (ESPAS) until after the effective date of the termination of TANF benefits.

B. Documentation For Failure To Report For The Initial Assessment

1) The ESW will notify the participant of the scheduled interview.

2) If the participant fails to keep the appointment, the ESW must document the failure in the contact log.

3) The ESW must document in the contact log that a telephone call or personal contact was attempted.

C. Documentation for Failure to Sign the Agreement of Personal Responsibility

1) The ESW must document in the contact log that the participant refused to sign, or did not sign, the Agreement of Personal Responsibility.

2) Based on the client's refusal, or failure, to sign the Agreement of Personal Responsibility, the ESW must take action to begin the sanction process. Based on agency procedures, the ESW will either send the client the VIEW Notice of Termination (032-02-0307) or the Advance Notice of Proposed Action (ANPA) within 3 business days of the missed appointment. Alternately, the ESW will immediately notify the EW who will send the ANPA within 3 business days of receipt of the notification.

1000.11– VIEW ACTIVITY AND SERVICE PLAN

A. Based on the information obtained during the assessment, the ESW and participant will develop an Activity and Service Plan. **While the development of the Activity and Service Plan is a joint activity, the local agency, in accordance with program guidance, will make the final decision regarding which component assignments are made and the sequence of assignments.**

The Activity and Service Plan will detail:

1) the participant's current assignments, and specific responsibilities of the participant and the agency, including but not limited to the expected levels of a) participation, b) attendance and/or c) the requirement to return information to the ESW and report changes which impact employment and/or participation.

2) the supportive services needed by the individual to comply with program requirements. The Activity and Service Plan may take the place of a service application for child care.

3) a statement explaining the reason(s) for assignment to Pending or Inactive, if applicable, and a list of the steps planned to resolve the issues leading to that assignment.

4) a description, begin and end dates, and planned weekly hours of the participant's assignment or assignments.

Note: The Activity and Service Plan developed at the initial assessment will include any assignments for the month of the assessment (which may be a partial month), and the next three full months. The ESW will explain to the client that the assignments, beyond the initial job search, are designed to increase her employability if she does not find employment during the job search. Additionally, the ESW will explain to the client that the Activity and Service Plan will be updated to show employment as her VIEW component if her job search is successful.

5) the requirement that the participant contact the ESW if she is considering quitting a job or, if she believes she is in danger of being fired from a job. This information will enable workers to either help the participant retain that position or obtain other employment.

6) Reasonable accommodations needed by an individual to fulfill participation requirements based on recommendations developed as part of an evaluation by a qualified professional.

B. The ESW must complete a new Activity and Service Plan at initial assessment, reassessment, or whenever there is a change to the participant's activity assignments. Modifications to the Activity and Service Plan due to changes in assignments will not affect the TANF two-year time limitation.

1000.12 - SUPPORTIVE SERVICES

Supportive services are provided to remove barriers to the individual's participation and to stabilize employment. The provision of supportive services is contingent upon the availability of funds based on local VIEW allocations. Spending limits for supportive services are determined by the local agency and will be described in the agency's Standard Operating Procedures (SOP). Spending limits on supportive services will be applied equitably to each participant needing a specific service. Agencies are encouraged to explore alternatives to removing barriers if supportive service funds are limited.

If supportive services are essential for participation, and neither the participant nor the agency can provide them, and no alternatives are immediately available, the participant will be placed in an "Inactive" status for up to 90 days, which will prevent the clock from counting against the 24 month time limit. (See 1000.16 regarding limitations on the use of inactive status.) It is expected that the local agency and the participant will work together to resolve any barriers to participation.

A. Duration of Supportive Services

1) Supportive services may be provided for as long as the participant is in a VIEW activity, including full or part time employment, and the TANF case is open. Supportive services may also be provided when the TANF case is suspended due to a sanction in order to allow the client to comply with program requirements.

The participant may be eligible for transitional supportive services once the TANF case is closed. See 1000.22, Transitional Services. Any services that continue to be provided to the client after TANF case closure must be provided as transitional services.

B. Employment Service Worker Responsibilities

1) It is the responsibility of the ESW to assist the applicant/recipient in meeting her service, as well as employment, needs. These needs may be met directly by the ESW or by other local agency staff or through a referral to another service provider.

2) When providing social services to recipients, the Activity and Service Plan may replace the Service Application.

C. Supportive Services for Recipients

There are five types of VIEW supportive services that the local agency can provide directly or can purchase. These services are child care, transportation, medical/dental, program and/or work related expenses and emergency intervention.

Participants who have been sanctioned **or found guilty of an Intentional Program Violation** are entitled to supportive services in order to maintain their employment.

Participants who have been sanctioned may also receive supportive services when the participant is performing a verifiable act of compliance as described in 1000.21. **For participants who have been sanctioned, supportive services will be provided, based on client request, for a period corresponding to the time needed to perform the appropriate act of compliance. If the client**

does not perform a verifiable act of compliance despite provision of the supportive services, supportive services will not be authorized again for the same sanction. In such a situation, it will be the responsibility of the client to arrange and pay for any supportive services needed to cure the sanction.

1) Child Care

Child care services are provided to enable the participant to gain and/or keep employment or to participate in program activities.

a. Arrangement for and/or payment of child care as a supportive service will be provided only when the participant is unable to obtain child care on her own at no cost.

b. Participants who are parents of school age children are expected to search for a job during the hours that the children are in school. However, if a job interview must take place outside of school hours, child care may be authorized.

c. Participants who need child care and cannot arrange to find their own may be provided assistance, including payment within child care **guidance** as found in Volume VII, Section II, Chapter D, of the Services manual.

This payment may include the cost of transportation when transportation services are provided by the child care provider and the total cost of all services provided by the child care provider does not exceed the Maximum Reimbursable Rate.

d. Participants who have been sanctioned are not entitled to child care service while in the sanction status unless it is needed to maintain employment. However, an individual who has been sanctioned may receive child care service upon request, based on the terms outlined above, if the service is necessary in order for the participant to perform a verifiable act of compliance.

2) Transportation and Related Services

Transportation services are provided to enable participants to travel to and from authorized VIEW activities or employment. The need for transportation must be linked to needs identified on the participant's Activity and Service Plan. The participant must be regularly attending the component activity, and, if in an education component, making satisfactory progress, in order to continue receiving transportation services.

a. The participant will have the primary responsibility to arrange transportation for employment or to participate in activities required by the Agreement of Personal Responsibility. Transportation services will be provided only when the participant is unable to make necessary arrangements.

b. Transportation can be provided by any of the following means:

1) Individuals other than public conveyors. In this circumstance, payment is made to the individual provider. Such payment must be pre-authorized. A reimbursement-type purchase order may serve as a pre-authorization;

2) Agency or individual public conveyance sellers; or

3) Commercial establishments. For example, an agency could arrange with a gas station to accept vouchers for a client needing that type of transportation assistance. Through the purchase order/invoice system, the station would receive payment.

c. Criteria for approval of vehicle repairs.

1) A request for payment of a vehicle expense or repair can be approved if the following conditions are met:

a. public transportation is not available;
b. the agency cannot provide transportation and there are no other available resources; and
c. the general condition of the vehicle justifies the cost of the repairs;

2) The participant must provide documentation of:

a. required insurance coverage for the vehicle if the request is for repair, tires, etc;
b. a valid drivers license; and
c. a registration showing the vehicle is in the participant's name. The vehicle may be co-owned if the participant's name is also on the registration. In the case of TANF-UP households, the registration may be in either one of the participant's names or both their names.

3. Medical/Dental Services

A. Payment for medical/dental services not covered by the state Medical Assistance Plan (Medicaid) may be made if the services relate directly to VIEW activities or employment. The need for medical services must be documented on the Activity and Service Plan. The participant must be making satisfactory progress and regularly attending the assigned component activity in order to continue receiving medical/dental services.

B. Examples of medical/dental services include medical statements or other necessary medical verifications or evaluations, including those requested to determine if a client has a disability that affects program participation, dentures, glasses, orthopedic shoes, and other items required prior to entry into jobs, work-sites, or other components.

4. Program Participation and Work-Related Expenses

This service provides assistance to the participant with employment-related expenses or expenses incurred through participation in an approved VIEW component(s). The ability of a local agency to pay participation or work-related expenses is based on the

availability of funds and local resources. The agency may wish to restrict some participation or work-related expenses to one time only purchases. Each local agency is encouraged to develop additional guidance and procedures for approving expenses and to include them as part of the Standard Operating Procedures.

A. Criteria for Assessing Need

The ESW will use the following criteria when assessing the need for participation or employment-related expenses for the VIEW participant:

1. The expense is necessary to enable the individual to participate in approved activities or employment;
2. The need for expenses is clearly linked to the needs identified on the APR, Activity and Service Plan, or, in the case of assessment, in the case record; and
3. The participant must be making satisfactory progress in the component/activity.

B. Participation and work-related expenses which are reimbursable include, but are not limited to:

1. Fees for birth certificates;
2. License fees;
3. Registration/graduation fees;
4. Picture ID costs;
5. Uniforms or other clothing or shoes;
6. Safety equipment and tools;
7. Car repairs and insurance.

C. Additional work-related expenditures may be made to enable a participant to accept a job offer or maintain employment. These expenses include, but are not limited to:

1. purchase of an initial set of tools or equipment;
2. uniforms;
3. safety equipment;
4. professional fees and licensing required for the occupation.

5. VIEW Emergency Intervention Services

This service provides assistance during crisis situations which may affect the individual's participation in an activity or employment. Examples are emergency provisions of food/utilities, or other items necessary for the client to gain and/or keep employment or participate in other VIEW activities. Automobile expenses are not covered under this section. VIEW emergency intervention services are intended to assist the participant in gaining and/or retaining employment. They are not intended as a method of funding assistance for any emergency that may arise. The local agency should include **guidance** regarding the use and limitations of VIEW Emergency Intervention Services in its Standard Operating Procedures.

1000.13 - PROGRAM COMPONENTS - CORE WORK ACTIVITIES

VIEW program components include the following core work activities – job search, job readiness, unsubsidized employment, subsidized employment (FEP), the community work experience program (CWEP), the public service program (PSP), on-the-job training (OJT), and vocational education and training. All program components must be monitored monthly for attendance of scheduled hours. In addition, education and training activities must be monitored for satisfactory progress at periodic intervals.

A. JOB SEARCH

Job Search is a structured activity carried out over a defined time period during which the participant must spend a specified number of hours in job search activities. Job search and job readiness may be assigned as appropriate and recorded in ESPAS, but the combined hours of job search and job readiness assignments will count toward the work participation rate for no more than 180 hours in a 12-month period. Hours assigned to job search/job readiness can be counted toward the work participation rate for four consecutive weeks. Additional hours of job search/job readiness may be assigned, but no hours will be counted toward participation unless there has been an intervening time period of at least one week after each 4 consecutive week assignment.

For federal reporting purposes, when a participant successfully completes a 4-week job search and is counted in the participation rate for that month, 120 hours of the total 180 hours available for job search/job readiness in a 12-month period are considered to have been used. The client also has used up 4 consecutive weeks of job search and cannot be assigned again until at least one week has passed. After that time, assignments to additional hours/weeks of job readiness and/or job search can be made in conjunction with other program activities in order to meet both the core work activity and the 35 hour overall participation requirement, but no more than the remaining 60 hours can be counted toward participation in the 12-month period.

Assignments to hours of job search/job readiness beyond those associated with the initial job search should be made in conjunction with other program activities so that both the core work activity requirement and the 35 hour overall participation requirement are met.

NOTE: Federal requirements limit countable hours of job search/job readiness for **a single parent** with a child under age 6 to 120 hours in a 12-month period. A successful 4-week job search will use up 80 of the total 120 hours available in the 12-month period as well as 4 consecutive weeks of job search/job readiness. No more than the remaining 40 hours can be counted toward participation through the end of the 12-month period.

1. Overview

   a. A maximum of 35 hours can be assigned each week.

   b. The number of hours for participant job search required must be determined on an individual basis. The number of required hours set on an individual basis should be determined based upon criteria such as other work or training activities in which the participant is involved, barriers such as language or disability of the participant or family household member, other barriers including employment conditions within the locality, and availability of transportation or child care.

c. For the purpose of discussing progress of the job search, and ensuring that the contacts made are reflective of the participant's job skills, weekly or bi-weekly contact between the participant and the ESW is recommended.

d. Local departments must work with public and private providers of job development/job placement services, including the VEC, the Workforce Investment Board (WIB), and the local Department of Economic Development to facilitate job development and job placement.

2. Outcome of the Job Search

a. A participant must accept a bona fide offer of employment. Participants who refuse to accept a bona fide offer of employment will be sanctioned.

b. If the participant finds full-time employment paying at least minimum wage, the job search will terminate.

c. If the participant finds part-time employment paying at least minimum wage, the ESW may decide whether to terminate the job search or require the individual to continue looking for full-time employment. The participant will be required to fully participate in other work activities designed to assist her in obtaining full-time employment.

3. Assignment to Job Search

a. Participants who are not employed full-time and earning at least minimum wage at the time the Agreement of Personal Responsibility is signed, including participants who are self-employed, must be placed into job search. The length of the initial job search assignment will depend on the type of job search and the point in the month at which the assignment is made. See 1000.4, VIEW Program Flow.

b. In some circumstances, the initial assignment to job search and/or job readiness may be waived. See 1000.4C.

c. A participant who has not found full-time employment paying at least minimum wage 60 days prior to the end of her 24-month TANF time limitation must be placed in a job search component in conjunction with any other program assignment. This assignment will continue until the participant leaves TANF at the end of the two- year time period.

4. Elements of the Job Search Component

When developing the Job Search assignment, the worker must incorporate the following elements based on the participant's needs:

a. techniques to help the participant identify good work attitudes, strengths and job skills/transferable skills.

b. job seeking skills to train the participant to successfully seek and obtain appropriate employment. This instruction/ guidance will enable participants to market themselves in a job interview and on the job. Subjects include, but are not limited to, development of job leads, job interviewing techniques, discussion of local labor market information, employer expectations, and accurate completion of applications.

c. activities and opportunities for the participant to build self-esteem. A group setting is one of the best ways to build self-esteem. Brief periodic meetings may be held to allow the group members an opportunity to report progress, discuss problems and receive specific help with job search techniques.

d. use of the telephone as a primary employer contact to develop job leads and obtain interviews. Developing and writing a good phone script and practicing employer contacts will be an effective aid for the participant in the job search.

5. Employer Contacts

a. The participant has the responsibility to submit enough applications/resumes and participate in enough job interviews to meet the hourly job search assignment. (NOTE: travel time between interviews, but not to the first interview or from the last interview, can be included in determining hours of job search). The ESW provides support and direction in these areas throughout the job search assignment. If, however, the individual has a verified disability or language barrier that limits the ability to arrange for the required number of job search hours, the ESW must assist the individual in arranging for the needed contacts, reduce the number of job search hours required, or both.

b) To qualify as an employer contact, five conditions must be met:

(1) The participant must present herself to an employer as being available for work;

(2) The place of employment must be geographically accessible to the client on a regular basis. Contact with an employer located in another community or state out of commuting range from the client's place of residence will not count as an employer contact.

(3) The employer must ordinarily employ persons in areas of work for which the participant is reasonably qualified by means of experience, training or ability;

(4) The participant cannot count the same employer more than once during a given job search period unless she applies for different positions; and

(5) Contacts with employers will only be in the form of face-to-face interviews or by submission of applications or resumes.

c) All participants must register with the nearest Virginia Employment Commission Office. Registration with the Virginia Employment Commission will be considered one employer contact.

d) The participant will report to the ESW during the job search period and must sign the VIEW Job Search Form attesting to the **number of job search hours completed.**

e) The ESW may contact any employer listed on the VIEW Job Search Form to verify that the participant made a contact.

f) Employer's signatures are not required on the Job Search form.

6) Types of Job Search

There are three types of recipient job search: Group Job Search, Job Club, and Individual Job Search.

a) Group Job Search

Group job search brings participants together for group activities and/or classroom instruction related to job search **hours** and job retention.

(1) Classroom instruction provides the participant with sound skills for finding and keeping employment.

(2) The participant in group job search is bound by the participation requirements of the specific group activity. The number of weeks and **job search hours** required of a participant in group job search cannot be less than the requirements of individual job search.

b) Job Club

(1) Job Club is a tightly-structured, intensive program including instruction in job search methods, extensive use of the telephone to obtain job leads and interviews, peer support, direct monitoring of participant activities, and self-placement through job search. In order to be classified as a Job Club, the job search activity must be operated using the VDSS guide, "Finding Work: A Manual for Successful Job Club Operation". VDSS will provide a locality with on-site Job Club training, the VDSS guide, and other materials based on the locality's request to the Virginia Department of Social Services, Division of Benefit Programs, Economic Assistance and Employment Program Manager.

(2) The participant in Job Club is bound by the participation requirements of the activity. The number of weeks and job search hours required of a participant in Job Club cannot be less than the requirements of individual job search.

c) Individual Job Search

Individual job search is independent job search carried out by the participant. For individual job search to be successful, it is necessary for the ESW to assist the participant in understanding the elements of a successful job search. At a minimum, the ESW should assist the client in developing a resume, in learning how to accurately complete a job application, and in utilizing proven job seeking methods and interview techniques.

B. JOB READINESS

The purpose of job readiness training is to prepare the participant for employment or program component participation so that she can be competitive and succeed in the labor market. Job readiness training may be offered before, in conjunction with or after the job search assignment. Unsupervised study or homework assignments cannot be counted as hours of job readiness. While assignment to job readiness and/or job search should be based on the needs of the client, the combined hours of job search and job readiness assignments will count toward the work participation rate for no more than 4 consecutive weeks. Additional hours of job search/job readiness may be assigned, but no hours will be counted toward participation unless there has been an intervening time period of at least one week after each 4 consecutive week assignment. Additionally, no more than 180 hours of job search/job readiness can be counted toward participation in each 12-month period. Assignments to additional hours/weeks of job readiness and/or job search beyond the initial assignment should be made in conjunction with other program activities so that both the core work activity requirement and the 35 hour overall participation requirement are met. Note: The assignment to the additional hours/weeks of job search and/or job readiness should be made only after at least one week has elapsed since the participant completed 4 consecutive weeks of job search and/or job readiness.

For federal reporting purposes, each time a participant successfully completes the initial 4-week job search/job readiness activity and is counted in the participation rate for that month, 120 hours of the total 180 hours available for job search/job readiness in a 12-month period are considered to have been used. The client also has used up 4 consecutive weeks of job search and cannot be assigned again until at least one week has passed. After that time, the client can be assigned to job readiness/job search as needed to facilitate her participation in the program. **However, only 60 additional hours can be counted** toward participation **for the remainder of** the 12-month period.

NOTE: Federal requirements limit countable hours of job search/job readiness for participants with a child under age 6 to 120 hours in a 12-month period. A successful 4-week job search will use up 80 of the total 120 hours available in the 12-month period as well as 4 consecutive weeks of job search/job readiness. **However, only 40 additional hours can be counted** toward participation **for the remainder of** the 12-month period.

1) Job readiness training includes activities to assist the participant in program participation by helping her recognize and overcome personal and family problems which may be a barrier to accomplishing her employment and training goals. Job readiness activities also prepare the participant for work by assuring that she is familiar with general work place expectations, work behaviors, and attitudes necessary to compete successfully in the labor market. Job readiness should also address the economic benefits of going to work. These include wages above the TANF grant, the enhanced earned income and savings disregards, and the Federal Earned Income Tax Credit.

2) Job readiness topics may include, but are not limited to, communication skills, life skills, motivational training, problem solving, assertiveness, nutrition, money management, time management training and other activities that enhance specific work place expectations and behaviors. Substance abuse treatment, mental health treatment or rehabilitative activities may also be counted as job readiness based on the same conditions and time limits that apply to job readiness generally.

3) Job readiness training may be conducted through workshops or seminars and through treatment programs, as well as through one-on-one counseling.

C. UNSUBSIDIZED EMPLOYMENT

1. Full Time Employment

a. Unsubsidized employment is employment for which the participant is paid at least minimum wage and for which no government funds are used to subsidize the wages earned by a participant. Full-time employment is employment of 30 hours per week or greater.

b. A participant employed at least 30 hours per week and earning at least minimum wage is not required to participate in any other VIEW assignment, but she must respond to all correspondence from the case manager and keep all scheduled appointments for reassessments. Each assignment to full-time employment should be for a period of six months.

c. Employment at less than minimum wage does not meet the definition of employment and is not a countable work activity. Therefore, the participant must be assigned to other activities.

2. Part Time Employment

a. Part-time employment is employment of less than 30 hours per week, at which the participant earns at least minimum wage. **The participant must also be assigned to a concurrent program activity so that the concurrent activity and the part-time employment assignment meet the participation requirement.**

b. A participant working part-time **may** be assigned to job search **as appropriate. However, the restrictions on counting job search/job readiness for federal participation limit the use of job search as a concurrent program activity for other components, including part-time employment.** If the maximum 120/180 hours of job search/job readiness have already been met in terms of federal reporting, additional hours **of job search/job readiness participation** will not be reported or counted in determining the agency's participation rate.

3. Self-employment

a. If a participant becomes self-employed, the participant must provide documentation to show she is legitimately engaged in self-employment. The information could include, but is not limited to the following information: the kind of business, location, hours of operation, source of funding, prospective customer base, earnings, business license, if applicable, and lease or agreement if space is rented.

b. If a participant enters the VIEW program and states she is self-employed and has been self-employed for less than a year, the participant must provide the above documentation including copies of rent receipts, appointment books or any other documentation that will show the participant is engaging in a legitimate business.

If the participant states she has been self-employed for a year or more, a copy of the previous year's income tax return will suffice to show that the participant is engaged in a legitimate business. If the tax return is provided and the worker is satisfied with the documentation, the up-front job search can be waived if the participant is engaged in self-employment for 30 or more countable hours of self-employment per week.

c. For self-employment to be a countable activity for VIEW, the participant must be paid at least minimum wage. Countable weekly hours are actual hours worked, or hours computed as follows, whichever is less:

Determine the monthly net income by subtracting the monthly business expenses from the monthly gross income. The VIEW case record must contain a copy of the verification of the gross income and business expenses. This will apply even when the information is contained in the TANF case record.

Divide the monthly net income by the minimum wage.

Divide this figure by 4.33 and round the result down to the next whole number. Compare the computed hours to those that are verified as actual hours of participation. The countable hours are the actual hours worked (if verified by a source other than the client), or the hours computed above, whichever is less. If the countable hours are 30 or more, the assignment to (full-time) self-employment should be for a period of six months. If the countable hours are less than 30, the client must be assigned to additional activities to meet participation requirements**.**

Example: Ms. A is self-employed as a nail technician. She provides a signed statement from the property owner verifying that the business is in operation 40 hours per week. Her gross income is **$550** for the month and she has business expenses of $340 per month.

$ **550** – gross income
- 340 – business expenses
$ **210**– net monthly income
÷ **7.25** – minimum wage
28.97
÷ 4.33
6.69 – will be rounded down to **6** countable hours per week

Only **6** hours per week are countable. Ms. A must be assigned to an additional **29** hours per week in other activities (with at least **14** of the additional hours in another core work activity) so that her total countable hours equal 35.

4. Employment and the TANF Earned Income Enhanced Disregard

a. A TANF recipient who is employed in an unsubsidized job at the time she signs the Agreement of Personal Responsibility at the initial VIEW assessment will receive the TANF enhanced earned income disregards the following month. Enhanced disregards allow a participant to remain eligible for TANF benefits as long as the participant's total household income does not exceed 100% of the federal poverty limit for the size of his household or 150% of the federal poverty level for TANF-UP households.

b. Participants will receive the enhanced earned income disregard only after they have entered the VIEW program and signed the Agreement of Personal Responsibility.

c. A participant who obtains employment while in the VIEW program will receive the VIEW enhanced earned income disregard the month following the month of employment.

d. Eligible TANF recipients **(in ongoing TANF cases)** who are employed prior to referral to VIEW should be treated as a priority referral and served as soon as possible so that they may begin to receive the enhanced disregard **or be evaluated for eligibility for a VIEW Transitional Payment**. **The TANF recipient should be seen and the initial VIEW assessment completed prior to monthly ADAPT cut-off whenever possible to avoid potential issues with TANF Benefit Adjustment and the opening of the VTP.**

D. SUBSIDIZED EMPLOYMENT - FULL EMPLOYMENT PROGRAM (FEP)

Subsidized employment is employment in which government funds are used to directly subsidize the participant's wages. Subsidized employment is designed to provide training while the participant works on the job.

The Full Employment Program is a work activity in which a participant is placed in a public or private sector job and is paid an hourly wage for the work done. The Department of Social Services will pay the employer a predetermined, fixed stipend of $300 per month. TANF benefits are not paid to the participant during the time the employer is receiving a stipend except when the participant has not worked his scheduled hours for reasons beyond his control.

1. The goal of FEP – The overarching goal of this work activity is for the employer to retain the participant at the completion of the training period. The placement should provide the participant the opportunity to gain work experience, develop job skills and enhance work place social skills. To increase the likelihood that the participant will be hired on a permanent basis for the job and to promote further FEP placements with the employer, the worker should make every effort necessary to insure that the participant's skills, abilities, and interests are a good match for the job description for the placement.

2. FEP Placements - VIEW participants who have been unsuccessful in obtaining unsubsidized employment by the first assessment following the initial job search activity will be screened for placement with a FEP employer. Participants who are referred to VIEW and have accrued months on the current AECLOC (24-month VIEW participation clock) may be immediately placed in FEP. VIEW participants in a FEP placement are required, at a minimum, to work a monthly average of at least 20 hours a week. VIEW participants in a FEP placement of 20 hours a week must also be assigned to 15 hours in another work activity. **Each assignment to FEP will be for a period of six months.**

3. Suitable Placements - If the ESW does not have a suitable FEP or on-the-job training placement available, the participant will be immediately screened for placement in a suitable community work experience site.

   Suitable is defined as follows:

   a. The worker has evaluated a good match between the participant's skills, abilities, and

interests and the position description;

b. The employer agrees to provide needed training to do the job; and

c. The net monthly wages (take home pay) estimated by the employer exceed the amount of monthly TANF benefits the participant was last paid. The ESW can obtain the most recent TANF payment amount by reviewing the participant's TANF payment history in ADAPT or by contacting the EW.

4. Criteria for the FEP Participant

a. The participant must be able to perform the minimum requirements for entry into the job and be capable of performing the duties of the job with the provision of training by the employer at the end of the placement.

b. The supportive services needed by the participant can be provided.

c. The participant may participate in FEP more than one time but must not have been previously sanctioned while assigned to a FEP placement.

d. A participant cannot enter a FEP placement if she is in the process of being referred for a 2nd or 3rd sanction.

If the participant has been referred for a 1st sanction and a FEP placement is available and the participant signs the Full Employment Program Agreement prior to the effective date of the sanction, the 1st sanction can be avoided. For a participant in a first sanction, a participant may be referred for FEP participation. As long as the fixed period has been served, the FEP assignment is the verified act of compliance and the sanction may be lifted.

e. More than one participant may be screened and referred to an employer for an interview for the FEP positions.

1. The ESW should complete the VIEW Referral to Work Site form (032-02-0300) to be given to each referred participant to take to the job interview.

2. After the employer indicates his selection on the participant's VIEW Referral to Work Site form (032-02-0300) and signs the Full Employment Program Agreement (032-02-0309) for the participant's placement, the participant is to be assigned to the FEP position on the Activity and Service Plan (032-02-0302) and in ESPAS. **The ESW will give the participant the FEP Information Sheet, (032-03-0440-00).**

3. The ESW will complete the Full Employment Program Communication Form (032-03-0655) and forward it to the EW as notification of a FEP placement. This form is available on the intranet at http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi and can be completed online and emailed to the EW. The eligibility worker is responsible for updating ADAPT to pay the employer's stipend in place of the TANF grant as indicated on the Full Employment Program Communication Form (032-02-0655) from the ESW.

f. If a participant does not attend the employer interview, the EW must contact the participant to determine if good cause for the missed interview exists. If the ESW determines from the contact that the participant did not have good cause for missing the interview, or if the ESW is unable to contact the client verbally, the ESW must take action to begin the sanction process. Based on agency procedures, the ESW will either send the client the VIEW Notice of Sanction/ Termination (032-02-0307) or the Advance Notice of Proposed Action within 3 business days of the missed appointment. Alternately, the ESW will immediately notify the EW who will send the ANPA within 3 business days of receipt of the notification.

g. If a participant transfers to another locality, the FEP Agreement will be terminated.

5. Criteria for the FEP Employer

a. FEP placements may be established in public or private sector employment.

b. The employer must offer employment of not less than 20 hours per week at minimum wage or greater. The position offered must meet the definition of a suitable placement, (see Suitable Placements at 1000.**13**, D.3). Wages paid to FEP participants must be the same rate as paid to other employees who perform the same work and who have similar experience and tenure.

c. The employer must pay Virginia Unemployment Insurance tax for its employees. FEP participants may qualify for unemployment benefits if not retained as a permanent employee. Eligibility for such benefits must be determined by the Virginia Employment Commission on an individual case basis. Former FEP participants not hired permanently should be encouraged to apply.

d. The employer must offer a position in conformity with section 3304 (a) (5) of the federal Unemployment Tax Act which requires the following:

1. The job offered cannot be available as a result of a strike or labor dispute;

2. The job cannot require the employee to join, nor prohibit the employee from joining, a labor organization;

3. The FEP participant cannot be used to displace regular workers.

e. The employer must agree to pay the participant through his payroll system. The employer agrees to pay his share of the premiums for Social Security contributions, unemployment insurance, and worker's compensation related to the participant's wages.

f. The employer must sign a VIEW Full Employment Program Agreement (032-02-0309) for each participant she employs in a FEP placement. The Full Employment Agreement includes:

1. The amount of the employer stipend;

2. The skills and equipment operations the participant will learn;

3. The hourly wage, number of hours per week the participant is expected to work, and estimated net monthly wages.

4. The duration of the placement and the conditions under which it will end;

5. Conditions under which the employer must repay FEP reimbursements;

6. Provisions regarding termination of the FEP Agreement; and

7. Responsibility of the employer to report when a FEP participant works less than an average of 20 hours per week. If the agreement is not in effect for a full calendar month, the participant must have worked an average of at least 20 hours per week for the number of full weeks the FEP agreement was in effect during the month.

Example 1 – A participant begins employment on July 13 and works a total of 58 hours between July 13 and July 31. Since the agreement is in effect for less than a full month, the ESW will need to determine the average number of hours worked per week to enter in ESPAS as well as the number of full weeks worked during the month. The calculation will be as follows:

31 (last day of the month in which the assignment began)
– 13 (the day of the month when the assignment started)
18 +1 = 19 days employed during the month

19 days ÷ 7 =2.71 weeks employed during the month

58 hours ÷ 2.71 weeks = 21.4 average hours per week; round down to 21

Example 2 – A participant is employed for a full month. The employer reports that the participant worked for a total of 90 hours during the month. The average number of hours worked per week during the month was 21 (90 hours ÷ 4.33 = 20.78 average hours per week; round up to 21).

g. The employer must also agree to the following:

1. Provide on-the-job training to the degree necessary for participants to perform the duties of the job;

2. Provide sick leave, holiday, and vacation benefits to participants to the same extent provided to other employees performing the same work and having similar experience and tenure;

3. Maintain healthy, safe working conditions at or above levels generally acceptable in the industry and no less than those in which other employees

perform the same work;

4. Agree not to discriminate against any person, including program participants, on the basis of race, color, sex, national origin, religion, age, or disability.

h. In addition to completing the VIEW Full Employment Agreement, the ESW will require the employer to fill out the Request for Taxpayer Identification Number and Certification Form (IRS Form W-9). File the completed form in the case record.

6. Payments to the Employer

The employer stipend is a reimbursement for participation in FEP. The stipend is issued for each month of FEP participation.

a. Two types of payments are made to an employer.

1. Stipend - The employer stipend is a predetermined, fixed amount of $300 paid monthly. Stipends are paid beginning the month after the participant enters a FEP placement. FEP stipends are issued for six consecutive months, unless notified by the ESW to discontinue the payments. In no instance are stipends to be paid for more than six months.

The ESW is responsible for notifying the eligibility worker within **3 business** days of making a FEP placement. Upon receipt of notification from the ESW that the participant has entered a FEP placement, the eligibility worker will complete the required ADAPT screens to stop the participant's TANF payments and start the employer's stipend payments **as soon as administratively possible**. The employer's stipend will be mailed on or about the first day of each month.

Using the Full Employment Program Communication Form (032-03-0655), the ESW must notify the EW when a FEP placement is made and when changes occur during the placement including the need to issue a supplemental TANF payment, issue a replacement check to the employer, terminate the FEP placement, or reinstate TANF benefits upon completion of the placement.

2. Bonus

a. The bonus is a predetermined, fixed amount of $500 paid to the employer if the participant is hired on a permanent basis (for at least 20 hours per week) at any time during the six-month placement period or within 30 calendar days after the placement has ended.

b. Limitations on Payments to the Employer

1. No employer will be paid a stipend unless the local department of social services has a signed and completed VIEW Full Employment Agreement.

2. The employer will receive a stipend only when the participant was paid for at least 20 hours per week or an average of at least 20 hours for the number of full weeks the agreement was in effect during that month. The EW must be notified within **3 business** days that the 20 hour minimum was not met and whether a supplemental payment should be issued to the FEP participant.

3. The employer may receive one bonus payment per VIEW participant.

4. A bonus payment cannot be issued in the same month as a monthly stipend. For example, if the last stipend payment is issued in October, the bonus will be issued in November.

7. FEP Participation

a. The ESW will track participation by conducting a FEP follow-up by the fifth day of each month for the previous month. This is to be accomplished by contact with the employer to verify that the participant is satisfactorily continuing in the placement and is meeting the minimum requirements for the job, including working at least 20 hours per week or an average of at least 20 hours during a month.

The ESW should also discuss any concerns the employer may have regarding the participant's performance or attendance. Hours of participation will be verified by the employer's statement. In any case, monthly contact with the employer should be part of the follow-up process to insure that the employer's needs are being met, to maintain rapport with the employer, and to insure the likelihood of future FEP placements.

The employer contact may be written or verbal. In either case, the ESW must obtain the information requested on the Attendance/Performance Rating Sheet (032-03-0305). If the information is to be obtained in writing, the ESW may provide the employer with a six-month supply of the form at the time the FEP Agreement is signed. If the contact is verbal, the ESW should record the information obtained on the Attendance/Performance Rating Sheet.

If the employer recommends the termination of the Full Employment placement, the ESW will document the reasons in the contact log for the recommendation and determine if there are grounds for sanctioning the participant. If grounds for sanctioning do not exist, the ESW will reassign the participant to another work activity immediately. If grounds exist for sanctioning, the ESW must take action to begin the sanction process. Based on agency procedures, the ESW will either send the client the VIEW Notice of Sanction/ Termination (032-02-0307) or the Advance Notice of Proposed Action within 3 business days of the missed appointment. Alternately, the ESW will immediately notify the EW who will send the ANPA within 3 business days of receipt of the notification.

b. ADAPT will automatically issue the stipend through month six unless cancelled by the EW. If the ESW determines that the employer was not entitled to the stipend received for the prior month, the ESW will inform the employer of his responsibility to return the check. The employer is ineligible for a stipend for any month in which the FEP participant did not work an average of at least 20 hours per week during the month. The stipend or, if the check has been cashed, a check issued by the employer should be sent to the Virginia Department of Social Services, Division of Financial Management, P. O. Box **606**, Richmond, VA **23219**-2901. If a check from the employer is used to repay the stipend the employer should reference the participant and the case number on the check. If the employer does not return the check, the local department of social services may pursue civil action through their city or county attorney's office.

c. The participant may work additional hours beyond the number listed on the VIEW Full Employment Agreement (032-02-0309). Overtime hours can be required by the employer, but only to the extent that they are required of other employees with similar positions and experience.

d. Whenever possible, FEP placements should begin at the first of the month. This will allow the FEP participant to receive maximum wages to prepare financially for the suspension of TANF benefits during the FEP placement. Under no circumstances can a placement begin during the last 11 days of the month due to notification requirements at 401.4. The TANF recipient must be provided with an advance notice of action that the TANF payment will be suspended due to the FEP placement. At a minimum, the participant must have worked at least one full week for at least 20 hours for the employer to qualify for a stipend.

For example, a participant's placement begins on April 19. The employer may qualify for a stipend for each placement month (April through September). Stipends are paid on or about the first day of the month following the month of participation, e.g., May through October in this example. If the participant does not work at least one full week for a minimum of 20 hours, the employer will not receive a stipend for participation in April.

8. FEP Employer Outreach

a. VIEW case managers should work through existing employer networks (workforce investment boards, chambers of commerce, faith-based organizations, local business organizations, etc.) in order to locate employers who are interested in accepting a FEP placement. The ESW will schedule an interview with any employer who expresses an interest.

b. The ESW will explain FEP to the employer and the advantages of entering into a FEP agreement. In addition to the reimbursement to the employer, the ESW should discuss Work Opportunity Tax Credits, the supportive services VIEW offers to help the participant be successful on the job, and the case management services in place to support the participant's efforts.

c. The employer should complete a Work Site Position form (032-02-0306). The information obtained from this form will be used to screen participants for the FEP position(s).

d. If a regular employee at the FEP place of business feels that he/she has been displaced and the situation cannot be handled satisfactorily through the employer's grievance process, the Virginia Department of Social Services will act as a mediator. The employer should be informed that the **"Employee Grievance Procedure – Grievance Form A"** form can be obtained at the local social services agency employment services department **or at http://www.edr.virginia.gov/docsnforms/gre/FORMA2010rev.pdf** Once the form is completed, it is to be given to the local agency's employment services department. The employment services department will send the form and all pertinent information to:

Virginia Department of Social Services
801 East Main Street
Economic Assistance and Employment Unit
Richmond, Virginia 23219-3301

e. The employer should agree to contact the ESW as soon as a FEP placement position is available.

9. FEP Assignment

a. Once the agreement is signed, the ESW will meet with the participant to develop a new VIEW/TWA/Transitional Activity and Service Plan (032-02-0302) and to arrange needed supportive services. At a minimum, the Plan must include:

1. Name and phone number of the FEP supervisor;

2. Place of employment;

3. Days and hours of work, and hourly pay the participant will receive;

4. Notice that the participant must call the FEP placement supervisor and the ESW if the participant will be absent from work;

5. An explanation that the participant's monthly TANF benefits will be stopped for the duration of the placement, except when the participant was unable to complete the scheduled hours for a reason beyond his control, and that wages received from the FEP employer will be counted for the Supplemental Nutrition Assistance Program (SNAP) and Medicaid.

6. Notice that the participant has the right to appeal the suspension of the participant's TANF benefits; and

b. The ESW will explain the benefits of the Earned Income Tax Credit (EITC) to the participant.

c. The ESW should assist each participant in applying with the employer to receive a monthly advance EITC payment.

10. Supplemental Payments to the FEP Participant

A supplemental payment is to be issued to the participant if monthly earned income is less than the frozen TANF benefit amount and good cause exists. Good cause includes circumstances beyond the participant's control, such as but not limited to, loss of child care, transportation, illness of the FEP participant or a family member, or another emergency situation. Good cause is determined by the ESW.

The ESW will advise the EW when a supplemental payment should be issued to the participant. The **amount of** the supplemental payment will be calculated in ADAPT based upon gross earnings received in the month being supplemented.

E. COMMUNITY WORK EXPERIENCE PROGRAM (CWEP)

Community Work Experience (CWEP) provides an unpaid work placement in a public or private non-profit organization. An assignment to CWEP is appropriate for participants who need to learn or improve skills or work behaviors, or to secure a job reference, in order to find paid employment.

1. Work Site Development

Overview: In order to make the opportunities provided by CWEP available to the VIEW population, the agency will develop and maintain suitable positions at public or private non-profit organizations providing worksites. The following considerations guide the development of worksite positions:

a. Worksite positions must provide opportunities that can be matched to client interests and abilities in order to enhance employability.

b. Worksite positions must be located at public or private non-profit organizations which provide a useful public function. For-profit businesses or organizations cannot be worksites. Possible worksites include hospitals or other health care facilities, social service agencies and charities, environmental protection agencies, schools and colleges, libraries, urban and rural development organizations, recreational organizations, highway and transportation departments, other public or private non-profit departments, agencies or organizations.

c. Work sites must provide reasonable working conditions and must not violate Federal, state, or local health and safety standards. The ESW is not responsible for monitoring working conditions, but must work to bring the worksite into compliance with health and safety standards, or take action to terminate the agreement with the work site if violations become known.

d. Work sites will not be developed in response to, or in any way be associated with, the existence of a strike, lockout, or other bona fide labor dispute, or violate any existing labor agreement between employers and employees.

Guidelines:

e. The local agency and the public or private non-profit organization to be used as a worksite will enter into an agreement that sets forth the responsibilities of each. The form, VIEW Work Site Agreement (032-02-0308), will be used for this purpose and will be signed by both parties.

f. The ESW and/or work site supervisor will complete a VIEW Work Site Position form (032-02-0306) for each position developed at a work site. The form will describe the specific duties of the position, the days and hours the position is available, and will provide contact information for the work site supervisor. The form will be signed by the ESW or other local agency contact and by the work site supervisor or other contact.

g. The ESW will provide the work site supervisor with a written description of the expectations for supervision of a CWEP placement. The expectations for the supervisor will include, but are not limited to, the following:

1. Explain the rules and expectations of the work place to the client.
2. Provide a work space, and any necessary tools or supplies, in order for the client to carry out the responsibilities of the position.
3. Ensure that any reasonable accommodations identified on the Activity and Service Plan are provided by the work site.
4. Provide **daily** supervision and training as agreed to in the VIEW Work Site Agreement
5. Provide immediate notification to the ESW in case of an accident, or if the participant does not come to work**, comes in late,** or does not follow the rules of the work site.
6. Provide the ESW with a completed VIEW Attendance/ Performance Rating Sheet (032-02-0305) by the 5th day following the end of the report month.

2. Matching the Client to the Worksite

The goal of the VIEW Program, and of each of the VIEW allowable activities, is to increase the client's employability and help her become self-sufficient. In order to accomplish this when assigning a client to CWEP, the worker must ask the following questions in order to make an appropriate placement:

- What is the client's employment goal?
- What are her interests?
- What kind of environment will best suit her? Does she want to be in an office? Does she like working outside?
- What new skills does she need to learn? What old skills does she need to refresh?
- Does she need to learn and practice work behaviors?

- What barriers does she have that might affect a work site placement?
- What kind of work site position will appeal to her?

Once the ESW has the answer to these questions, work can begin on matching the client with a work experience position, or on developing a position for the client. The client can identify her own work site placement as long as it with a public or private non-profit organization willing to enter into a work site agreement with the agency.

There may be some situations in which a participant was sanctioned for non compliance at a CWEP or PSP sites. The client has completed an act of compliance and the sanction is lifted. The ESW would like to assign the participant to another CWEP or PSP, but due to a negative history at assignments for CWEP and PSP there are no other placements available. In this circumstance, the participant should be encouraged to develop her own worksite.

The agency will work with the client to secure any evaluations, counseling, or treatments needed to resolve the reasons for the non-compliance, or which would support the client being exempted from VIEW due to a verified physical or mental health condition.

3. Limitations on Work Site Assignments

a. The participant will not be required to use her public assistance income or personal resources to pay costs incurred while participating on a work site assignment.

b. The work site must be within a reasonable distance from the participant's home. The travel time from the participant's home to the work site cannot be more than one hour each way, based on transportation available to the participant.

c. The participant cannot be permanently placed in the position of a worker who is on sick leave, annual leave, leave without pay, or any other granted leave with or without pay. The participant cannot displace persons currently assigned to established, unfilled positions. The participant must not perform tasks which would have been undertaken by current employees or which would have the effect of reducing the work hours of paid employees.

d. The participant will not be assigned to work sites which are totally involved in political, electoral or partisan activities. The participant may be assigned to sites developed in the office of an elected official, however the participant cannot be required to engage in political, electoral, or partisan activities.

4. Criteria for CWEP Placements

a. A client can be assigned to CWEP immediately after the initial job search.

b. A client whose initial job search was waived because she had previously participated in VIEW during her current 2 year period of TANF eligibility may be assigned immediately to CWEP following assessment.

c. The initial assignment to CWEP shall be for a period of six months. Due to ESPAS system limitations, the assignment will be entered as two consecutive enrollments of three months each. (Note: only one Activity and Service Plan is required.)

d. The weekly number of hours of a CWEP assignment equal the total TANF dollar amount plus the SNAP benefit amount divided first by the federal minimum wage and then by 4.33.

e. The number of hours of a CWEP assignment is calculated at the time of the placement and is fixed. They do not vary from week to week or month to month. The hours are recalculated at each reassessment and at any time there is a change in the size of the assistance unit which also changes the benefit amount. Note: Mass changes to the SNAP allotment amounts and changes to the federal minimum wage amount will be addressed at the next reassessment after the change.

f. CWEP hours are not reduced by travel time to and from the placement. All CWEP hours are to be worked; meals and breaks can be included with hours worked or can be subtracted based on how they are treated for paid employees of the work site.

g. Calculation of Work Hours for TANF and TANF-UP Cases: Combine the total TANF dollar amount with the SNAP benefit amount received by members of the TANF household. Do not include the value of SNAP benefits received by household members who are not included in the TANF grant. Divide the total of the TANF grant plus SNAP benefits by the federal minimum wage, to determine the number of CWEP hours to be worked each month. Divide that result by 4.33 and round the final result down to the next whole number to determine the number of hours to be worked each week in the CWEP assignment.

CWEP placements cannot exceed 32 hours a week. The weekly CWEP assignment will be reduced to 32 hours if the calculated hours exceed that number.

h. CWEP Assignments for TANF-UP Cases: Both parents in a TANF-UP case may be placed in CWEP. In that circumstance, each will be required to participate the calculated hours. For example, if the calculation requires 25 hours of participation, and if both parents are assigned to CWEP, each individual will participate 25 hours a week. Additionally, each individual will have to be assigned to another activity for an additional 10 hours per week to meet his/her VIEW participation requirement.

5. Referral of the Client to the Work Site: After the client's hours of CWEP participation are determined, and a good work site match is made, the ESW will work with the client and the work site to schedule an appointment for the client to be interviewed for a position. The ESW will complete the VIEW Referral To Work Site **form** (032-02-3000), make a copy for the record, and give the referral to the client to take to the interview. The work site supervisor will complete the bottom portion of the form, copy it for the work site, and send it back to the ESW showing the outcome of the interview. If the work site accepts the client for the placement, the worker will proceed with putting the client in CWEP and in arranging any needed supportive services.

If the client does not have Medicaid coverage, the worker will provide both the client and the work site supervisor with a signed copy of the Notification of Workers' Compensation Requirements and Procedures form (032-03-0675) and will explain the responsibilities of all parties should there be an injury at the work site.

6. Concurrent Assignments: Since it is not possible for a CWEP assignment to meet the 35 hour participation requirement, all participants assigned to CWEP must also be assigned to another component that will enhance employability.

If it is in the best interest of the participant, the hours to be worked in the CWEP assignment can be reduced by the hours the client is assigned to another work activity, as long as the CWEP assignment is at least 20 hours.

7. Work Site Monitoring: The ESW will provide on-going monitoring of the CWEP placement.

   a. On-going monitoring will include a monthly review of the VIEW Attendance/ Performance Rating Sheet (032-02-0305) received from the work site supervisor by the 5th day of the month following the report month. Based on the review, the ESW will work with the work site supervisor and the client to resolve any issues affecting the placement.

   b. The ESW will conduct a formal reassessment with the participant every three months. In preparation for the reassessment, the worker will contact the work site supervisor to determine if the client's performance is satisfactory. If the client is not satisfactorily performing the duties of the position, the ESW will work with the supervisor to identify the specific duties not being performed, the reason for the unacceptable performance, and ways to improve the participant's performance.

   c. The worker will remove the participant from the CWEP placement for misconduct or violation of the work site's policies at any time based on the request of the work site.

8. Workers' Compensation

   VIEW participants not eligible for Medicaid who are participating in the CWEP component are deemed to be employees of the Commonwealth for purposes of the Workers' Compensation Act. Such persons shall be eligible for reimbursement for medical costs if the injury is covered under the Workers' Compensation Act, but shall not be eligible to receive weekly compensation.*

   a. If a claim is accepted, Workers' Compensation will pay medical costs for services provided by a panel physician as authorized by the Workers' Compensation Act for covered injuries only.

      (1) The VIEW participant should notify her medical provider that she is seeking attention for a workers' compensation claim and request medical providers to submit medical reports and bills for covered injuries to Managed Care Innovations (MCI).

      (2) MCI will review the medical report, confirm the treatment is related to a covered injury and remit payment to the medical provider for services of the covered injury.

   b. Local agencies who assign VIEW participants not eligible for Medicaid to CWEP placements must follow these steps to ensure proper coverage in the event of an accident on the job.

* 2005 Acts of Assembly, HB2462

(1) Submit the name, case number (legacy number and ADAPT case number), and Begin and End date for the individual assigned to CWEP. The CWEP Placements Without Medicaid Coverage form must be completed online at: http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms/view.cgi.

(2) **If the client is injured on the work site and wishes to file a claim with Workers' Compensation, the ESW must provide to the client in writing a list of three physicians from whom the client may choose to seek medical attention. The list of three physicians must be entered on the Panel Physician Form and given to the client. The form can be located** at' **http://www.covwc.com/clientimages/48008/forms/panelphysicianform.pdf'. Print the form.**

To obtain a list of physicians, access the WellComp Managed Care Services website from the Rockport Healthcare link, at 'http://www.rockporthealthcare.com/YORKS/Searchbyzip.aspx.' This site will provide a list of doctors who can be on the physician panel. The physicians listed provide care under the Worker's Compensation Act. The site allows the worker to find physicians by zip code, city, county, proximity and specialty.

If the worker is unable to provide a panel from the site, the worker may contact Chad Smith at the Department of Human Resource Management to obtain a panel of doctors for her area. The contact information is chad.smith@dhrm.virginia.gov

c. The CWEP work site supervisor must immediately complete an Employer's Accident Report form when an accident occurs. This **Virginia Workers' Compensation Commission** form can be accessed on line at **http://spark.dss.virginia.gov/divisions/dhrm/vdss/forms/index.cgi. Scroll down to Workers' Compensation. Click on Employer's Accident Report form. Print the form.**

1. The supervisor must investigate the claim, document work place hazards/conditions involved in accident and complete 'Employer's Accident Report' based upon his investigation.

2. List the employer as CWEP and the agency number as 997.

3. The original form must be sent to:

Virginia Department of Social Services
Division of Benefit Programs
Economic Assistance and Employment Unit
Attn: CWEP Placements without Medicaid Coverage
801 E. Main Street
9th Floor
Richmond, VA 23219-2901

d. The Economic Assistance and Employment Unit of the Division of Benefit Programs at VDSS must:

1. Maintain **case names and numbers** received from local agencies of persons **who do not have Medicaid** and provide **that information** to the Department of Human Resource Management (DHRM).

2. Pay premiums per individual in a CWEP placement to DHRM.

3. Maintain a file of all Employers' Accident Reports.

4. Notify the local department of social services of the disposition of the **Workers'** Compensation application.

e. DHRM's claims administrator (Managed Care Innovations):

1. Will notify VDSS when a claim for **Workers'** Compensation has been filed.

2. Contact both the injured worker and the work site supervisor for information about the accident.

3. Notify both the injured worker and VDSS home office of the disposition of the claim.

f. The VIEW participant must:

1. Immediately notify the work site supervisor in writing of workplace accident facts.

2. Inform the doctor when the visit is necessitated by an injury at work and that a claim for Workmen's Compensation has been filed. The doctor should submit a medical report and bills to MCI.

g. Workers' Compensation Hearings

1. When a request for Workers' Compensation has been denied, the VIEW participant may request a hearing. The request must be made to the Virginia Workers' Compensation Commission.

2. The Office of the Attorney General represents the state on cases in litigation. Managed Care Innovations will manage and coordinate the defense of the case with the Office of the Attorney General. Should any witnesses or supervisory testimony be required, the Office of the Attorney General will provide immediate notification **to that individual.**

C. PUBLIC SERVICE PROGRAM (PSP)

The public service program (PSP) shares many of the characteristics of CWEP. It provides an unpaid work placement in a public or private non-profit organization with the goal of improving the participant's employability. Unlike CWEP, the PSP placement must provide a clearly defined public service. Examples of public service activities include court-ordered unpaid work, as well as participation in other programs or placements that benefit the community.

PSP assignments may be made for a maximum of 35 hours, with the exception of court-ordered assignments which will be made at the discretion of the court and may be for more than 35 hours. Participants assigned to PSP for less than 35 hours must also be assigned to another work activity order to meet the 35 hour participation requirement. Each assignment to PSP should be for a period of six months.

VIEW participants placed in PSP are not considered employees of the Commonwealth for purposes of the Worker's Compensation Act. PSP placements can be made only for participants with Medicaid coverage unless the PSP site agrees to provide coverage under its own Workers' Compensation plan. If a client is assigned to a PSP site and loses his Medicaid coverage, he is to be reassessed. If an unpaid work placement continues to be appropriate, the client can be assigned to CWEP. Assigned hours will be based on CWEP guidance at 1000.13. The former PSP site can be used for the CWEP placement, or the client can be assigned to another CWEP site. Alternately, the client can be assigned to a different component.

The development of PSP worksites, assignment and referral of participants to PSP worksites, limitations on the PSP positions, and PSP worksite monitoring follow CWEP guidance, with the exception that the public service provided through the placement must be a consideration in development of the site, and must be clearly documented in the record.

D. ON THE JOB TRAINING (OJT)

On-the-job training is a type of paid employment in which an employer provides training to an employee in order to increase the employee's skills on the job.

1. The following are examples of on-the-job training that may be counted as a work activity in the VIEW Program:
   (a) On-the-job training offered through the WIA;
   (b) Work study offered through a community college or a four year college program;
   (c) Apprenticeship programs;
   (d) Paid internships offered by colleges or training providers in which the participant receives a wage or stipend for working and receiving training while on the job;
   (e) AmeriCorps Program placements in which the participant receives a stipend for living expenses; or
   (f) Sheltered workshop employment

2. With the exception of sheltered workshop employment, an OJT position that pays less than minimum wage does not meet the definition of employment and is not a countable work activity. The minimum wage requirement is waived if the OJT position is sheltered workshop employment. (Sheltered workshops are certified by the U.S. Department of Labor to pay commensurate wages which are based on the individual's ability to perform in relation to the performance of a person without a disability).

3. Because OJT is a type of paid employment, the participant will not be required to participate in another concurrent activity if the client works in the OJT position 30 hours per week or

more and earns at least minimum wage. Each assignment to OJT should be for a period of six months.

4. If the hours for any OJT position are less than 30 per week, the participant must be assigned to a concurrent program activity and must meet the 35 hour participation requirement.

5. **A number of occupations, including cosmetologist, automobile mechanic, and dental assistant, can be trained either as a paid apprenticeship or as unpaid vocational education and training or as unpaid job skills training. Apprenticeship combines paid OJT and a classroom training hours. Registered apprenticeship is a structured training program that combines on the job training and related technical instruction to train employees in occupations that demand a high level of skill in the private and public sectors. Occupations in construction, manufacturing, and the service industries utilize apprenticeship readily. A registered apprentice completes a minimum of 2,000 hours of supervised on-the-job training and a minimum of 144 hours of related classroom instruction for each year of apprenticeship. Information about apprenticeship requirements, apprenticable occupations, and employers offering opportunities in Virginia is available at http://www.doli.virginia/apprenticeship/registered_apprenticeship.html.**

E. VOCATIONAL EDUCATION AND TRAINING

1. Vocational education and training is training or education designed to prepare the participant for a specific trade, occupation, or vocation. It is a countable activity for 12 months in a lifetime. The months of training do not have to be consecutive. Each assignment to vocational education and training should be for a period of time that will coincide with the length of the training/education program whenever possible but should not exceed six months.

   Vocational education and training does not include education beyond the baccalaureate or degree, nor does it include ABE, GED, or ESL instruction. Examples of activities that can be classified as vocational education and training are technology, business, and health sciences programs leading to certificates, associate or baccalaureate degrees in the trades, information technology, medical equipment repair, accounting administration, medical assisting, practical or registered nursing, business, education, criminal justice and health sciences. Prior to entering vocational education and training, a participant must meet any educational or technical requirements of the occupation for which she is preparing or be enrolled in an activity to meet the requirements.

   Programs meeting the definition of vocational education and training are offered by a wide range of institutions including vocational-technical schools, community colleges, post- secondary institutions, proprietary schools, and secondary schools offering vocational education. The choice of vocational education and training offered may vary in each locality, depending upon local labor market conditions.

   Up to one hour of unsupervised study or homework time can be counted as vocational education and training for each hour of scheduled class time. The need for unsupervised homework/study time must be confirmed by the education or training program. Unless specifically required by the instructor, unsupervised study or homework time cannot be counted as vocational education and training when the training is outside the classroom and the activity does not support counting unsupervised study or homework hours. Supervised study time verified by the education or training program may also be counted as participation.

Example 1: Client is enrolled in an undergraduate social work program. The professor in one of her classes encourages (but does not require) students to volunteer in their communities. Volunteering is not a class requirement and does not impact class hours or grades. Client volunteers two hours a week at the public housing site where she lives. The client's volunteer hours do not count toward participation.

Example 2: Client is enrolled in a associate's level occupational therapist program. One of her classes requires the students to volunteer two hours a week in a nursing home as part of the course requirement. Since the two hours of volunteer time are a requirement, they can be counted as participation. Hours for unsupervised study or homework cannot be counted for the volunteer activity unless the study or homework is specifically required by the class instructor.

Hours for distance learning classes will be counted as participation if attendance and participation are documented on an Education and Training Activities Attendance Report which is signed by the instructor. It is the responsibility of the worker to determine through contact with the institution and/or instructor that the hours for a distance learning class can meet the documentation requirements. Distance learning hours that cannot be documented cannot be counted toward meeting the participation requirement.

Documented hours for distance learning can be counted under the following three circumstances:

- when the individual logs in by computer to a class delivered on a specific day and at a specific time. The hours tracked for an individual participant can count as hours of participation.
- when "clock time" is tracked for an on-line class as long as the clock is stopped when there is no interaction by the student with the on-line course material. The hours tracked as "clock time" for an individual participant can count as hours of participation.
- when an institution tracks "seat time" for participants based on progress in an on-line course. The hours counted as "seat time" for an individual participant can count as hours of participation.

Other types of distance learning courses offered through virtual classrooms or as independent tutorials will be evaluated and approved on a case-by-case basis. Hours of participation will be reported only if attendance and participation can be verified by the instructor.

d) If child care is needed, the ESW will notify the child care staff of the approval or disapproval of the self-initiated training. Child care staff will not authorize child care in cases in which the ESW has not approved the self-initiated training.

e) The training must be for jobs available or likely to become available in the community.

f) If grades have been issued for the training activity, the participant must have met the satisfactory progress requirements of the provider.

g) If the participant is already enrolled in training which will require more than two years to reasonably complete, the participant may be allowed to continue in the activity if she is satisfactorily progressing but will be ineligible for a Hardship Exception based on a one year extension for training.

h) The participant must also meet the conditions described in the section 1000.17 regarding satisfactory attendance and progress.

1000.14 Program Component – Non-Core Work Activities

Hours assigned to non-core activities are used in the calculation of the participation rate only after the minimum 20 hour assignment to a core activity has been met.

A. JOBS SKILLS TRAINING

Jobs Skills Training is training that prepares an individual for employment, or job specific training required by an employer in order to obtain, keep, or advance in a specific job or occupation or training needed to adapt to the changing demands of the workplace. Each assignment to Job Skills Training should be for a period of time that will coincide with the length of training/education program whenever possible but should not exceed six months.

Job skills training includes the following types of training:

- Individual courses or a series of short term courses in such topics as keyboarding, or computer literacy, or training in a specific software application.
- All training and education programs, including post-secondary certificate, associate, or baccalaureate level programs, that are included in the definition of Vocational Education and Training at 1000.13H. Post secondary education can be provided in nontraditional as well as traditional settings. (Note: All post-secondary education-certificate, associate, baccalaureate level-must be directly related to employment in order to count as a work activity. Post-secondary education that is not related to employment is not allowable as any VIEW component or element of a component, including Other Locally Developed.)
- Instruction in a second language for participants who have a high school diploma or GED, or unpaid practicums or internships offered by a college or training program, or by an employer.

The choice of job skills training offered may vary in each locality, depending upon local labor market conditions. However, job skills training must have a direct relationship to employment as described above. Up to one hour of unsupervised study or homework time can be counted as job skills training for each hour of scheduled class time. The need for unsupervised homework/study time must be confirmed by the education or training program. Unless specifically required by the instructor, unsupervised study or homework time cannot be counted as job skills training when the training is outside the classroom and the activity does not support counting unsupervised study or homework hours. Supervised study time verified by the education or training program may also be counted as participation.

Example: Client is enrolled in a certificate medical assisting program. Students are required to visit various medical settings and talk to medical assistants about the nature of the work they do in those settings. These visits help the students better understand more about the profession and the types of employment opportunities available. Ten hours of visits are required each semester. Because the visits are required, they can be counted (along with the classroom hours) as participation. However, no unsupervised study or homework hours will be counted for the visits.

Hours for distance learning classes will be counted as participation if attendance and participation are documented on an Education and Training Activities Attendance Report which is signed by the instructor. It is the responsibility of the worker to determine through contact with the institution and/or instructor that the hours for a distance learning class can meet the documentation requirements. Distance learning hours that cannot be documented cannot be counted toward meeting the participation requirement. A complete list of allowable distance learning activities is provided in the Vocational Education and Training section, 1000.13H(1).

Prior to entering job skills training, participants must meet any educational or technical requirements of the occupation for which they are receiving training or be enrolled in an activity to meet the requirements.

The participant must also meet the conditions described in the section 1000.17 regarding satisfactory attendance and progress.

Participants who are initially enrolled in Vocational Education and Training because they are in an associate , certificate level, **or baccalaureate level** post-secondary program directly related to employment, and who reach **the** 12 month lifetime limit in that component, may **be reassigned to Job Skills Training and** continue in the education program.

Limitations on Post-Secondary Education Directly Related to Employment meeting the definition of Job Skills Training:

(1) Post-secondary activities directly related to employment, (certification, associate, or baccalaureate programs) will be limited to a period of twenty-four months. Participants will not be assigned to an educational activity which cannot be reasonably completed within a twenty-four month period of VIEW participation.

The assignment to post-secondary cannot exceed the number of months remaining in the 24 month period for a former VIEW participant returning to the program.

(2) The post-secondary education must be related to the jobs which are available in the community or are projected to become available in the community.

(3) Participants referred to post-secondary activities must have a high school diploma or GED prior to beginning the curriculum.

(4) Participants with a Certificate or Associate degree will not be assigned to additional post-secondary education except in situations in which the Certificate or Associate degree is more than five years old and the agency determines that additional education or training is needed to enhance the client's employability.

(5) Participants with a Baccalaureate degree will not be assigned to additional post-secondary education. These participants are considered to have the education and ability needed to obtain employment.

(6) Reimbursement for tuition, books and fees will be made for only the twenty-four month period unless the participant has been granted a hardship exception of up to one year to enable the participant to complete employment-related education. The participant must apply for all available sources of funding including Pell grants, scholarships, work study or other sources.

B. Education Below The Post-Secondary Level

Education below post-secondary is an allowable program activity for participants who have not received a high school diploma or GED certificate and whose employability would be enhanced by additional education. It includes ABE, GED, and ESL programs as well as secondary school and may be offered in non-traditional as well as traditional settings. Each assignment to this type of activity should be for a period of time that will coincide with the length of the program whenever possible but should not exceed six months.

1. Educational Activities

a. Participants assigned to this component will be those identified as needing certain educational activities to become ready for further education, training or job entry. Participation in education programs below the Post-Secondary level will be limited to one year.

Hours for distance learning classes will be counted as participation if attendance and participation are documented on an Education and Training Activities Attendance Report which is signed by the instructor. It is the responsibility of the VIEW worker to determine through contact with the institution and/or instructor that the hours for a distance learning class can meet the documentation requirements. Distance learning hours that cannot be documented cannot be counted toward meeting the participation requirement. A complete list of allowable distance learning activities is provided in the Vocational Education and Training section, 1000.13H(1).

b. Educational activities are defined as basic and remedial education that will provide an individual with a basic literacy level equivalent to at least grade 8.9.

(1) education designed to prepare individual for a high school degree or its equivalent (GED).

(2) Community based literacy programs that provide education activities for individual who require remediation to acquire a grade 8.9 literacy level.

(3) Education in English proficiency (ESL) for a recipient, who does not understand, speak, read or write the English language.

Up to one hour of unsupervised study or homework time can be counted as education below post-secondary for each hour of scheduled class time. The need for unsupervised homework/study time must be confirmed by the education or training program. Supervised study time verified by the education program may also be counted as participation.

c. The participant must also meet the conditions described in the section 1000.17 regarding satisfactory attendance and progress.

2. Limitations

a. Educational activities can only be provided in conjunction with a work activity during the participant's two year time period.

b. Participants who enroll into education prior to coming into VIEW will be required to participate in a concurrent work activity.

1000.15 – Program Components – Locally Developed Activities

Other locally developed activities are activities developed or used by a local agency to increase a client's employability, but which do not meet the definition of a core or non-core activity, or of post-secondary education. Assignments to other locally developed activities cannot be included in the participation rate calculation.

Hours assigned to other locally developed are not used in the calculation of the participation rate.

1000.16 Program Component - Non-Active Assignments: Inactive and Pending

There are some situations in which a VIEW participant cannot be assigned or reassigned to an active component immediately.

A. Such situations include, but are not limited to, the following:

1. The local agency determines that transportation or other needed supportive services are unavailable.

2. Neither the participant nor the agency is able to make child care arrangements.

3. The ESW has requested a reevaluation of the client's exempt status and is awaiting a response by the EW.

4. The start of the activity to which the client is to be assigned has been delayed.

5. The participant states that she has a medical or mental health problem that will prevent participation. The participant will be given a Medical Evaluation to be completed by a physician documenting the medical or mental health condition.

6. The participant has a family crisis or a change in individual or family circumstances, such as the death or illness of a spouse, parent or child, a family violence situation, or other time-limited situation not of the participant's own making that would affect participation.

7. The participant is receiving health, mental health, or substance abuse treatment or rehabilitation services which prevent participation in an active component. Verification is required that participation in the treatment or rehabilitation program is necessary and that the client is participating as required.

8. The participant has a verified disability and needs services, supports or accommodations to participate in an active component, but those services, supports or accommodations are unavailable.

9. Screening indicates that the participant has a potential disability that will affect participation in an active component but the agency is unable to obtain an assessment by a qualified professional.

B. If the VIEW participant must be assigned to a non-active component, the agency will take into consideration the anticipated time before an active assignment can be made, and the reason assignment to a non-active component is necessary.

C. Assignments to Inactive stop the VIEW clock and should be considered when the situation is not the result of the client's action or inaction.

Assign the client to Inactive when the client is cooperating with the agency to resolve the situation delaying active participation. Assignments to Inactive are limited to 30 days and can be extended only once for a consecutive total of no more than 60 days. (Under exceptional circumstances, the agency may assign the client to inactive for a third time with the written approval of the VIEW supervisor. A copy of the signed approval and an updated Activity and Service Plan should be sent to the agency's TANF/VIEW Field Consultant). At no time will the assignment to Inactive exceed 90 days.

Example: A new VIEW participant has a 14-month old child and needs child care in order to participate in the program. The client has been unable to find a child care provider. The only child care center in the community that accepts infants will not have an opening for at least 30 days. Since the client is cooperating, and the situation is not within her control to change, an assignment to Inactive is appropriate.

D. **Assignments to Pending do not stop the VIEW clock. Months assigned to pending count toward the client's 24 month time limit. Pending assignments should be considered when the situation preventing assignment to an active component is the result of the client's action or inaction.**

Assign the client to Pending when the client is not cooperating with the agency to resolve the situation delaying active participation. Assignments to Pending may be made for up to 60 days but should not be extended. At no time will the assignment to Pending exceed 60 days.

Example: A new VIEW participant has a 14-month old child and needs child care in order to participate in the program. She has interviewed several child care providers who usually have openings, but she insists on waiting so she can place her child at a new center in her neighborhood. The center is not scheduled to open for 30 days. The agency agrees to allow her 30 days to either obtain a placement at the new center or secure a placement with one of the other available providers. The agency assigns the client to Pending, not Inactive, because the delay in making arrangements has been within the client's control. (Note: Following the 30-day Pending assignment, the client will be assigned to an active component. If she does not participate, she will be referred for sanction for non-compliance).

Note: the information above does not apply to assignments of Pending due to full-time employment (which are entered in ESPAS as Component 25 with a Descriptor of 033). Each assignment of Pending due to full-time employment should be for a period of six months.

E. The ESW will document in the case record the reason for the assignment to Inactive or Pending. The worker will outline in the record the plan of actions and anticipated timeframes developed with the participant to resolve the issues related to the non-active assignment. The worker will make referrals, provide supportive services including child care or transportation, or otherwise assist the participant as necessary so that the client can participate actively in VIEW. These referrals or other assistance will be included in the plan developed with the client and will be documented in the case record.

F. At the end of each 30-day assignment to Inactive, or up to 60-day assignment to Pending, the participant's status will be reviewed and the Activity and Service Plan updated. It is expected that the local agency and participant will work together to resolve any issues related to participation by the end of these timeframes. The participant will be assigned to active VIEW components no later than the end of the maximum timeframes for Inactive and Pending assignments. After an assignment has been made to an active VIEW component, a participant will be subject to sanction if she fails to participate as required.

1000.17 - Monitoring Satisfactory Attendance and Progress

Satisfactory attendance and progress must be monitored for all education or training assignments – vocational education and training, job skills training and education below the post secondary level. ESPAS must be updated as appropriate to reflect progress.

A. Satisfactory attendance and progress is measured according to the attendance and satisfactory progress policies developed by the education or training provider and approved by the local social services agency.

1. In the case of education below the secondary level, satisfactory progress is defined as one grade level increase for every three months of participation.
2. In the case of post-secondary education, satisfactory progress is defined as maintaining a "C" average for each grading period and completing the number of credits needed each grading period to successfully complete the degree in the two year time period.

B. Daily supervision and record keeping will be provided by the education or training course instructor.

C. The ESW will monitor the participant to assure that she is making satisfactory progress. Satisfactory progress is used to assess the continued appropriateness of the education or training component.

D. The ESW will examine and maintain in the participant's case record copies of attendance records, certificates, diplomas and grades.

E. Education and training providers will complete **a VIEW Education and Training Activities Attendance Sheet (032-03-0191-00-eng)** each month. The client may complete the attendance sheet if it is signed by the instructor or another school/training program official.

F. The ESW will contact the instructor to determine if the participant is satisfactorily progressing and to determine if the participant will successfully complete the activity within the two-year limit on TANF eligibility. Documentation of these discussions will be kept in the contact log.

G. **For ABE, ESL, and GED assignments,** documentation of satisfactory progress will be made every three months. In the case of post-secondary education, the participant's progress will be monitored at a time consistent with the institution's schedule, e.g. at the end of a semester or quarter.

H. If it appears to the ESW and the education or training instructor that the individual may have a cognitive, developmental, learning or other disability that is impeding her progress, the participant will be screened for learning disabilities if screening has not yet been done. If the screening indicates that the participant is likely to have a learning or other disability, the individual will be referred for an in-depth evaluation. If it is determined that the participant has a verified disability, and there are reasonable accommodations that would help the individual progress in the program, the ESW will work with the individual and education or training provider to put such accommodations in place.

H. If neither the VIEW worker nor the instructor believes that there is any likelihood that the individual has a disability that is impeding progress, or if the individual is referred for screening/evaluation and the possibility of a disability is ruled out, or if the participant refuses to undergo screening or evaluation, the worker and instructor will discuss placement of the participant into another activity that may better facilitate the participant's job readiness.

I. A participant who has not made satisfactory progress after 6 months of participation in an education or training component (two consecutive grading periods in the case of post-secondary education) will be reassessed and assigned to another component which she can be expected to satisfactorily complete. No participant will be allowed to continue in a below post-secondary education component if she has not made a grade level change by the end of the initial six months in the component.

J. Participants will not be assigned to education or training which requires more than twenty-four months to complete. **Note: An exception will be made for an individual who was in a self-initiated education or training activity of longer duration at the time she enrolled in VIEW if the VIEW worker approved the activity and incorporated it into the client's Activity and Service Plan.** (See 1000.13.H and 1000.15.A.) Approval of a second year of education or training will be made only if the participant can be expected to complete the education or training during the second year, had made satisfactory progress during the first year of education or training, and was enrolled full time.

K. Vocational education and training is subject to a lifetime limit of 12 months; it cannot be extended for a second year.

L. A participant who has successfully completed a training program will not be offered additional training unless she meets one of the following conditions:

1. There are no jobs in the community for the occupation in which the participant completed training, nor are there jobs projected in the future for the occupation, or

2. The participant needs additional training in the occupation in order to become licensed or certified, and certification or license is needed to obtain a job in the occupation

Every effort should be made to work with a participant who has already successfully completed a training program to find employment in the occupation for which she has been trained.

M. A participant who has been enrolled in more than one training component while in the VIEW program, and who did not successfully complete the activities for reasons solely within her control, will not be assigned to another training component.

1000.18 - Job Follow-Up Job Follow-Up

A. Job follow-up is provided to all VIEW participants once they find full or part- time employment. Follow-up is provided for a minimum of **three** months unless the client begins receiving a VIEW Transitional Payment (VTP). (See **1000.22 B** for information about VTP including job follow-up requirements).

1. Job Follow-Up - Open TANF Case

Job follow-up is carried out each month for each employed **(either full or part-time)** VIEW participant with an open TANF case. Job follow-up will continue for up to 24 months if the participant is employed throughout her VIEW participation and the TANF case is still open.

2. Job Follow-Up - Closed TANF Case Without VTP

Follow-up will continue for each employed **(either full or part-time)** VIEW participant once the TANF case has closed if the minimum **three contacts** have not been made and the client is not receiving a VTP payment. **The VIEW enrollment will be closed and follow-ups ceased once the minimum three contacts have been completed or three months after the TANF case is closed – whichever comes first.** The VIEW enrollment will remain open in ESPAS during the follow-up period **but should be closed when the follow-ups are complete.**

B. Job follow-ups must be made on or after the last day of the employment month and entered into ESPAS by the 15th of the following month. For example, the client begins employment on October 25th. The first follow-up will be made on or after October 31st and the data will be entered in ESPAS by November 15th. The second follow-up will be made on or after November 30th and the data will be entered in ESPAS by December 15th.

Whenever possible, the first follow-up contact will be a face-to-face meeting between the worker and the client. All other follow-up contacts may be completed by telephone or face-to-face. The date and result of the contact will be recorded on the Job Follow-Up Contact – Current VIEW Participants form (032-03-0403-eng). If the client does not have a telephone or cannot be reached, the ESW will mail the client the VIEW Job Follow-Up form (032-03-0402-00-eng) and record the date mailed on the Job Follow-Up Contact form.

Follow-up calls should be made between the last day of the month and the 5th of the next month so that any VIEW Job Follow-Up forms which have to be mailed can be returned by the client and follow-up entered into the ESPAS system by the 15th.

Clients for whom the follow-up contact could not be successfully completed by telephone, and who are sent but do not return the VIEW Job Follow-Up form, will be referred for sanction if the TANF case is still open. If the client complies with program requirements and responds to the job follow-up request prior to the implementation date of the sanction, the sanction will not be imposed.

C. Job follow-up consists of two separate activities: on-going client contact to support job retention/career advancement, and wage verification.

1. Job Retention/Career Advancement Follow-up: The basic purpose of job follow-up is to assist the client in resolving any problems that may affect her employment. This purpose can best be

achieved through a conversation with the client in which problems can be discussed. Problems may relate directly to the job, or may involve difficulties in other areas of the client's life.

Additionally, job follow-up provides the worker the opportunity to help the client in the area of career advancement – either with her current employer or through a move to a new position. Specific services which may be provided include:

a. job retention counseling

b. career exploration focused on employment with better wages, hours, benefits, or other factors that make a job a better fit for the client and lead to increased self-sufficiency

c. referrals to other program activities including education or training

d. provision of job leads or other resources for additional job search

e. work-related workshops or seminars

2. Wage Verification: The client's hourly rate of pay and number of hours of employment per week must be verified by the first job follow-up. Verification may consist of information from the EW based on employer verification, pay stubs, wage forms, or direct contact with the employer by the ESW. The VIEW record should contain a copy of any wage and hours verification in the TANF record.

The hours and rate of pay verified at the first follow-up will be entered into ESPAS at that time. They will remain unchanged at the time of the 2nd, 3rd, 4th, 5th, and 6th monthly follow-ups unless a change is reported by the client.

If the client continues to have an open TANF case, the worker will schedule a face-to-face reassessment for the 6th month of follow-up and will again verify the hours and rate of pay at that time. That information will be entered into ESPAS at the time of the follow-up in the 7th month, and when the 8th, 9th, 10th, 11th, and 12th follow-ups are made unless a change is reported by the client. The same procedure will be followed at the time the client has the next face-to-face reassessment in the 12th and 18th months of participation.

D. There are three possible outcomes to a job follow-up contact:

1. The participant is employed

2. The participant has left employment

3. The ESW is unable to contact the participant, or the participant does not respond to the job follow-up contact

Job follow-up information is recorded in ESPAS as well as on the Job Follow-Up Contact – Current VIEW Participants form. The ESW may also document follow-up information on the contact sheet or in the narrative.

Example: The VIEW client becomes employed effective October 4th. Complete a new Activity and Service Plan showing the client's employment and outlining her responsibilities regarding monthly follow-ups. Enter the employment, wages, and hours information into ESPAS. This action will result in the client's name being added to the monthly Job Follow-Up Report beginning with month 2.

A face-to-face meeting or follow-up call will be made between October 31st and November 5th which will focus on job retention and career advancement. The ESW will complete the Job Follow-Up Contact form documenting the meeting or the call. If the wage and hours verification was not made at the time the employment information was entered into ESPAS, the ESW will verify that information at the follow-up.

The ESW receives notification that the TANF case will close effective December 31st. If the client is not eligible for VTP, enter the December follow-up information in ESPAS and continue doing regular VIEW job follow-ups until the required **three** minimum follow-ups have been completed. (See **guidance** at 1000.22.B for information regarding eligibility criteria for VTP).

1000.19 - REASSESSMENT

Reassessment provides the ESW and the participant the opportunity to review the participant's progress in the VIEW program and address any problems which may present an obstacle to **achieving self-sufficiency.** The reassessment will identify the reason the participant was unable to obtain full-time unsubsidized employment **or participate fully in the program** and the ESW will assist the participant in resolving the identified barriers.

If there is a reason to believe that the participant's failure to find full-time employment **or participate fully in the program** is related to a disability, the worker may offer screening, and if the screening identifies that the individual is likely to have a disability, will offer an in-depth evaluation, to identify the nature and severity of the disabilities, the individual's limitations, and any accommodations needed. The individual's Activity and Service Plan will be revised to reflect this information.

The ESW will conduct a reassessment whenever the participant leaves or completes an assignment. Reassessments may be completed prior to the end of the current assignment to ensure that participants are placed in new activities immediately after the end of an activity. (For example, if an assignment is scheduled to end 1/15, the ESW can schedule the reassessment appointment to take place prior to 1/15). The participant's activity end date will not be shortened due to early reassessment unless the assigned activity actually ended before the scheduled end date shown on the Activity and Service Plan. In all cases, the reassessment must be completed no later than one week following the end of an assignment. New assignments will be scheduled to begin no later than two weeks after the reassessment and immediately, if possible. Prompt reassessment and reassignment will reduce the "down" time between activity assignments and will positively affect the agency's participation rate.

The ESW must conduct a face–to-face reassessment interview with the participant following the completion of the initial Job Search. All subsequent reassessments may be completed through a face-to-face interview or by phone but, in all cases, the ESW must conduct a face-to-face interview with the participant at least every six months.

If the reassessment is conducted by phone, the ESW should document the case file specifying the date on which the new A & S Plan was discussed and agreed to by the participant, mail the participant a copy of the A & S Plan to sign and return, and key the new assignment information into ESPAS. The Activity and Service Plan is valid even if the client does not return a signed copy. The participant should be advised that the new program assignment must be carried out even if she does not return the signed A & S Plan.

1000.20 - SANCTIONS

A sanction is the suspension of the household's entire TANF grant for program noncompliance. SNAP benefits may also be affected. Federal participation requirements differ in some respects from VIEW program requirements and are not considered in determining non-compliance.

All TANF and TANF-UP recipients who are determined eligible for the VIEW Program and have already signed an Agreement of Personal Responsibility are required to participate in VIEW. Recipients are subject to sanction if they fail to participate without good cause.

A. Good Cause for Failure to Participate

1) When a client is not in compliance with VIEW, the agency must attempt to contact the client by phone to encourage participation, explore good cause, and/or notify the client of a possible sanction. If the ESW determines from the contact that the participant did not have good cause for missing the appointment, or if the ESW is unable to contact the client verbally, the ESW must take action to begin the sanction process. Based on agency procedures, the ESW will either send the client the VIEW Notice of Sanction/ Termination (032-02-0307/01-eng) or the Advance Notice of Proposed Action within 3 business days of the missed appointment. Alternately, the ESW will immediately notify the EW who will send the ANPA within 3 business days of receipt of the notification.

2) A participant who has good cause for noncompliance will not be sanctioned. Good cause will exist if:

a) The participant's inability to fulfill program requirements is due to circumstances outside her control or is the result of a change in circumstances over which the participant had no control. This includes but is not limited to situations in which the reason for the participant's non-compliance was that the participant had a disability or a family household member had a disability that was not identified or was identified but not addressed. The worker must allow the client 30 days to verify the disability prior to referring for sanction.

b) Acceptable child care is not available when necessary for an individual to accept employment or enter or continue in the program. To be acceptable, the child care must meet all of the following criteria:

(1) The child care must be arranged:
(a) by the participant, or
(b) if the participant cannot arrange for the child's care, it must be arranged by the local department of social services with a legally operating provider;

(2) The child care must be within a reasonable distance from the participant's home or work site. This means that the travel time from the child's home to the child care provider and the work site is generally no more than one hour, based on transportation available to the parent;

(3) The child care arrangements must be affordable. This means the cost of the child care is less than or equal to the payment amounts specified in the Child Care Services **guidance** (Volume VII, Section II, Chapter D); and

(4) If the child care is with a relative, it must meet the requirements for relative care in the Child Care Services **guidance** (Volume VII, Section II, Chapter D).

The participant is responsible for demonstrating that she is unable to find child care for one or more of the above reasons.

While one of the criteria for acceptable child care is affordability based on the payment amounts specified in child care **guidance**, the client's selection of child care arrangements whose costs exceeds the payment amounts is not a good cause reason for program non-compliance when other child care arrangements meeting the acceptable child care criteria are available**.**

The local agency is responsible for determining if the information provided substantiates that needed child care that meets the above criteria cannot be arranged. The ESW must consult with the Child Care worker in evaluating whether a sanction is appropriate.

c) Accepting employment would result in a net loss of cash income for the assistance unit. Net loss of cash income would result if the family's gross earned income, less necessary work related expenses, was less than the TANF payment which the recipient was receiving at the time the offer of employment was made.

3) The good cause investigation **will include** of an evaluation of information in the case record. When there has been no recent contact with the participant, efforts will be made to determine if the participant has contacted the **EW or Child Care Worker** to discuss the problem, given a reason for not attending an ESP interview, or for not completing an assignment, or having not kept any program-related appointment.

In all cases, in order to ensure that the participant understands the mandatory nature of the program and has an opportunity to explain the reason for noncompliance, the VIEW worker will attempt to contact the client by telephone or by personal contact. The worker will document the record that the contact was made or attempted.

4) Prior to imposing a sanction, the ESW is to complete the VIEW Non-Compliance Checklist. Once the form is completed, the supervisor must review the form and circumstances of the proposed sanction to ensure that the participant has been screened for disabilities or screening has been offered and refused, reasonable accommodations have been provided if needed, and the agency has attempted to notify the client verbally. The supervisor must not approve the sanction if any of these steps have not been taken. The supervisor or designee must sign the VIEW Non-Compliance Checklist. The completed checklist must be placed in the case record.

B. Refusal to Participate

Refusal to participate occurs when a participant either:

1) Overtly chooses not to cooperate; or

2) Fails to carry out her prescribed VIEW activities without good cause.

C. Reasons for Applying VIEW Sanctions

The following are reasons for applying VIEW sanctions:

1) Failure to report for reassessments, job interviews or other required interviews;

2) Failure to actively participate in any VIEW component or activity or to complete requirements designated in the Agreement of Personal Responsibility or Activity and Service Plan, the local Employment Services Plan and State policy. This includes failing or refusing to complete and/or return forms or provide other information by the required date;

3) Failure to accept bona fide job offers. A bona fide job offer is an actual job offer given in good faith without dishonesty, fraud or deceit. The job offer must:

a) not be beyond the physical or intellectual capabilities of the participant;

b) provide at least federal minimum wage or the prevailing wage for an occupation not covered by minimum wage standards;

c) not require travel time from the participant's home to the jobsite that exceeds one hour each way, based on the transportation available to the participant.

4) Termination of employment without good cause. A sanction will be imposed in the following circumstances:

a) removal from a community work experience or public service program work site for misconduct or violation of employer rules governing the work site;

b) termination from unsubsidized or subsidized employment by the employer due to problems with attendance and/or performance or inappropriate behavior, without good cause;

c) non-participation for the assigned hours in a component other than FEP. Participants in FEP will only be sanctioned if the employer requests that the participant's placement be terminated;

d) quitting a job, refusing a bona fide offer of increased work hours, or requesting a reduction in work hours without good cause, including FEP.

D. Documentation Required for Failure to Report for Assessment, Reassessment, Job Interviews or Other Required Interviews;

1) Correspondence advising the participant of the scheduled interview. The required contents of this correspondence are described at 1000.8.

2) The Activity and Service Plan (unless the recipient fails to appear for assessment, or appears but refuses to participate in the assessment) identifying the VIEW activity to which the participant was assigned and any actions required by the participant.

3) Contact log documenting all contacts with the participant.

4) A copy of the communication form sent to the EW to sanction/terminate the case.

E. Documentation Required for Failure to Report to or Complete Job Search, Job Readiness, Vocational Education and Training, Job Skills Training, Education Below Post-Secondary.

1) An Activity and Service Plan form showing that the participant was assigned to Job Search, Job Readiness, Vocational Education and Training, Job Skills Training, Education Below Post-Secondary and stating the actions required by the participant.

2) Any letters and phone calls which may have been made prior to the scheduled activity (such contacts are not required by **guidance**).

3) Any referrals to the education, training or service provider, or employer.

4) Contact log documenting all contacts with the participant.

5) Any records of participant's performance or progress in an activity.

6) Any records of participant's attendance or the VIEW Attendance/Performance Rating Sheet.

7) A copy of the communication form sent to the EW to sanction the case.

F. Documentation Required for Failure to Report to or complete a Work Experience, Public Service Program, or Full Employment Program Assignment

1) Activity and Service Plan showing that the participant was assigned to Work Experience, Public Service Program, or Full Employment and stating the actions required by the participant.

2) VIEW Referral to Work Site form.

3) Work Experience Attendance and Performance record/Employee Rating Form.

4) Contact log documenting all contacts with the participant.

5) A copy of the communication form sent to the EW to sanction the case.

G. Documentation Required for Failure or Refusal to Accept a Bona Fide Job Offer

1) Description of the job offer, including OJT positions, and the circumstances surrounding the refusal including an analysis of whether the job offer met the definition of a bona fide job offer.

2) All contacts with the employer.

3) Contact log documenting all contacts with the participant.

4) A copy of the communication form sent to the EW to sanction the case.

H. Documentation Required for Termination of Employment, Reduction in Wages or Refusal of a Bona Fide Offer of Increased Work Hours

1) Description of the job, including OJT employment**,** and circumstances surrounding the termination of employment, reduction in earnings or refusal of increased work hours.

2) Contact log documenting all contacts with the participant.

3) A copy of the communication sent to the EW to sanction the case.

I. Advance Notice of Proposed Action to Sanction

1) This notice is sent to participants who do not comply with the VIEW program requirements. It provides notification that the TANF benefit will be suspended. This notice is required prior to sanctioning.

2) Upon determination to sanction the client for noncompliance, the ESW must take action to begin the sanction process. Based on agency procedures, the ESW will either send the client the VIEW Notice of **Sanction/**Termination (032-02-0307) or the Advance Notice of Proposed Action within 3 business days of the missed appointment. Alternately, the ESW will immediately notify the EW who will send the ANPA within 3 business days of receipt of the notification.

3) The ANPA will inform the participant of the specific requirement which was not met, and advise the participant to contact the ESW within 10 days from the date the Notice was mailed in order to establish good cause and prevent suspension of the TANF grant.

a) The Notice will give the participant at least 10 days from the date the ANPA is mailed to provide good cause. If the participant does not respond to the ANPA by the date given, she will be sanctioned.

b) If the participant responds to the ANPA, the information becomes part of the documentation needed to determine if the sanction will be imposed. If the participant does not present good cause, she will be sanctioned.

J. Sanction Procedures

1) In agencies in which both the VIEW program and TANF benefits are not managed by one case manager, the ESW will advise the EW that a sanction is required, when to impose a sanction, and which sanction to impose. An automated message is sent to the EW via the automated system to impose the sanction and a manual communication form should be sent. The EW will send the participant the Advance Notice of Proposed Action to affect payment which explains the reason for the sanction, the amount of benefit reductions to be imposed, and the duration of the sanction. At agency option, the VIEW Notice of S**anction/** Termination may be sent prior to referral of the case to the EW for sanction.

2) For the purposes of recording and establishing sanctions, the sanction period begins on the date the participant was in noncompliance. This date is recorded in **ESPAS as the date of referral for sanction**. The effective date on the Advance Notice of Proposed Action

is the beginning of the sanction period for purposes of suspending assistance. This date will be entered in ESPAS as the closure date of the VIEW enrollment.

3) The sanction will be imposed the first month following the month in which the case was referred for sanctioning, if administratively possible. If not, the sanction will be imposed the following month.

4) If the participant requests that the TANF case be closed following the referral of the case for sanctioning, the EW will enter the sanction in ADAPT prior to closing the case.

5) In an open TANF case, if the recipient terminates employment, the EW may obtain the information first. If so, the EW will notify the ESW. The ESW will contact the employer and/or participant to determine if sanctioning is appropriate.

6) If a non-parent caretaker is subject to a VIEW sanction, the caretaker is to be removed from the TANF grant and the VIEW enrollment closed. The non-parent caretaker will not be added back to the TANF grant during the current period of TANF assistance. The caretaker may only be added to the grant after the TANF case closes and the caretaker completes a new application requesting assistance for herself and the child(ren).

K. Sanction Periods

A TANF or TANF-UP recipient will have her TANF grant suspended for the following periods:

1) For the first sanction, the grant will be suspended for a minimum period of one month and will continue to be suspended until the client complies.

2) For the second sanction, the grant will be suspended for a minimum period of three consecutive months and will continue to be suspended until the client complies.

3) For the third and subsequent sanctions, the grant will be suspended for a minimum period of six consecutive months and will continue to be suspended until the client complies.

4) A participant may perform a verifiable act of compliance during the fixed sanction period. The TANF payment, however, will not be reinstated until after the fixed sanction period has ended.

5) The months during which the participant is sanctioned will count toward the two year time period limitation. The "VIEW Sanction Reminder Notice" (032-03-643) will be generated by ADAPT 15 days prior to the end of the minimum time period for the sanction. A second notice will be generated 90 days after the first notice is sent. The notices will be sent to the local agency's printer. The agency will send the letters to the participants. The notice can be located on the intranet at http://www.localagency.dss.state.va.us/divisions/dgs/warehouse.cgi.

6) When an individual is receiving TANF and the category changes to TANF-UP or vice versa, the sanction count continues. For example, if an individual is sanctioned in a TANF case and the category changes to TANF-UP, the original sanction continues and must run its course in the TANF-UP case. Any new sanctions the individual incurs as a recipient of TANF-UP count as being in addition to the sanctions the individual received while being required to participate as a TANF case. If the sanctioned individual leaves one TANF-UP assistance unit

and becomes a member of another TANF-UP assistance unit, the sanction will follow that individual. The sanction will not remain imposed on the assistance unit the individual left. Only one assistance unit at a time will incur a sanction created by the same individual.

7) The ESW will advise the EW of the effective date on which to lift a sanction. Sanctions cannot be lifted during the fixed period **but an act of compliance may be completed or proof of exemption may be provided**. **If a participant provides verification that he has become exempt during the fixed sanction period and the exemption still exists at the end of the fixed period, the sanction will be lifted as of the date the fixed sanction period ends. If a participant completes an act of compliance, the sanction will be lifted as of the date the fixed sanction period ends.**

Additionally, when a participant provides verification that he has become exempt after the fixed sanction period has ended, the ESW will notify the EW to lift the sanction as of the date the exemption was verified. When a participant complies after the fixed sanction period has ended, the ESW will notify the EW to lift the sanction as of the date of compliance.

8) The EW will impose the sanction even if a participant becomes exempt after the Advance Notice of Proposed Action has been sent to the recipient. There are **two** exceptions to this rule:

a) If it can be established that the participant actually became exempt during the time she was required to participate, and verification is received before the sanction is imposed, the EW will not impose the sanction. However, this information must be communicated in writing to the ESW for final determination.

b) If the participant **who has been referred for the first sanction** obtains and verifies full-time employment (at least 30 hours per week and at least minimum wage) prior to the effective date of the proposed sanction, the EW will not impose the sanction. **The ESW will remove the sanction referral information from ESPAS.** The ESW must advise the EW of this information **so the sanction screen can be deleted in ADAPT as well**. **If the client is referred for sanction in the future, it will be a referral for the first sanction.**

9) If an individual changes assistance units, the sanctions received in prior assistance units follow the individual. In other words, changing assistance unit does not remove the sanction from the individual's past record. For purposes of recording sanctions in **ESPAS**, the sanction information should be entered on the referral record for the individual who incurred the sanction.

Example: TANF-UP household with two mandatory participants. Caretaker 1 **("Mom")** is referred for sanction. Caretaker 2 **("Dad") has participated in VIEW as required and** remains in compliance. The sanction referral data is entered only on the **VIEW enrollment** for Mom. **Her enrollment** is closed **when the sanction becomes effective**. In order to provide ongoing services to Dad **during Mom's sanction period (which will suspend the TANF case for the household), the VIEW enrollment for Dad will remain open. If**

Mom later leaves the home, the TANF case will be reinstated for the remaining household members **the following month after the sanction month** and Dad will continue to participate in VIEW.

Note: If Mom moves into another TANF household or applies for assistance, she will still be subject to the sanction she incurred while residing with Dad.

10) Beginning 1/1/12, participation in the SNAP Employment and Training program (SNAPET) is voluntary. If an individual fails to participate in the SNAPET program, the household's SNAP benefits will not be reduced the SNAPET enrollment will simply be closed and all SNAPET supportive services will be terminated. Due to this elimination of sanction in the SNAPET program, VIEW participants who are subject to a VIEW sanction will no longer be subject to a comparable sanction for SNAP purposes.

1000.21 – COMPLIANCE

A. Compliance occurs when the participant who failed to comply and has been sanctioned performs a verifiable act of compliance to lift the sanction during or after the fixed sanction period. A verifiable act of compliance for the participant will be either continuing in, or completing an assigned activity.

When the TANF case closes with a sanction in place: If the TANF case is closed during the sanction period, the act of compliance may be met during the pending status of a reapplication. The client is responsible for contacting the ESW to learn how she can comply with program requirements.

Once the client has complied, the ESW will communicate this information to the EW as soon as possible. If the minimum fixed period has not passed at the time the client complies, the sanction will be lifted effective with the end of the fixed period. (Note: If the case is approved in a sanction, and the payment suspended, each of the months of suspended payment, including a partial month, will count toward the fixed sanction period.) If the minimum fixed period has passed once the client complies, the sanction will be lifted effective with the date of compliance.

If the TANF case is approved, the ESW will complete an assessment and have the client sign a new APR and complete a new Activity and Service Plan. The new APR will show the months of VIEW eligibility remaining. The ESW will open a new enrollment in ESPAS with the new assessment date as the start date. As part of the ESPAS data entry, the ESW will review the VIEW clock and make adjustments if needed. The ESW will send a communication form requesting that the EW update AEGNFS with the new APR date and run ED/BC.

If the client complied but the TANF application was not approved, the ESW will document the compliance in the record.

When the TANF case remains open during the sanction: If the case was open at the time the client complied, the ESW will reassess the client and advise the client of the number of months of VIEW eligibility remaining and complete a new Activity and Service Plan. A new enrollment will be opened in ESPAS with the new assessment date as the start date. The ESW will review the VIEW clock and make adjustments if needed.

If the individual is applying for SNAP as well as TANF, the TANF sanction is not necessarily cured by complying with SNAPET requirements. The individual must complete an act of compliance that matches the reason for the VIEW sanction. If that action is no longer available or appropriate, any other verifiable act of compliance deemed acceptable by the ESW will cure the sanction. This determination should be made on a case-by-case basis.

A TANF-UP case that is referred for sanction or in a sanction may not switch the individual who is participating in VIEW to avoid or cure the sanction. Once the sanction is cured, and the recipients wish to change the VIEW participant, they may do so upon request and after advisement from the ESW or EW.

Supportive services may be provided to a participant during the time she is performing a verifiable act of compliance. (See 1000.12C for guidelines). Ongoing supportive services may also be provided to the other mandatory participant in a TANF-UP household who has continued to comply even when the sanctioned participant remains in the fixed period of sanction. Reasonable accommodations must be provided to individuals with verified disabilities during the time they are performing verifiable acts of compliance and to make it possible for individuals to perform verifiable acts of compliance.

1. Employment which meets the following conditions represents a verifiable act of compliance for all situations: the employment is verified, it was obtained after the sanction was imposed, it is for **20** hours per week or more and pays at least minimum wage, it continues for at least two weeks after the client reports the job to the agency, and the client is still employed at the end of the fixed sanction period. The participant is still required to comply with other program requirements in conjunction with employment when applicable.

2. A verifiable act may be defined in these situations as follows:

   a. For failure or refusal to report for an appointment or required interview (excluding the initial assessment interview) - keeping another scheduled appointment or interview.

   b. For failure or refusal to complete and/or return forms or other information to the agency by a required date - returning and/or completing the required form or other information.

   c. For failure or refusal to begin, to continue in or participate in an assigned activity - beginning, continuing in or participating in an activity for up to two weeks to show a good faith effort to comply.

   d. For failure or refusal to complete an assignment to a program activity - completing an assignment.

   e. For failure or refusal to obtain or accept employment – if the client obtains employment during the sanction, the employment must be maintained through the end of the sanction period.

   f. If the assignment from which a participant has been sanctioned is no longer available or appropriate, compliance may consist of participating in or completing a different activity. In the case of a participant who was sanctioned for failure to participate in her CWEP or PSP assignment, the client will be allowed the opportunity to develop her own worksite in order to comply.

B. The Activity and Service Plan should reflect the activity the client is to complete in order to comply and the date by which the activity is to be completed. The information from the Activity and Service Plan developed to assist the client in complying with program requirements will not be entered into ESPAS. Once the participant has performed a verifiable act of compliance (with the exception of compliance based on employment), the sanction is lifted at the end of the fixed sanction period, or retroactively to the date the participant complied if compliance was after the end of the fixed period.

C. Effective Date of Compliance:

1. The effective date of compliance for an appointment/ interview or for forms/ other information not completed or returned to the agency, is the date the client keeps the appointment, participates in the interview, or completes/returns the forms/information.

2. Compliance for a program activity must meet the conditions for a verifiable act of compliance outlined in 1000.21A. Once those conditions are met, the effective date of compliance for activities other than employment is the date the client completed the activity.

3. For employment that meets the conditions for a verifiable act of compliance outlined in 1000.21A, the effective date of compliance will be:
    a. the end of the fixed sanction period, or
    b. the date the participant complied, if compliance was after the end of the fixed sanction period, or
    c. the date the employment was verified, whichever comes last.

EXAMPLE: The client is in a one month sanction for the period 1/1 through 1/31. On 1/12, the client reports that she has found employment and is asked to submit verification of her employment, wages and hours. She does not submit the required verifications until 2/6. If the client's employment meets the conditions outlined at 1000.21A(1), the EW will be notified and the sanction will be lifted effective 2/6 with benefits prorated for the balance of the month.

1000.22 Transitional Services

Former VIEW participants are eligible for transitional services once they leave TANF, either because they have reached the end of the two-year time period, or because the TANF case has closed for another reason. Except for Transitional Education and Training (TET), eligibility for specific transitional services is based on the client's employment status. During the first 3 months after TANF case closure, a client may receive transitional services, with the exception of TET or a VTP, if otherwise eligible, even if the case was referred for a VIEW sanction, or closed while in a VIEW sanction. For a two parent household with both parents enrolled in VIEW, the participant's eligibility for transitional supportive services listed in 1000.22A will be evaluated on an individual basis. This may result in one parent receiving these services while the other parent is ineligible due to sanction.

Eligibility for transitional services starts the first day of the month after TANF case closure and may continue through the last day of the third month after TANF case closure, or through the last day of the twelfth month after TANF case closure, depending upon the specific transitional service. Note: an individual who is participating in VIEW while residing in a two parent household will not be eligible for transitional services if he leaves the home.

An ESPAS record must be opened for Transitional Transportation (TT), TET, and VTP. ESPAS is accessed through the ADAPT main menu, option 14. For detailed instructions, refer to the ESPAS Manual at http://localagency.dss.virginia.gov/support/adapt/files/espas/espasmanual.pdf.

If a client with a closed TANF case reapplies and is found eligible for TANF, she will no longer qualify for transitional services. VTP enrollments are closed at reapplication rather than at TANF case approval and are not reopened even if the application is denied. Clients who are referred to or volunteer for VIEW after TANF case approval are eligible for VIEW supportive services. (See 1000.12). If the TANF case closes again, the client may again be eligible for transitional services.

The local agency should include guidance regarding the use of, and any limitations on, transitional services in its Standard Operating Procedures contained in the VIEW Annual Plan. The ability of a local agency to pay for transitional supportive services and TET is based on the availability of VIEW funds.

Non-parent caretakers whose needs have been removed from the TANF grant for any reason (e.g. noncompliance, excess income for an AU of 1, etc.) are not eligible to receive transitional services if they are still receiving a TANF payment for the child.

A. Transitional Supportive Services

1. Transitional Child Care Paid From Child Care Funds – Twelve Month Maximum.
Child Care assistance may be provided for up to twelve consecutive months, after the TANF case closes, to any former TANF recipient (VIEW or non-VIEW) who meets the eligibility requirements outlined in Child Care guidance (Vol. VII, Section II, Chapter D). Child Care can be provided for employment, and, if allowable by Child Care guidance, for education. Transitional Child Care can start no earlier than the first day of the month after the month of TANF case closure. The eligible participant will be required to pay **5% to 10%** of monthly gross income **toward the cost of child care**. **The exact amount of the co-pay, which will be based on family size and income, will be determined by the Child Care worker.**

2. Transitional Child Care Paid From VIEW funds – 3 Month Maximum. If the participant is determined ineligible for transitional child care based on income, and needs child care in order to work, the agency may pay for child care from VIEW funds for up to 3 months beginning with the month after TANF case closure. The client will not have to **make a co-pay** but will be required to pay any amount over the maximum reimbursable rate.

3. Transitional Medical/Dental Services – 3 Month Maximum. VIEW funds may be used to pay for transitional medical/dental expenses for a working client for up to 3 months, beginning with the month after TANF case closure, when the services relate directly to employment. Payment for medical/dental services will be limited to services not covered by the state Medical Assistance Plan (Medicaid). Services include medical statements or other necessary medical verifications, dentures, glasses, orthopedic shoes, or other items needed to maintain or upgrade employment.

4. Transitional Work-Related Expenses – 3 Month Maximum. VIEW funds may be used to pay for transitional work-related expenses for a working client for up to 3 months, beginning with the month after TANF case closure, when the services will help the client retain or upgrade employment. Transitional Work-Related Expenses include one-time and on-going expenses. Examples of work related expenses include: fees for birth certificates, professional and license fees; registration/graduation fees; picture IDs; uniforms or other required clothing or shoes; safety equipment or tools; car repairs and insurances.

5. Transitional Emergency Intervention Services – 3 Month Maximum. VIEW funds may be used to pay for transitional emergency intervention services for up to 3 months, beginning with the month after TANF case closure, to help a working client experiencing an emergency situation retain employment. Examples of emergency intervention services include the provision of food or help with shelter costs when the need for such services arises from an emergency situation and the client's employment will be jeopardized if the services are not provided. Automobile expenses are not allowable as an emergency intervention service.

6. Transitional Transportation – Twelve Month Maximum. Transitional Transportation may be used to pay for any employment-related transportation expense for working clients which is allowed under VIEW guidelines for open TANF cases. (Section 1000.12 contains guidance about the provision of transportation services as a supportive service for participation in any VIEW assignment. Transitional Transportation is limited to transportation related to paid employment, including OJT, only.)

   A former VIEW participant may apply for transitional transportation any time during a fixed 12-month period following TANF case closure. A client who applies after the 12-month period has started will be eligible only for the remaining months in the period.

   A client whose case was referred for a VIEW sanction, or closed while in a VIEW sanction, must have or find employment of at least 20 hours a week at minimum wage or greater within 3 months of TANF case closure in order to be eligible for Transitional Transportation.

Evaluation of continued eligibility and the need for transitional transportation will be made every 6 months. Minimally, the re-evaluation will verify the former VIEW participant's employment hours. The client's failure to respond to requests for information will result in termination of transitional transportation services. Adequate documentation supporting reasons for termination shall be filed in the case record. When Transitional Transportation services are terminated, a written **VIEW Transitional Transportation Notice of Action (032-03-0901)** or letter **providing the same basic information,** must be sent at least 10 days in advance of the effective date of action.

B. VIEW Transitional Payment (VTP)

1) Eligibility for VTP

The VTP is an incentive payment designed to encourage job retention. The VTP will be provided to employed VIEW participants whose TANF case is closed for any reason, except no eligible child in the home or unable to locate, and whose case is not in a VIEW sanction or referred for a VIEW sanction or in an IPV. Neither participant in a TANF-UP household is eligible for a VTP payment if the other participant is in a VIEW sanction or has been referred for a sanction.

The case must contain at least one VIEW participant who at time of TANF case closure was employed at least 30 hours per week with hourly wages of at least the current federal minimum wage. The VTP payment for one participant is $50. When both parents in a TANF-UP case are VIEW participants and are each employed at least 30 hours per week with hourly wages of at least the current federal minimum wage, the payment is $100. If one parent leaves the two-parent household, the payment will be reduced to $50 dollars.

The VTP is initiated in ADAPT by the EW. A onetime notice is sent to the client by the EW that informs the client that her case is eligible for the payment, the reason for the payment and conditions that will terminate the payment. (See 901.13.) Once the EW opens a VTP, an ALERT will be sent to the VIEW worker informing her that a VTP is open in ADAPT and to open a VTP record in ESPAS. The VTP should be opened within 5 days, but no later than 30 days after the effective date of the TANF case closure.

The VIEW worker must have a copy of the previous month's pay stubs or verification of employment (not over four weeks old) before opening the VTP record. If the worker does not have the previous month's pay stubs or verification of employment, the ESW is to get the pay stubs or verification from the EW. The number of pay stubs will vary based on the client's pay schedule. Once the VTP is opened in ESPAS, the VIEW worker is to send the VIEW participant a new Activity and Service Plan with the appropriate boxes checked for VTP.

If the VIEW worker determines the EW opened the VTP in error (Example: client not working 30 hours per week at federal minimum wage) the VIEW worker is to immediately send a communication to the EW to close the VTP and provide the reason. The VIEW worker should leave the VIEW record open and continue regular job follow-up if necessary.

If a client who is approved for a VTP appeals the TANF case closure and requests that the TANF grant be reinstated during the appeal, the VTP will be stopped. In the event that the client would like to continue participating in VIEW during the appeal and no VTPs have been issued, the VTP will be closed using closure code 22. This closure code will allow the ESW to then reopen the previous VIEW enrollment. If the client loses the appeal and the TANF case is closed, the EW will again evaluate eligibility for a VTP following VTP guidelines. If the client is eligible for VTP, the 12 month VTP eligibility period will begin the month after the second TANF case closure.

If a client who is approved for VTP relocates to another locality in Virginia, the agency will transfer the VTP case. The Eligibility Worker in the receiving agency will determine if the client will continue to meet all of the VTP eligibility requirements after she relocates. If the client will no longer be eligible for VTP, the EW will send the client a Notice of Action regarding the VTP case closure.

2) When to open and close a VTP

a) <u>VTP should be opened when:</u>

1. the client is in VIEW at TANF case closure;
2. the TANF case is closed for any reason, except when no eligible children are in the home, or when the agency is unable to locate the client;
3. the VIEW participant is employed an average of 30 hours or more per week;
4. the VIEW client is earning the federal minimum wage or higher;
5. the VIEW participant is not in a sanction or referred for sanction at case closure.

b) <u>VTP must be closed when:</u>

1. the client reapplies for TANF;
2. the VTP recipient fails to provide verification of employment by cutoff in month six of the VTP period;
3. there are no eligible children in the home (including a child who is ineligible due to truancy;
4. the worker is unable to locate the client;
5. the client requests closure of the VTP;
6. the client is no longer working or client's hours decrease to less than 30 hours per week.
7. the client's wages decrease to less than the federal minimum wage;
8. the VTP recipient moves to another locality that is not in Virginia; or
9. the twelve-month VTP period ends.

3) VTP Follow-up

When the client is eligible for a VTP payment, regular job follow-up will end even if the **minimum three** monthly job follow-ups have not been completed. The worker will close the VIEW record with closure code 23, "eligible for VTP, close VIEW record." The VIEW closure date should be at the end of the same month that the TANF case closes. The ESW will then open a VTP enrollment using the hours and wage information for the 1st job follow-up and for the 2nd, 3rd, 4th, 5th and 6th. The six job follow-ups will be entered at the same time. Enter the 1st job follow-up and transmit. Enter the 2nd job follow-up and transmit. Continue until all six have been entered.

Example: The ESW receives notification that the TANF case will close effective December 31st and the client is eligible for VTP. On or after January 1st, the ESW enters the December follow-up information, verifies the GT status of the TANF case, and then closes the regular VIEW enrollment in ESPAS. After the regular VIEW enrollment has been closed, the ESW will open a VTP enrollment using January 1st as the employment start date.

Note: Regular VIEW job follow-ups end when VTP follow-ups begin. Regular VIEW follow-ups made while the client had an open TANF case do not count toward the required number of VTP follow-ups.

ALERT #1024 will remind the worker on the 1st day of the 5th month to send out the VIEW Transitional Job Follow-up letter for the 7th month. The letter is due back the 5th day of the 6th month. Access to the Job Follow-Up letter is from the ESPAS Main Menu Option 4. If the worker puts in one client ID, the letter will print for that client. If the worker does not put in a client ID, letters will print for all the VTP cases that will be due a 7th month job follow-up. On the 1st day of the 6th month ALERT #1025 will remind the ESW to enter the 7th through 12th month job follow-ups if the client is still eligible for the VTP. The ESW must enter the 7th through 12th job follow-ups no later than the 15th day of the 6th month. If the job follow-ups are not entered in ESPAS by the 15th of the month, ALERTS will go to the EW on the 16th day instructing the EW to close the VTP in ADAPT effective the first day of the 7th month.

If the job follow-up is not returned or the job follow-up and documentation does not show the client is employed at least 30 hours per week earning at least the federal minimum wage, the payment is to stop. If the hours are less than 30 per week when the 7th job follow-up information comes back, close the VTP with closure code 20. The client is no longer eligible for the VTP. The ESW will also send an Employment Services Communication Form (032-02-0072-08) to the EW requesting her to close the VTP in ADAPT.

The VTP should be terminated and the communication form sent when employment ends, hours fall below 30 per week, wages decrease to below the current federal minimum wage, when the client changes jobs causing a break in employment which results in the average hours for the month falling below 30 per week, when the only eligible child leaves the home, and when the client does not send the job follow-up back by the due date with appropriate documentation. The VTP must also be terminated when the employment is with an educational or training institution that closes for the summer (longer than thirty days) and the client cannot work.

Official closures by educational or training institution employers for quarter or semester breaks (lasting less than thirty days) during which the client cannot work will not impact the VTP.

Once the client loses employment and the VTP is stopped, she continues to be ineligible for VTP as long as she is in the transitional period even if she becomes employed again.

C. Transitional Employment and Training Services (TET)

Transitional employment and training services are available for up to twelve months after TANF case closure for qualified VIEW participants contingent on local agency VIEW funding. All TET services must be approved by the ESW and detailed on an Activity and Service Plan following general guidelines at 1000.11(A). A new Activity and Service Plan will be completed whenever there is a change in TET assignments. Transitional employment and training services include all activities listed at 1000.13 and 1000.14 except FEP and CWEP. Participants receiving TET services may also be eligible for other transitional services listed at 1000.22 if they meet the eligibility criteria.

To qualify and continue to be eligible for transitional employment and training services, the following criteria must be met:

1. The activities are designed to maintain employment income, increase employment income or prevent the loss of employment income by the participant.

2. The participant was enrolled in the VIEW program at the time of case closure.

3. The TANF case of which the individual was a member is closed.

4. The case was not in a VIEW sanction or referred for VIEW sanction at the time of the TANF case closure.

5. Any activity to which the participant is assigned must be completed within 12 months or less.

6. If the TET participant is not employed, any transitional employment and training assignment must be designed to lead to employment within 60 days. If the individual is not employed at least **20** hours per week and earning at least minimum wage by the 60th day, the TET case must be closed.

7. Only individuals who have not completed an associate, four-year, or higher degree may participate in an education or training activity.

8. Education and training activities must prepare participants for jobs in the community or jobs projected to be available in the community.

9. Participants enrolled in education or training must meet the satisfactory progress requirements of the educational institution. For education below the post-secondary level, including ABE and GED, the individual must obtain one grade level increase every three months. Workers are to use VIEW attendance forms and review grades each grading period to monitor satisfactory progress.

1000.23- PARTICIPANTS WHO LEAVE THE VIEW PROGRAM AND RETURN PRIOR TO THE END OF THE TWO YEAR PERIOD

A. Participants returning to the VIEW program prior to the end of the 24 month time limit on TANF will be coded by the EW as priority referrals, and served as soon as possible. The ESW may waive the up front job search and place the participant directly into a work activity.

B. An individual whose case was closed while in a sanctioned status and who reapplies and is a **mandatory** VIEW referral, must perform a verifiable act of compliance before a TANF payment may be issued.

1000.24 - HARDSHIP EXCEPTIONS

Exceptions to the two year limit on TANF assistance may be granted under certain circumstances which are specified by the Code of Virginia and outlined below.* (See 901.11 for reasons that the client might be eligible for assistance during the POI based on disability rather than hardship).

A. Application for An Exception - The client is notified that an extension of benefits is possible by the TANF 24-Month Advance Notice of Proposed Action (032-03-0368). This notice is sent by the eligibility worker 60 days prior to the end of the 24-month TANF eligibility period.

The ESW will explain the criteria for a hardship exception to all VIEW participants who are in the final two months of receipt of TANF. However, the ESW is only required to evaluate the individual for approval of a hardship exception when the participant provides a written request to be considered for an exception. The client must submit a signed and dated written request to the ESW, postmarked within the 60-day period prior to the effective date of TANF case closure shown on the notice, identifying the specific type of exception requested. The agency may assist a client who is illiterate in writing the request, but the request must be submitted timely and must be signed and dated by the client. An individual who has exhausted the 24-month TANF eligibility period and whose TANF case has already been closed may not apply for an exception.

B. Exceptions and Eligibility for TANF and VIEW - If a hardship exception is granted, TANF benefits will **be issued** for the period of the exception as long as all TANF eligibility factors continue to be met. The client will be a mandatory VIEW participant and will be eligible for supportive services.

C. Criteria for Granting Hardship Exceptions - Hardship exceptions may be granted under the following circumstances provided the client meets all general and specific eligibility criteria:

1. Exceptions of up to one year

   a. The client lives in an area of high unemployment.

   b. The client has been enrolled in employment-related post-secondary education or skills training unless the education or skills training was self-initiated.

2. Exceptions of up to 90 days

   a. The client is unable to find employment.

   b. The client has lost her job.

D. General Eligibility Criteria for Hardship Exceptions

In order to be considered for a hardship exception, the participant's program participation must be evaluated. Determination must be made that:

1. The participant was not sanctioned **more than one time for** failure to satisfactorily participate in

* Code of Virginia 63.2-613

any assigned component activity while in the program. Assigned component activities must be reflected on the client's Activity and Service Plan.

2. The participant was not sanctioned for leaving employment **without good cause** while enrolled in VIEW.

   In the case in which a sanction was improperly imposed, including situations in which the sanction was the result of non-compliance caused by the verified disability of the participant or the verified disability of a household member in the care of the participant, the sanction will be removed and the participant may be considered for a hardship exception if otherwise eligible.

E. Conditions Under Which a Hardship Exception May Be Granted for Up to One Year

A hardship exception may be granted by the local agency for any period of time, up to one year, based on a lack of job availability or for completion of employment- related education or training if the client meets the general eligibility criteria outlined above. The client must participate in the VIEW program and carry out all program assignments. The hardship exception will be reevaluated every 90 days to ensure that the basis for the exception continues to exist and that the participant continues to meet all program and exception requirements.

1. Factors relating to job availability are unfavorable

   a. The client lives in an area where the unemployment rate has been 10% or higher for the **six months** preceding the client's **request for a hardship exception**. Unemployment rate information is available from the Virginia Employment Commission **and on SPARK at** http://spark.dss.virginia.gov/divisions/bp/tanf/tools/view.cgi

   b. The client is registered with the Virginia Employment Commission, is assigned to a job search activity and to any other activity that the agency believes will facilitate employment, and is actively seeking employment.

2. The client is in an employment–related post-secondary education or training program which can be completed within one year

   a. Participants enrolled in **a** self-initiated education or training **program that began prior to his/her entry into the VIEW program** are not eligible for an education or training-related hardship exception.

   b. The participant must have been enrolled in employment-related post-secondary education or skills training for at least 9 of the previous 12 months, have been satisfactorily participating, and must be able to complete the course of study in no more than one year of full time enrollment if the exception is granted.

c. In the case of a participant with a verified disability, or a household member with a verified disability cared for by the participant, the participant must have been enrolled for at least 6 months out of the previous 12 months, have been satisfactorily participating for those 6 months, and be able to complete the course of study in no more than one year if the exception is granted. The ESW will work with the participant and the educational institution or skills training program to arrange any accommodations needed by the participant in order to complete the course.

d. For purposes of this hardship exception, the following education activities are not considered "employment-related education or training": adult basic education (ABE), General Educational Development (GED), English as a Second Language (ESL, ESOL), High School.

F. Conditions Under Which a Hardship Exception May Be Granted for Up to 90 Days

A hardship exception of up to 90 days may be granted by the local agency based on the participant's inability to find employment or loss of employment if the participant meets the general qualifying criteria outlined above.

1. The client is actively seeking but is unable to find employment

a. The participant is enrolled in a job seeking activity and has been satisfactorily participating, but has been unable to find employment that, in combination with all other income (this includes earned and unearned income) or sources of assistance available to the individual, would pay an amount equal to or exceeding the TANF cash benefit plus **a** standard deduction of **$155**.

2. The client has been employed but has lost employment due to factors not related to job performance.

a. The participant has applied for unemployment compensation from the Virginia Employment Commission and has been denied.

b. The participant is able to provide a copy of the determination of ineligibility for unemployment compensation from the Virginia Employment Commission.

c. The Virginia Employment Commission determination of ineligibility verifies that eligibility for unemployment compensation would have existed if the participant had worked sufficient hours to qualify.

G. Responsibilities of the ESW – Decision on Exception Request

1. The ESW will notify the participant within 5 working days that the request for a hardship exception as been received. The notification to the participant will provide the date by which a decision will be made. The date will be no longer than 30 days from receipt of the client's hardship exception request.

2. The ESW will evaluate the request based on **current guidance** and will complete the Hardship Exception Determination Form (032-03-0376) and submit it to the Employment Services supervisor for approval of the recommended action.

3. The ESW will send the client a Notice of Hardship Exception (032-03-0377) notifying the client of the approval or denial of the hardship exception request, and the reason for approval or denial.

4. If the hardship exception request is denied, the notice will also inform the client of the TANF case closure date. **The client may appeal the denial of the hardship exception as well as the closure of the TANF case.**

5. If the hardship exception request is approved, the notice will explain the terms of approval including the begin (start) and end date of the exception. Additionally,

   a. The ESW will determine the length of an employment-related education or training exception, up to a maximum one year, based on the time necessary for the participant to complete the course of study.

   b. The ESW will determine the length of an exception based on **an unfavorable** labor market, up to a maximum one year, or on an exception based on unemployment or loss of employment, up to a maximum of 90 days, based on the client's individual situation, local labor market considerations, and planned outcomes from program participation.

6. If the hardship request is approved, the notice will set a first exception reassessment date no later than 90 days after the date of the notice.

H. Responsibilities of the ESW– Management of Approved Exceptions - General

1. The ESW must monitor all approved exceptions in order to verify that the reason for the exception still exists and that the client continues to participate in assigned program activities. If the reason for the exception ceases to exist, or if the participant ceases to participate in assigned activities and would be sanctioned during regular program participation, the ESW will notify the EW who will send the client the Advance Notice of Proposed Action (032-03-0018) terminating the case at the earliest possible date.

2. At the same time, the ESW must attempt to contact the client immediately by letter and telephone to determine if the client has good cause for failure to participate in program assignments. If the client has a good cause reason for failure to continue with program assignments, and, in the case of a verified disability, if the reason for non-compliance can be remedied by reasonable accommodations, the agency may allow the client to continue in the activity. The ESW will notify the EW to not terminate the case.

I. Responsibilities of the ESW – Management of Approved Exceptions of Up to One Year

1. In addition to the general management expectations outlined above, the ESW must reevaluate each exception granted based on **an unfavorable** labor market or for employment-related education or training of up to one year at least every 90 days. In the case of exceptions based on employment-related education and training, the ESW will verify that the participant is still enrolled, is making satisfactory progress, and is anticipated to complete the course of study within the period granted by the exception.

J. Responsibilities of the ESW - Extension of Hardship Exceptions

Under some circumstances, a hardship exception of up to 90 days - based on a client's failure to find employment or loss of employment - can be extended. In no case will an exception of up to one year based on **an unfavorable** labor market or for employment-related education or training be extended past the initial date.

1. The local agency may request an extension of a 90-day hardship exception on the behalf of the client. The agency will submit the written request to the Virginia Department of Social Services, Division of Benefit Programs, Economic Assistance and Employment Manager.

2. An extension can be granted only during, or as a continuation of, an existing hardship exception. **90-day** extensions of the 90-day hardship exception will be granted only in very limited circumstances and only to persons who demonstrate extreme hardship. **In no case will the hardship exception period (the original period plus any extensions) exceed a total of one year.**

3. Prior to submitting a request for an extension, the ESW must reassess the client and assign the client to work experience, FEP, or job skills training in addition to a job search activity in order to maximize the client's opportunity to find employment. The extension must be requested at least 15 days prior to end of the participant's original hardship exception. The extension cannot be requested if the original exception period has ended and/or the TANF case is closed.

4. The agency may follow the same procedures and timeframes to request that the extension be renewed for subsequent periods of up to 90 days if it determines that the client will continue to face extreme hardship.

5. The local agency request for an extension of the 90-day hardship exception must include the following:

   a. The specific reason for the extension request
   b. The period of time for which the extension is requested
   c. Documentation that the client has satisfactorily participated in all assigned activities during the original exception period, and will encounter extreme hardship if TANF benefits are terminated
   d. A description of any individual or extenuating circumstances that the **manager** should consider in making **the** decision**.**

K. Responsibilities of the **Economic Assistance and Employment Manager- Extension of Hardship Exceptions**

The Economic Assistance and Employment Manager of VDSS will base **the** decision regarding extension of TANF benefits past the period of the original exception on the following:

1. The individual met all the general and specific criteria for receiving the original hardship exception

2. The agency placed the client in a job search activity, and in work experience, the Full Employment Program (FEP), or job skills training prior to requesting the extension and the client is participating in all assignments

3. The agency has demonstrated that the individual/family would suffer extreme hardship if benefits were terminated at the end of the exception period

   The **manager** will examine each request separately and act to grant or deny the request for extension within **5** days of receiving the request. The **manager** will notify the client and the agency of its decision regarding the request for an extension.

   The **manager** will follow the same procedures and timeframes to review and act on requests for renewal of the extension period.

1000.25 - TRANSFERS

A. The ESW will transfer within five working days from the date of notification, the entire VIEW record of TANF or TANF-UP participant who moves from one locality to another.

B. **Whenever possible, the** benefit and the VIEW record **should be transferred** together.

C. All service supplements should be updated and closed prior to case transfer.

D. When a VIEW case with no earned income and not in sanction transfers to another agency, the VIEW clock **stops**. **The ESW must complete an assessment prior to re-starting the clock. The reassessment must be completed within 2 weeks of the receipt of the transfer in case.** The receiving agency is responsible for adjusting the clock.

E. When a case with earnings, or one which is in sanction, transfers to another agency, the **24-month** clock continues, **to advance**.

F. The 60-month clock continues to advance.

1000.26 - APPEALS

A. All participants have the right to appeal an agency action to suspend or terminate the TANF payment. The ESW's decision to refer a participant to the EW because of non-compliance will result in such an action.

B. The EW must notify the participant in writing through use of the Advance Notice of Proposed Action every time an adverse action is taken.

C. The notification and fair hearings procedures in the TANF Manual, Sections 401.4 **and 104-106**, will govern all appeals to ensure fair hearings for actions proposed or taken by the agency as a result of noncompliance with VIEW requirements.

D. If the participant files a valid appeal and requests a hearing, as determined by the hearings officer, the TANF or TANF-UP grant may be reinstated until a decision is rendered by the hearings officer.

If the appeal is of a VIEW sanction and the TANF grant is reinstated, the months which pass while awaiting the appeal decision must be added to the 24-month clock. These months will remain on the clock regardless of the appeal decision (105.2). Additionally, the TANF assistance granted during the appeal of a VIEW sanction is not considered an overpayment when the hearing decision is adverse to the recipient. The unsuccessful appeal simply delays the imposition of the VIEW sanction and the consequent loss of benefits to the household.

E. Workers may continue to work with participants during an appeal.

1000.27 - HEARINGS

A. The ESW must follow these procedures for all appeals involving VIEW sanctions:

1) The **ESW will be notified** of the date and time of the appeal hearing by the hearings officer.

2) The local department is responsible for assuring that a representative of the VIEW Program is present during the appeal hearing.

3) Eligibility and Employment Services staff must jointly prepare the summary of facts, which must include both eligibility and participation issues. Additional procedures for fair hearings are found in the TANF Manual, Sections 104 – 106.

4) The ESW will send a copy of the hearing decision to the TANF/VIEW Field Consultant.

B. The ESW must carry out the appeal decisions as follows:

1) If the agency's action is reversed, the ESW must remove the sanction and review the participant's Activity and Service Plan to determine the appropriate component assignment.

2) If the agency's action is sustained, the sanction is imposed and the VIEW case is closed for the required period of time.

1000.28 - CONTRACTS

Agencies may enter into financial agreements with individuals or organizations to operate portions of their Employment Services program. Agencies are bound by State statutes set forth in the Virginia Public Procurement Act and by any local procedures that may supplement the Act. Contracts made with other state entities, including community colleges and Work Force Investment Act (WIA) agencies are not subject to the requirements of the Virginia Public Procurement Act, but may be subject to local procurement procedures.

A financial arrangement between a local social service agency and any other entity for the provision of VIEW activities and services is a contractual relationship and can be entered into only if the standard contract format in Appendix B is used. No other agreement or written arrangement, including an Agreement of Cooperation or a Memorandum of Understanding, can be substituted for the use of the standard contract.

Contracts negotiated at the time the VIEW Annual Plan is developed will be sent to the agency's TANF/VIEW Field Consultant with the VIEW Plan. Contracts developed outside this timeframe will be sent to the Field Consultant as soon as the contract has been signed by both parties. The VIEW Plan will be modified as necessary and sent to the Field Consultant.

The Field Consultant will provide technical assistance to the agency in developing and/or negotiating contracts as needed.

A. Consideration in Contracting

Prior to contracting, the agency must determine what is to be contracted and why. The agency must determine that the contractor can provide services of an equal or higher quality and/or at a lower cost than the agency itself. Care should be taken to insure that the contract represents an extension of services, rather than compensation for services previously provided at no cost. If the contract is with an agency or organization that serves TANF recipients or other economically disadvantaged populations, the contract must contain a certification from the provider that the services being contracted for are not otherwise available from the provider at no cost.

B. Services That Can be Contracted

Any program activity or service may be contracted as long as the agency is able to justify the contract in terms of quality of services, cost, and anticipated outcomes. However, any contract that includes initial client assessment normally the responsibility of an ESW, and/or overall on-going case management of all or part of the agency's VIEW population, must have prior approval by the Field Consultant in consultation with the Home Office.

C. Selection of Service Providers

When selecting service providers, the local agency must take into account such things as the past performance of the contractor in providing similar services, the contractor's demonstrated effectiveness, fiscal accountability, cost efficiency and other factors which the local agency determines are appropriate. A process must exist that documents these factors were considered.

D. Contract Outcomes

The contract should be written so that acceptable performance and outcomes are clear to both parties. Additionally, the contract should make clear how outcomes will be measured and with what frequency. Success should be defined incrementally and in terms of completion.

E. Payment and Reimbursement

The specific terms of contract reimbursement are part of the contract negotiation process and a budget along with payment for a contract should always be linked to contract performance. Payments are typically prorated according to quantifiable rates of progress and/or performance. Most of the time, expenses are submitted for reimbursement. Under specific but rare circumstances, advances are allowed. A detailed budget should be attached to the contract.

F. Contract Duration

Contracts can be negotiated for any period of time agreeable to both the agency and the contractor so long as they terminate by the end of the fiscal year. To allow local agencies maximum flexibility in operating the Employment Services Program, contracts may be negotiated for a period of six months (or less) rather than for a year. Agencies who choose to contract for 12 months and who later become dissatisfied with the contractor's performance may terminate the contract by providing notice as stated in the contract.

G. Contract Requirements

A contract is made up of the following elements; the approved contract format, a scope of services description for each service to be contracted including the costs for that service, and an overall program budget showing the contractor's planned expenditures by category.

1) Format

The agency must use the standard contract format approved by the Attorney General's Office in contracting (See Appendix B, page 6 of this chapter). Other contracts can be utilized in addition, if required by the local government but the standard contract format must always be used. The contract must show the total cost for all contracted services between the agency and the contractor. If more than one service is to be provided, the separate cost for each should be included in the scope of services descriptions and detailed in the overall contract budget.

2) Scope of Services Description

Each service to be provided by the contractor must be described in full. Agencies contracting out more than one service will need to develop a scope of services description for each service.

The description must contain a:

a) Summary of activities included in the service;

b) Explanation of roles of the contractor and agency in providing the service;

c) Explanation of the contractor's responsibility regarding required reporting;

d) Explanation of the agency's responsibility in monitoring contract and terminating if necessary;

e) Description of the numbers and kinds of clients who will receive the service (age 25-35, volunteers, high school graduates, etc.);

f) Statement of the time frame for the service, including beginning and ending dates;

g) Description of the specific anticipated outcomes; and

h) Statement of the cost of the service;

H. Budget

Each contract must be accompanied by a budget for the entire contract showing the contractor's planned expenditures by category.

I. Contract Monitoring

a) It is the responsibility of the local agency to monitor each contract on a frequent basis to ensure both that the terms of the contract are being met and that progress is being made toward achievement of the outcome goals. Monitoring may be carried out through review of reports made by the contractor and by contract site visits.

At a minimum, the agency will require the contractor to submit a monthly client specific progress report as well as quarterly reports and a final report. The quarterly report should include information on overall contract progress and identified problems as well as a report of client outcomes. The final report should provide an objective review of the overall program operations for the contract period as well as client specific outcomes/progress.

b) It is the responsibility of the local agency, based on information from its monitoring of the contract, to determine the appropriateness of future contracts with the same contractor. In all cases in which the agency plans to enter into a second or subsequent contract with a contractor, the final summary report must accompany the new Contract when it is submitted to the Field Consultant. In cases in which the final summary has not yet been completed, all monthly and quarterly reports to that date will be submitted instead.

1000.29 - RECORD RETENTION

The Code of Virginia 42.1-76 places authority to issue regulations concerning retention and destruction of records with the Library of Virginia (LVA). The LVA General Schedule No. 15 governs records maintained by local social service agencies, including VIEW client records. LVA General Schedule No. 02 governs locality fiscal records including purchase orders. While many records can be destroyed three years after **case closure,** there are exceptions to that general rule. These exceptions include situations involving audits, investigations, court cases, and fraud or overpayments related to supportive services among others.

Each local agency must designate a Records Officer who will be in charge of seeing that LVA regulations for record retention and destruction are followed. See http://lva.virginia.gov/agencies/records/retention.asp for information about establishing a Records Officer and to access the specific schedules for record retention and disposition. The Library encourages agencies to contact the Records Analysis Services section at 804-692-3600 with questions about records management.

Appendix A (VIEW Forms) removed 2/1/12. VIEW forms can be accessed at http://spark.dss.virginia.gov/divisions/bp/tanf/forms/

EMPLOYMENT SERVICES PROGRAM FORMS
VIEW

Contract Development Checklist .....

Standard Contract.....

CONTRACTOR
PERIOD OF PERFORMANCE
AMOUNT:
SERVICES PROVIDED:

CONTRACT DEVELOPMENT CHECKLIST

GENERAL CRITERIA:	YES	NO	COMMENTS:
Agency has identified the services or administrative functions needed and the reason for contracting. i.e., LDSS's work becomes more efficient.			
The service is not available in the community free of charge, or at no cost to agency.			
State or local Procurement procedures were followed. Note: If contracting with another State entity, agencies do not have to go out with an RFP.			
If agency has previously contracted with the provider, the following have been evaluated:			
Reports provided timely.			
Required outcomes met.			
If not, section plan developed for improved performance.			
Agency has developed internal procedures for screening and referral of customers to contractor. Staff and contractor have clearly defined procedures for handling absenteeism, lack of progress and other problems that may occur.			
Agency has linked required levels of performance with payment (accepting a minimum number of referrals, placement of target population, payment at designated phases of the contract).			

SCOPE OF SERVICES INCLUDES:	YES	NO	COMMENTS:
Explanation of the roles of the contractor and the agency in providing the service.			
Detailed summary of activities.			
Explanation of the contractor's responsibility regarding reports.			
Description of the numbers and kinds of customers who will receive the service. (i.e., age 25-35, volunteers, high school graduates, etc.).			
Statement of the time frame for the service including beginning and ending dates.			
Description of the specific outcomes anticipated for customers receiving the services, the number of participants to achieve those outcomes and the time frames outcomes will be achieved (i.e., average wage expected and the number obtaining employment, the number completing training, etc.).			
Detailed breakdown of all cost associated with the provision of the service.			
Description of the contract monitoring which will be carried out by the agency.			
Definition of what will constitute acceptable performance by the contractor.			
Description of the action taken both in regard to the contract and in regard to continuation of the service should performance be unacceptable.			

PROGRAM COMPONENTS: (Note: It is recommended that outcome measures for components should exceed that achieved by the agency without benefit of contracting.)			
JOB DEVELOPMENT & JOB PLACEMENT:	YES	NO	COMMENTS:
Number of customers to be referred identified.			
Outcome measures have been established for:			
Percentage/number to be placed.			
Average wage expected at placement or by end of follow-up.			
Percentage to retain for 30/60/90 days.			
JOB READINESS:			
Individual class size and total number of customers to be enrolled have been identified.			
Outcome measures have been established for:			
Percentage/number to complete the class.			
Percentage/number to find employment within 30/60/90 days.			
Retention services to be offered? (Optional)			
If so, retention outcomes specified for 30/60/90 days.			
JOB SKILLS TRAINING:			
Training is being offered for occupations in demand in the community.			
Individual class size and total number of customers to be enrolled has been identified.			
Outcome measures have been established for:			
Percentage/number to complete the training.			
Percentage/number to find employment within 30/60/90 days.			
Retention services to be offered? (Optional)			
If so, retention outcomes specified for 30/60/90 days.			

EDUCATION and TRAINING	YES	NO	COMMENTS:
Individual class size and total number of customers to be enrolled has been identified.			
Tools/methods for measuring progress have been identified (i.e., receipt of GED, pretest and periodic documentation of progress at mid-contract and end of contract period, grade level attainment, completion of competencies).			
Outcome measures have been established for:			
Percentage/number to show progress or successfully complete the curriculum.			
Percentage/number to have satisfactory participation on a monthly basis.			
COST EFFECTIVENESS:			
Contract has been evaluated for cost effectiveness.			
If applicable, contact cost per entered employment is equal to or less than the program cost (desktop review).			
If applicable, contract cost per participant is equal to or less than the program cost.			
If the service cannot be provided at a lower cost, the degree of difficulty in working with the targeted customer population requires intensive services to produce desired outcomes.			

CONTRACT

This Contract is made this_____day of_____20 , by and between

_____
(herein referred to as the "Agency")
and

_____
(herein referred to as "Contractor").

In order to implement the Agency's Employment Services Program, the parties of this Contract agree as follows:

(1) SCOPE OF SERVICES: The Contractor shall provide the services to the Agency indicated in the Attachment.

(2) TIME OF PERFORMANCE: The services of the Contractor shall commence _____
and terminate on_____.

All time limits stated in this agreement are of the essence.

(3) COMPENSATION: The Contractor shall be paid by the Agency

Total obligation of the Agency in all forms of compensation shall not exceed_____dollars.

(4) CONDITIONS OF PAYMENT: All services provided by the Contractor pursuant to this Contract shall be performed to the satisfaction of the Agency, and in accord with all applicable federal, state and local laws, ordinances, rules and regulations. Contractor shall not receive payment for work found by the Agency to be unsatisfactory, or performed in violation of federal, state or local laws, ordinances, rules and regulations.

(5) LIABILITY: The Contractor shall indefinitely, and hold harmless the Agency, and when applicable, its designated representatives, from any and all claims, suits, actions, liabilities and cost of any kind, caused by the performance by the Contractor of his/her work pursuant to this agreement.

Neither the Contractor, its/his employees, assignees or subcontractors shall be deemed employees of the Agency while performing under this agreement.

(6) GENERAL PROVISION: Nothing in this agreement shall be construed as authority for either party to make commitments which will bind the other party beyond the Scope of Service contained herein. Furthermore, the Contractor shall not assign, sublet, or subcontract any work related to this agreement or any interest he/it may have herein without the prior written consent of the Agency.

(7) INTEGRATION AND MODIFICATION: This Contractor constitutes the entire agreement between the Contractor and the Agency. Any alterations, amendments, or modifications in the provisions of this agreement shall be in writing, signed by the parties and attached hereto.

(8) TERMINATION: The Agency may terminate this agreement upon_____days written notice to the other party. Upon this termination for convenience, the Contractor shall be paid only for those additional fees and expenses incurred between notification of termination and the effective date of termination that are necessary for curtailment of its/his work under this agreement.

In the event of breach by the Contractor of this agreement, the Agency shall have the right immediately, to rescind, revoke or terminate the agreement. In the alternative the agency may give written notice to the Contractor specifying the manner in which the agreement has been breached. If a notice of breach is given and the Contractor has not substantially corrected the breach within_____days of receipt of the written notice, the Agency shall have the right to terminate this agreement.

In the event of recession, revocation or termination, all documents and other materials related to the performance of this agreement shall become the property of the Agency.

(9) COLLATERAL CONTRACTS: Where there exists any inconsistency between this agreement and other provisions of collateral contractual agreements which are made a part of this agreement by reference or otherwise, the provisions of this agreement shall control.

(10) NON-DISCRIMINATION: In his/its performance of this agreement, the Contractor warrants that he/it will not discriminate against any employee, or other person, on account of race, color, sex, religious creed, ancestry, age, or national origin.

(11) APPLICABLE LAWS: This agreement shall be governed in all respects, whether as to validity, construction, capacity, performance or otherwise, by the laws of the laws of the Commonwealth of Virginia.

(12) SEVERABILITY: Each paragraph and provision of this agreement is severable from the entire agreement; and if any provision is declared invalid, the remaining provisions shall nevertheless remain in effect.

(13) AUDIT: The Contractor shall retain all books, records, and other documents relative to this contract for five (5) years after final payment, or until audited by the Commonwealth of Virginia, whichever is sooner. The agency, its authorized agents, and/or State auditors shall have full access to and the right to examine any of said materials during said period.

(14) AVAILABILITY OF FUNDS: It is understood and agreed between the parties herein that the agency shall be bound hereunder only to the extent of the funds available or which may hereafter become available for the purpose of this agreement.

(15) RENEWAL OF CONTRACT: This contract may be renewed by the local agency upon written agreement of both parties for one successive year periods, under the terms of the current contract, and at a reasonable time (approximately 90 days) prior to the expiration.

(16) CHARITABLE CHOICE:* If this contract is with a faith-based organization, the participant has the right to refuse to actively take part in religious activities and can refuse the services of the faith-based organization.

* Public Law 104-193

SIGNATURES

_____	_____
Signature of Agency Representative	Signature of Contractor Representative
_____	_____
Name of Agency Representative (print)	Name of Contractor Representative (print)
_____	_____
Date	Date

Standard Operating Procedures Guide..... **Obsolete**

The VIEW Annual Plan template can be accessed at http://spark.dss.virginia.gov/divisions/bp/tanf/state_plans.cgi

VIEW BROCHURES

Have You Heard About Benefits For Working Families (B032-01-0155-**05**-eng) 2

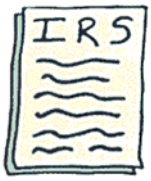
Leaving Welfare For Work Isn't As Scary As It Seems (B032-01-0154-**05**-eng) 6

Your Success is Waiting for You (B032-01-0055-00-eng) 10

HAVE YOU HEARD ABOUT BENEFITS FOR WORKING FAMILIES???

MEDICAL ASSISTANCE/CHILDREN'S HEALTH INSURANCE

EARNED INCOME TAX CREDIT



FREE HELP WITH FILING TAX RETURN

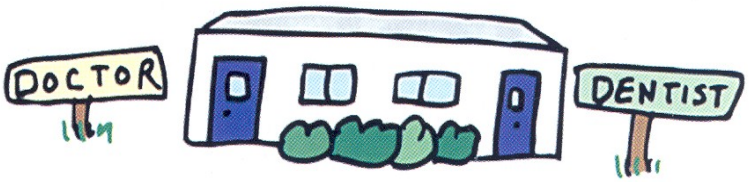
SNAP (FOOD STAMPS)

CHILD CARE ASSISTANCE

ASSISTANCE WITH CHILD SUPPORT

READ ON TO LEARN ABOUT BENEFITS THAT CAN HELP LOW INCOME FAMILIES WITH CHILDREN!

HEALTH COVERAGE



- **Medical Assistance/Children's Health Insurance (doctor visits, medicine, hospital care, and checkups)**
- **Earned Income Tax Credit (more take home pay)**
- **Child Care Assistance**
- **SNAP Benefits (Food Stamps)**
- **Child Support**

Families who get off of welfare because of work may still get family health coverage for parents and children for up to 1 year! It's called **Extended Medicaid**.

After 1 year, depending on family income, the children are still likely to get health coverage through Virginia's Children's Health Insurance Programs.

Example: In 2010, a mother with two children **under age 19** can have income of **$2,823** a month and still get health insurance coverage for her children.

Children's Health Insurance in Virginia Covers Children Under Age 19 Even When:

- ✓ parents live in the home.
- ✓ or both parents work.
- ✓ family is not receiving TANF.
- ✓ family has a car, a house and/or a savings account.

To obtain children's health insurance, an application must be filed providing information such as the family's income and the ages of the children. A family can apply at their local department of social services and, in some areas, they can apply at a regional hospital or health department or rural health clinic.

EARNED INCOME TAX CREDIT

Low income families (with children) who work part time or full time can get **more take home pay** through the Earned Income Tax Credit **(EITC)**. The amount of extra money depends on income and family size. In 2010, a family with two qualifying children can earn up to $40,363 a year and qualify for the EITC. A family does not have to owe any taxes to get the EITC.

There are two ways a family can get the extra EITC money.

- ✓ **y can get all the extra EITC money when they file their federal tax return.**

OR

- ✓ **can get part of the extra EITC money in advance with each pay- check and the rest when they file their tax return.**

To get the extra money in advance with each paycheck, the employee must file Form W-5 with their employer. Employees can get Form W-5 from their employer or case worker. (It does not cost the employer any money because it is taken out of the employee's federal withholding taxes.)

Example: In 2010, a family with one or more children with gross income less than **$35,535** a year could receive up to **$3,050** in extra EITC money. The family could get the **$3,050** when they filed their federal tax return or they could get **$152.50** per month and the remaining **$1,220** when they filed their federal tax return.

The EITC money is not counted as earned income when applying for Children's Health Insurance, Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Supplemental Security Income (SSI) or housing assistance.

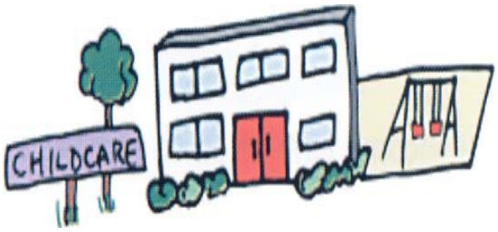
To get the **EITC** a family must file a federal tax return. **FREE help is available to file tax returns**. Call the IRS at 1-800-829-1040 and ask where you can get help. (If it is busy, don't give up - keep calling because it is worth it to get free help with your tax return!)

CHILD CARE

Assistance with child care may be available.

A family with limited income may qualify for child care assistance.

Due to limited funding, the family may be placed on a waiting list. A family can get information on child care assistance at their local Department of Social Services.



SNAP

Low income families may qualify for SNAP benefits while working full time. For example, in 2010, a family of three with gross income of $1,984 or less a month may qualify to receive SNAP benefits.

CHILD SUPPORT

The district Child Support Office can help custodial parents obtain child support payments from absent parents. They can also assist in obtaining medical support and in establishing paternity.

- A parent does not have to be on welfare to get help in collecting child support or to receive other child support services.
- There are no guarantees that money will be collected, but getting help from Child Support Enforcement can improve the chances of success.
- Services do not include custody, visitation or other matters.
- There is no charge for services provided by Child Support Enforcement.

(For more information, call your district Child Support Office.)

To learn more about benefits available for low income working families, call your local Department of Social Services or visit us on the Internet at www.dss.virginia.gov/benefit/.

VIRGINIA DEPARTMENT OF SOCIAL SERVICES.

VSSI PEOPLE HELPING PEOPLE

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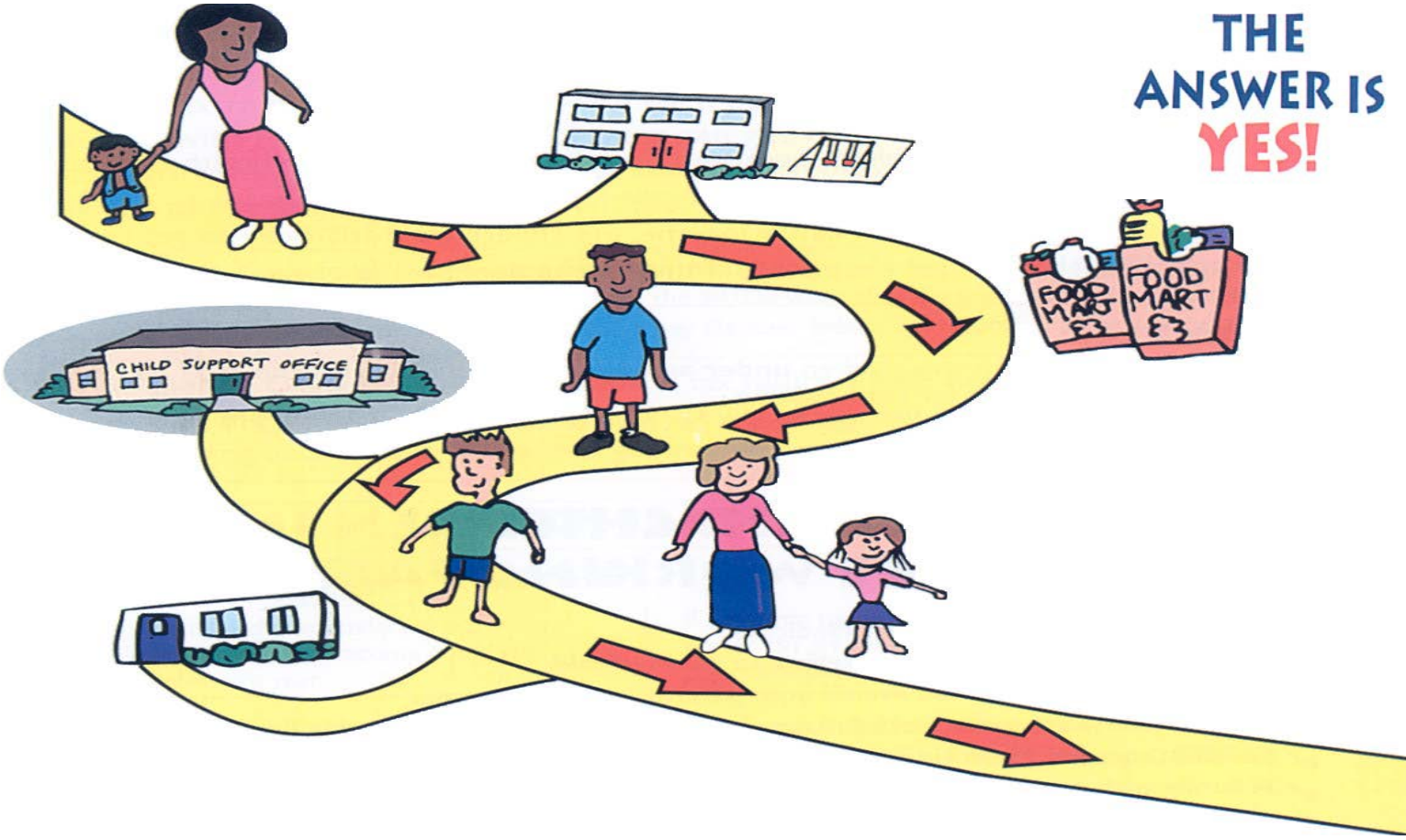
LEAVING WELFARE FOR WORK ISN'T AS SCARY AS IT SEEMS

DID YOU KNOW YOU COULD WORK FULL TIME AND STILL RECEIVE SOME BENEFITS?

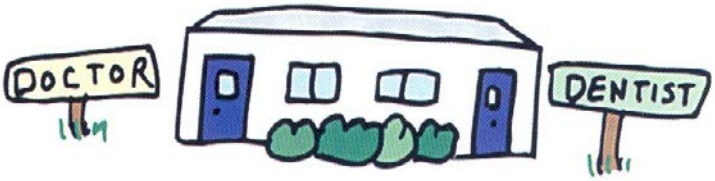
THE ANSWER IS YES!



WHAT ARE THE BENEFITS FOR FAMILIES WHO LEAVE WELFARE FOR WORK?

- **Medical Assistance/Children's Health Insurance (doctor visits, medicine, hospital care, and checkups)**
- **Earned Income Tax Credit (more take home pay)**
- **Child Care Assistance**
- **Supplemental Nutrition Assistance Program (SNAP)**
- **Child Support**

HEALTH COVERAGE



Families who get off of welfare because of work may still get family health coverage for parents and children for up to 1 year! It's called **Extended Medicaid**.

After 1 year, depending on family income, the children are still likely to get health coverage through Virginia's Children's Health Insurance Programs.

Example: In 2010, a mother with two children **under age 19** can have income of **$2,823** a month and still get health insurance coverage for her children.

Children's Health Insurance in Virginia Covers Children Under Age 19 Even When:

- ✓ parents live in the home.
- ✓ or both parents work.
- ✓ family is not receiving TANF.
- ✓ family has a car, a house and/or a savings account.

To obtain children's health insurance for children, an application must be filed providing information such as the family's income and the ages of the children. A family can apply at their local department of social services and in some areas they can apply at a regional hospital or health department or rural health clinic.

EARNED INCOME TAX CREDIT

Low income families (with children) who work part time or full time can get **more take home pay** through the Earned Income Tax Credit **(EITC)**. The amount of extra money depends on income and family size.
A family does not have to owe any taxes to get the EITC.

There are two ways a family can get the extra EITC money.
They can get all the extra EITC money when they file their federal tax return.

OR

✓ **can get part of the extra EITC money in advance with each pay- check and the rest when they file their tax return.**

To get the extra money in advance with each paycheck, the employee must file Form W-5 with their employer. Employees can get Form W-5 from their employer. (The advance does not cost the employer any money because it is taken out of the employee's federal withholding taxes.)

Example: In 2010, a family with one or more children with gross income less than **$35,535** a year could receive up to **$3,050** in extra EITC money. The family could get the **$3,050** when they filed their federal tax return or they could get **$152.50** per month and the remaining **$1,220** when they filed their federal tax return.

To get the **EITC** a family must file a federal tax return. **FREE help is available to file tax returns**. Call the IRS at 1-800-829-1040 and ask where you can get help. (If it is busy, don't give up - keep calling because it is worth it to get free help with your tax return!)

WHICH IS MORE?

In 2009, a parent (with two children) on welfare without a job and no other income could get **$3,840** in TANF for the entire year.	If the same parent went to work earning **$14,500** a year (**$1,208** per month), the parent would get a pay check plus **$5,028** in EITC money.

There is more good news! The EITC money is not counted as earned income for Children's Health Insurance, Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), SSI or housing assistance.

CHILD CARE

Depending on income, parents who get off welfare because of work may get some help with child care expenses for up to 12 consecutive months, beginning with the first month in which they are no longer on welfare! The parent must ask for help with child care expenses. It's called **Transitional Child Care (TCC).**

After 12 consecutive months of being off welfare, the parent might still be able to get some help. The parent will still have to pay a fee.

SNAP

Parents who get off welfare because of work may still receive some assistance through the Supplemental Nutrition Assistance Program (SNAP).

Example: In 2010, a family of three with gross income of $1,984 or less a month may qualify to receive SNAP benefits.

CHILD SUPPORT

The district Child Support Office can help custodial parents obtain child support payments from absent parents. They can also assist in obtaining medical support and in establishing paternity.

- A parent does not have to be on welfare to get help in collecting child support or to receive other child support services.
- There are no guarantees that money will be collected, but getting help from Child Support Enforcement can improve the chances of success.
- Services do not include custody, visitation or other matters.
- There is no charge for services provided by Child Support Enforcement.

(For more information, call your district Child Support Office.)

SO, YOU SEE, FAMILIES DON'T LOSE ALL OF THEIR BENEFITS WHEN THEY LEAVE WELFARE FOR WORK. THEY MAY STILL GET:

- **EITC Cash**
- **Child Care**
- **Medical Assistance/Children's Health Insurance**
- **Supplemental Nutrition Assistance Program (SNAP)**

To learn more about leaving welfare for work (including getting child support), call your local Department of Social Services or visit us on the Internet at www.dss.virginia.gov/benefit/

VIRGINIA DEPARTMENT OF SOCIAL SERVICES.

VSSI PEOPLE HELPING PEOPLE

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Your Success is Waiting for You

READY FOR THE KIND OF LIFE YOU WANT YOUR FAMILY TO BE LIVING?

Let the VIEW Program – <u>and your commitment to that life</u> – take you there.

VIEW can offer:

✓ Help in finding jobs
- to pay the bills
- to start your career
- you've dreamed about

✓Worksite placements to learn new skills, help your community, and get good job references

✓Help in finishing high school or getting your GED

✓Help in starting or finishing a training program or college

VIEW can provide:

☆ A chance to work and still keep part of your TANF benefits when you're getting started

☆ Help with transportation costs

☆ Help with child care costs

☆ Help with the cost of uniforms and supplies required by the job

☆ Help with medical and dental expenses

☆ Extra money for up to a year after you leave TANF with a job

☆ Someone to talk to and plan with; someone who'll be there with encouragement just when you need it

Get started today! Sure, you're busy. So are we. But, we're talking about your future here! Don't waste another day. Give us a call and get to work on your dreams. Your kids will thank you.

Telephone ___-___-____
The Virginia Initiative for Employment not Welfare (VIEW) Program
_____ Department of Social Services

Virginia Department of Social Services
Temporary Assistance for Needy Families (TANF) Displacement Grievance Form
Virginia Initiative for Employment not Welfare (VIEW)

Date_____

Name of Employee_____ Home Phone #_____

Address_____City_____ State_____Zip Code _____

Work Phone #_____Best Time To Call_____A.M._____P.M _____

Name of Employer_____ Phone #_____
(Whom grievance is filed against)

Employer's Address_____Apt. #_____

Supervisor's Name_____

City_____State_____Zip _____

Brief description of grievance, include dates._____

_____

_____

_____

_____

Employee Signature_____ Date _____

All of the above information is correct to the best of my knowledge.

Displacement means employing or assigning a Temporary Assistance to Needy Families (TANF) Community Work Experience Placement (CWEP), Full Employment Program (FEP) or other subsidized employment participant when: 1) The employer has terminated the employment of an employee, or the employee's current position, or otherwise caused an involuntary reduction in its work force in order to fill the vacancy with a subsidized participant, 2) An individual is hired while another person is on layoff, including seasonal layoff, from the same or substantially equivalent position; 3) The employer has reduced the hours of an employee in the same or substantially equivalent position to less than full time in order to employ or assign a subsidized participant: or; 4) The employment or assignment results in the impairment of an existing contract for services.* The Virginia Department of Social Services will act as a mediator to assist in resolving the grievance. Any suggestions made by the Department of Social Services are not binding to either party.

This form must be received by the Virginia Department of Social Services no later than sixty days after the alleged incident of Displacement.

Mail to: Virginia Department of Social Services
801 E. Main Street
TANF Unit 9th Floor
Richmond, Virginia 23219

* 45 CFR 261.70 (a)

Barriers to Employment……..2

Barriers To Employment

All VIEW participants must be offered screening for learning disabilities, mental health disabilities, alcohol and substance abuse within 90 days of signing the APR. Participants whose screenings indicate the possible presence of a disability will, with the client's agreement, be referred for an in-depth evaluation. A barrier code is entered into ESPAS after verification of the barrier by another agency or professional qualified to identify the specific barrier. Verified barriers to employment and their codes are listed below.

01- Learning Disability

02– Domestic Violence

03– Mental Health

04– Physical Disability

05– Substance Abuse

Coding of VIEW Components in ESPAS ……..2

CODING OF VIEW COMPONENTS IN ESPAS
(COMPONENT ASSIGNMENTS: CODING, REPORTING, and DOCUMENTATION)

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
Core Work Activities		**Assignments should be at least 20 hrs/ wk**		
Job Search Hours will be combined with Job Readiness & **Limited to** 4 consecutive wks and 120/ 180 total hrs per 12-month period.	**Core**	Note: Assignments to JS/ JR should only be entered in ESPAS when the hours will be used to meet the participant's work requirement. If the hrs will not be needed to meet the requirement, the ESW should not formally assign the activity – instead the ESW should simply encourage the participant to complete these additional helpful activities.	Job Search and Job Readiness Assistance (this is one activity)	
Individual Assignment will be based on contact hours.	**Core**	Component **01**; no descriptor.	Job Search and Job Readiness Assistance	Job Search form
Group Assignment will be based on contact hours.	**Core**	Component **02**; no descriptor.	Job Search and Job Readiness Assistance	Monthly attendance form completed by service provider/ ESW **and** VIEW Job Search form
Job Club Assignment will be based on contact hours.	**Core**	Component **03**; no descriptor.	Job Search and Job Readiness Assistance	Monthly attendance form completed by service provider/ ESW **and** VIEW Job Search form
Job Readiness * May include substance abuse/	**Core**	Component **04;** no descriptor.	Job Search and Job Readiness Assistance	Monthly attendance form completed by service provider or

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
mental health treatment. Hours will be combined with Job Search & **Limited to** 4 consecutive wks and 120/ 180 total hrs per 12-month period.				ESW
Unsubsidized Employment – Full time (at least 30 hrs/wk)	**Core**	Component **25**; descriptor will be **033**. Employment Type will either be **1**, **3**, or **6**.	Unsubsidized Employment	At initial employment and every 6 months thereafter: Statement from Employer; or Paystubs; or Printout from the Work Number Monthly Job Follow-Up Contact form or VIEW Job Follow-Up form

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
Unsubsidized Employment – Part time	**Core**	When this is the only assignment, use Component **23** (Job Development & Job Placement); no descriptor. Also, enter the employment information at the bottom of the screen. When there is another assignment, enter that component in ESPAS and enter the part time employment information at the bottom of the screen. Employment Type will either be **2**, **4**, or **6.**	Unsubsidized Employment *The Component 23 assignment is not reported but must be entered in the Assessment Data portion of the ESPAS screen to allow the ESW to enter the part time employment information at the bottom of the ESPAS screen. The part time employment hours will be reported based on the information entered at the bottom of the screen.	At initial employment and every 6 months thereafter: Statement from Employer; or Paystubs; or Printout from the Work Number Monthly Job Follow-Up Contact form or VIEW Job Follow-Up form
Unsubsidized Employment – Self Employment	**Core**	After calculating the number of countable hours (based on formula in 1000.13C, follow instructions for Full or Part time as shown above. Employment Type will be **6**.	Unsubsidized Employment	At initial employment and every 6 months thereafter: Tax Records; or Third party documentation; or Proof of Business Expenses (including but not limited to receipts) Monthly Job Follow-Up Contact form or VIEW Job Follow-Up form

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
Subsidized Employment * Full Employment Program **(FEP)** is the only subsidized employment assignment.	**Core**	Component **26**; descriptor required. The first digit will always be **0**; the last two will be chosen from the list on Page 10 of Chapter B. Employment Type will be **5.**	Subsidized Private Sector Employment	At each assignment to FEP: Statement from Employer to verify wages and hours; or Paystubs; or Printout from the Work Number Monthly VIEW Attendance /Performance Rating Sheet and Job Follow-Up Contact form or VIEW Job Follow-Up form
On–the–Job Training (OJT)* ***OJT is always paid employment that includes training** With the exception of sheltered workshop employment, an OJT position that pays less than minimum wage does not meet the definition of employment and is not a countable work activity.	**Core**	Component **19**; descriptor required. **Also enter as paid employment (either full time or part time depending upon OJT hours) at the bottom of the ESPAS enrollment.**	On-the-Job Training	At initial employment and every 6 months thereafter: Statement from Employer; or Paystubs; or Printout from the Work Number Monthly Job Follow- Up Contact form or VIEW Job Follow-Up form
Paid apprenticeship offered by college or training program	**Core**	Component **19**; descriptor required. **Also enter as paid employment at the bottom of the ESPAS enrollment.**	On-the-Job Training	At initial employment and every 6 months thereafter: Statement from

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
				Employer; or Paystubs; or Printout from the Work Number Monthly Job Follow-Up Contact form or VIEW Job Follow-Up form
Paid College Work Study Programs offered by college or training program	Core	Component 19; descriptor required. Also enter as paid employment at the bottom of the ESPAS enrollment.	On-the-Job Training	At initial employment and every 6 months thereafter: Statement from Employer; or Paystubs Monthly Job Follow-Up Contact form or VIEW Job Follow-Up form
Paid Internships offered by college or training program (Ex: student teaching)	Core	Component 19; descriptor required. Also enter as paid employment at the bottom of the ESPAS enrollment.	On-the-Job Training	At initial employment and every 6 months thereafter: Statement from Employer; or Paystubs. Monthly Job Follow-Up Contact form or VIEW Job Follow-Up

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
				form
Paid Sheltered Workshops *Wages for these assignments may be less than minimum wage.	Core	Component 19; descriptor required with 5 at the first digit. Also enter as paid employment at the bottom of the ESPAS enrollment.	On-the-Job Training	At initial employment and every 6 months thereafter; Statement from Employer; or Paystubs Monthly Job Follow-Up Contact form or VIEW Job Follow-Up form
Paid Training offered through WIA	Core	Component 19; descriptor required with 8 as the first Digit. Also enter as paid employment at the bottom of the ESPAS enrollment.	On-the-Job Training	Statement from WIA representative Paystubs
Paid (via stipend) AmeriCorps placement	**Core**	**Component 19**; descriptor required. First digit of the descriptor will be **9. Also enter as paid employment at the bottom of the ESPAS enrollment.**	On-the-Job Training	Statement from AmeriCoprs Coordinator; copy of AmeriCorps stipend agreement

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
Vocational Education and Training	**Core**	**Limited** to 12 months in a lifetime.	Vocational Educational Training	
Associate degree programs **and** post-secondary baccalaureate level programs directly related to employment (for up to 12 months). Note: This will include self-initiated education programs Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time.	**Core**	Component **09;** descriptor required. First digit of the descriptor for Associate degree programs will be **3.** First digit for descriptor for post-secondary baccalaureate level (4 yr) programs will be **2.**	Vocational Educational Training	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/study time Proof of grades at the end of the semester/ quarter/ course Copies of Certificate(s) or Diploma received
Certificate program (for up to 12 months) Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time	**Core**	Component **10;** descriptor required. First digit of the descriptor will be **3 or 4.**	Vocational Educational Training	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/study time Proof of grades at the end of the semester/ quarter/ course Copies of Certificate(s) or Diploma received

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
Community Work Experience (CWEP) Maximum assignment of 32 hrs/wk. A calculation (based on SNAP and TANF benefits) must be used to determine assignment hours. See policy at 1000.13E.	**Core**	Component **21**; descriptor required.	Work Experience	VIEW Attendance/ Performance Rating Sheet Copy of VIEW Referral to Work Site form
Public Service Program (PSP) Maximum assignment of 35 hrs/ wk. *To be placed in this activity, the participant must have Medicaid unless the PSP site agrees to provide coverage under its own Workers' Compensation plan.	**Core**	Component **27**; descriptor required.	Community Service Programs	VIEW Attendance/ Performance Rating Sheet Copy of VIEW Referral to Work Site form

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
Non – Core Work Activities		**Assigned after minimum 20 hrs/wk in Core Work Activities**		
Job Skills Training	**Non-Core**	Component **18**; descriptor required.	Job Skills Training Directly Related to Employment	
Associate degree program (if cannot be assigned to a Vocational Educational Training activity due to 12 month lifetime limit) Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time.	**Non-Core**	Component **18**; descriptor required. Component **17** if self initiated. First digit of the descriptor will be **3.**	Job Skills Training Directly Related to Employment	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/ study time Proof of grades at the end of the semester/ quarter/ course Copies of Certificate(s) or Diploma received
Post-secondary baccalaureate level programs directly related to employment (if cannot be assigned to a Vocational Educational Training activity due to 12 month lifetime limit) Up to one hour of unsupervised study	**Non-Core**	Component **11**; descriptor required. Component **16** if self-initiated. First digit of the descriptor will be **2.**	Job Skills Training Directly Related to Employment	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/ study time

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
or homework time can be counted for each hour of scheduled class time.				Proof of grades at the end of the semester/ quarter/ course Copies of Certificate(s) or Diploma received
Certificate program (if cannot be assigned to a Vocational Educational Training activity due to 12 month lifetime limit) Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time.	**Non-Core**	Component **18**; descriptor required. Component **17** if self initiated. First digit of the descriptor will be **3 or 4.**	Job Skills Training Directly Related to Employment	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/ study time Proof of grades at the end of the semester/ quarter/ course Copies of Certificate(s) or Diploma received
Individual courses or a series of short term courses Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time.	**Non-Core**	Component **18**; descriptor required. Component **17** if self initiated.	Job Skills Training Directly Related to Employment	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/ study time

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
				Proof of grades at the end of the course(s) Copies of Certificate(s) or Diploma received
Instruction in a second language for participants who have a GED or high school diploma Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time.	**Non-Core**	Component **18**; descriptor required. Component **17** if self initiated.	Job Skills Training Directly Related to Employment	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/ study time Proof of grades at the end of the semester/ quarter/ course Copies of Certificate(s) or Diploma received
Unpaid Internships offered by college or training program	**Non-Core**	Component **18**; descriptor required.	Job Skills Training Directly Related to Employment	VIEW Education and Training Activities Attendance Report
Unpaid Practicum offered by college or training program	**Non-Core**	Component **18**; descriptor required.	Job Skills Training Directly Related to Employment	VIEW Education and Training Activities Attendance Report
Job Corps	**Non-Core**	Component **18**; descriptor required. Component **17** if self initiated. First digit of the descriptor will be **9.**	Job Skills Training Directly Related to Employment	VIEW Education and Training Activities Attendance Report Statement from instructor to verify

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
				expected hours of unsupervised homework/study time Proof of grades at the end of the semester/ quarter/course Copies of Certificate(s) or Diploma received
Education Below Post-Secondary	**Non-Core**	Note: These activities may be offered in non-traditional as well as traditional settings.		

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
English as a Second Language (**ESL**) Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time.	**Non-Core**	Component **05**; descriptor required.	Education Directly Related to Employment for Individuals with No High School Diploma or Certificate of High School Equivalency	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/ study time Proof of progress every three months Copies of Certificate Received
General Education Development (**GED**) Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time.	**Non-Core**	Component **06**; descriptor required. **For participants who are 18 or 19 and meeting attendance requirements, enter 35 hours for assigned hours <u>and</u> for actual hours so that this component can be counted in meeting federal participation requirements.**	Satisfactory School Attendance for Individuals with No High School Diploma or Certificate of High School Equivalency	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/ study time Proof of progress every three months Copies of Certificate Received

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
Adult Basic Education (**ABE**) or homework time can be counted for each hour of scheduled class time.	**Non-Core**	Component **07**; descriptor required.	Education Directly Related to Employment for School Diploma or Certificate of High School Equivalency	VIEW Education and Training Activities Statement from instructor to verify expected hours of unsupervised homework/ study time Proof of progress every three months Copies of Certificate Received
Secondary/ **High School** Up to one hour of unsupervised study or homework time can be counted for each hour of scheduled class time.	**Non-Core**	Component **08**; descriptor required. First digit of the descriptor will be either **1** or **4.** **For participants who are 18 or 19 and meeting attendance requirements, enter 35 hours for assigned hours <u>and</u> for actual hours so that this component can meet federal participation requirements.**	Satisfactory School Attendance for Individuals with No High School Diploma or Certificate of High School Equivalency	VIEW Education and Training Activities Attendance Report Statement from instructor to verify expected hours of unsupervised homework/ study time Copies of Certificate or Diploma received

Examples of Possible Assignments	Type of Work Activity	How the Assignment Should Be Entered in ESPAS	How the Hours Will Be Reported in the TANF Data (Federal) Report	How the Hours Should Be Documented in the VIEW Case Record
Other Activities		**Should not be assigned until client has already been assigned to required hours in Core and/ or Non-Core Work Activities.**		
Other Locally Developed	Not a countable Work Activity	Component **22**; no descriptor required.	Not reported	Local agency option
Non- Active Assignments		**Should only be assigned when the client is not able to immediately participate in an active component assignment.**		
Pending The assignment can be for up to 60 days and cannot be extended.	Not a countable Work Activity	Component **25**; descriptor required.	Not reported	N/A
Inactive Assignments can be for up to 30 days. A maximum of 3 assignments can be made (totaling 90 days).	Not a countable Work Activity	Component **24**; descriptor required.	Not reported	N/A

Contact Information
Local Agencies Served by Refugee Social Services Refugee Employment Programs

VDSS Region	Localities Served by RSSEP	RSSEP Provider Contact Information	Localities Not Served by RSSEP
Central	Chesterfield Hanover Henrico Richmond City	**International Rescue Committee Richmond Employment Program** Richmond Office 8100 Three Chopt Road, Suite 128 Richmond, VA 23229 Phone (804) 308-9144	Amelia Buckingham Charles City Cumberland Essex Fluvanna Goochland Hopewell King & Queen King William Lancaster Lunenburg Middlesex New Kent Northumberland Nottoway Petersburg Powhatan Prince Edward Richmond County Westmoreland
	Caroline	**Migration and Refugee Services of Commonwealth Catholic Charities** Fredericksburg Office 24 Butler Road Fredericksburg, VA 22405 Phone (540) 899-6507	

VDSS Region	Localities Served by RSSEP	RSSEP Provider Contact Information	Localities Not Served by RSSEP
Eastern	Chesapeake Franklin City Hampton Isle of Wight Newport News Norfolk Portsmouth Suffolk Surry Virginia Beach Williamsburg York-Poquoson	**Refugee Resettlement Services of Commonwealth Catholic Charities** Hampton Roads Office 12284 Warwick Blvd., Suite 1-A Newport News, VA 23606 Phone: (757) 247-3600	Accomack Brunswick Dinwiddie Franklin City Gloucester Greensville-Emporia Mathews Northampton Prince George Southampton Sussex

VDSS Region	Localities Served by RSSEP	RSSEP Provider Contact Information	Localities Not Served by RSSEP
Northern Virginia	Alexandria Arlington Fairfax Falls Church Loudoun Manassas City Manassas Park	**Migration and Refugee Services** **Commonwealth Catholic Charities** Arlington Office 80 North Glebe Road Arlington, VA 22203 Phone: (703) 841-3876 Manassas Office 9200 Church Street, Suite 304 Manassas, VA 20110 Phone: (571) 364-8010 **Refugee Immigration Services** **Lutheran Social Services of the National Capital Area** Falls Church Office 7401 Leesburg Pike Falls Church, VA 22043 Phone: (703) 698-5026	Clarke Fauquier Frederick Greene King George Louisa Madison Page Rappahannock Shenandoah Warren Winchester
	Culpeper Fredericksburg Orange Prince William Spotsylvania Stafford	**Migration and Refugee Services** **Catholic Charities of the Diocese of Arlington** Fredericksburg Office 24 Butler Road Fredericksburg, VA 22405 Phone: (540) 899-6507	
	Harrisonburg/Rockingham	**Church World Services** **Refugee and Immigration Program** Harrisonburg Office 250 East Elizabeth Street, Suite 109 Harrisonburg, VA 22802 Phone: (540) 433-7942	

VDSS Region	Localities Served by RSSEP	RSSEP Provider Contact Information	Localities Not Served by RSSEP
Piedmont	Albemarle Charlottesville	**International Rescue Committee** Charlottesville Office 609 East Market Street, Suite 104 Charlottesville, VA 22902 Phone: (434) 979-7772	Alleghany-Covington Amherst Appomattox Bath Bedford Botetourt Campbell Charlotte Craig Danville Franklin County Halifax Henry-Martinsville Highland Lynchburg Mecklenburg Nelson Pittsylvania Rockbridge Area (Buena Vista, Lexington, & Rockbridge)
	Roanoke City Roanoke County	**Refugee Resettlement Program** **Commonwealth Catholic Charities** Roanoke Office 820 Campbell Avenue SW Roanoke, VA 24016-3536 Phone (540)-342-7561	
	Shenandoah Valley (Staunton, Augusta & Waynesboro)	**Church World Services** **Refugee and Immigration Program** Harrisonburg Office 250 East Elizabeth Street, Suite 109 Harrisonburg, VA 22802 Phone: (540) 433-7942	
Western	None	None	All

Understanding Federal Participation ……..……..……..…….……..2

Understanding Federal Participation – Examples

Whether a client is counted as meeting the federal participation rate for a given month is dependent on the actual hours of participation entered into ESPAS. The following examples are designed to provide, in a general way, an understanding of how the participation rate calculations in ESPAS work. They do not show what should be entered into ESPAS - -actual hours of participation are always entered –but do illustrate scenarios under which an individual's participation might or might not meet levels needed to meet participation. The calculator is available at http://spark.dss.virginia.gov/divisions/bp/tanf/training.cgi.

Example 1: Month 1: Ms. A is assigned to job search, a core activity, beginning May 1 through May 31. Ms. A participates in job search for 36 hours in week 1, 33 hours in week 2, 24 hours in week 3, and 39 hours in week 4. She returns her completed job search forms, which verify a total of 132 hours completed during the month.

Calculating Participation for Month 1: Calculate the total number of participation hours for the month and divide by the number of days in the month to get a daily average. For Ms. A, divide 132 hours by 31 days to get an average of 4.25 hours per day. Then, multiply the daily average by 7 to get the average actual weekly hours. For Ms. A, 4.25 x 7 equals 29.80 which rounds up to 30. If Ms. A's information is entered correctly and timely into ESPAS, Ms. A will count toward the participation rate for the month because she met the requirement for participation in a core activity and averaged 30 hours a week of actual participation.

Month 2: The next month, June, Ms. A continues her job search. In week 1, she is in job search for 33 hours. She is in job search in week 2 for 36 hours. She then gets a job and works for 30 hours each in weeks 3 and 4. Because Ms. A had 4 consecutive weeks of job search in May, the first week of this month is not a countable activity. (Federal regulations require that job search can be counted for only 4 consecutive weeks, after which there must be a break of at least a week before additional job search hours can be counted.)

Calculating Actual Participation for Month 2: For Ms. A because more than four consecutive weeks of job search don't count toward participation, the 33 hours for the first week of job search in Month 2 are not counted. Count only the second week of job search, 36 hours, plus the 60 employment hours to arrive at the total actual participation hours for the month. Divide 96 hours by the 30 days in June to get a daily average of 3.2 hours. Multiply this by 7 for average actual weekly hours of 22.4. Ms. A has not met the overall participation rate requirement of 30 hours, so her participation will not count for this month.

Month 3: In July, Ms. A works 35 hours per week throughout the month. She verifies that she worked a total of 161 hours altogether.

Calculating Actual Participation for Month 3: Divide the total participation hours of 161 by 31, the total days in July, to arrive at the daily average of 5.19 hours. Multiply the daily average by 7 to arrive at 36 for the average weekly actual hours. Because employment is a core activity, and because Ms. A had average weekly actual hours exceeding 30, she met federal participation for the month.

Example 2: Ms. B starts receiving assistance on January 15 and is referred to VIEW. For January, she is included in the denominator, but does not count toward the work participation rate because she has not yet become a VIEW participant and has not been assigned to any activities. February will be her actual first month in the program.

Month 1: On February 13, Ms. B is assessed and assigned to job search from February 13th through March 31. Her job search forms verify that she completed 72 hours of job search in February.

Calculating Participation for Month 1: Divide the total participation hours of 72 by 28, the number of days in the month to arrive at an average of 2.57 hours per day of participation. Multiply 2.57 by 7 to arrive at average weekly hours of 17.99, rounded up to 18. Her two weeks of job search in February are not enough to allow her to meet the core requirement or the work participation rate for February.

Note: When actual hours of job search or job readiness participation are entered in to ESPAS, and it determines that the hours will not count toward federal participation, those hours of job search are not counted against the 12-month maximum. Ms. B can still be assigned to up to 180 hours of job search during the next twelve months. Because the job search was not counted, no break in participation is needed before she can be assigned to job search again.

Month 2: Ms. B continues in job search for the month of March. Her job search forms verify a total of 160 hours of job search. She counts toward the participation rate because she met the core component requirement and averaged 36 hours of job search per week.

Calculating Actual Participation for Month 2; Divide the total participation hours of 160 by the number of days in the month. For Ms. B., divide 160 hours by 31 = 5.16; multiply by 7 for total weekly average of 36. 13 which rounds down to 36.

Example 3: Month 1: Ms. C participates in unsubsidized employment of 20 hours per week and 15 hours per week in vocational education and training for the entire month of August. Both are core activities. She counts toward the work participation rate because she had participation of at least 30 hours per week.

Calculating Participation for Month 1: Ms. C has 140 total participation hours for the month. Divide the total participation hours of 140 by 30, the number of days in June. Multiply Ms. C's daily participation average of 4.66 by 7 to arrive at the weekly average of 32.

Example 4: Ms. D participates in CWEP for 18 hours per week and GED for 17 hours per week in September. Though she participated in activities averaging at least 30 hours per week (140 hours/ 31 = 4.51 average hours per day; 4.51 multiplied by 7 = 32), she did not have at least 20 hours per week in a core work activity and therefore will not count toward the work participation rate.