1 \textbf{(Table of Contents)} Changed section name 13.18.3 to Developmental Disabilities/Mental Illness Extension Criteria from Mental Retardation/Mental Illness Extension Criteria in order to comply with current MN state statutes. Changed Appendix E-2 title from Activity Cheat Sheet to Activity Tip Sheet. Removed subchapter 16.6 (Federal Participation Requirements) from table of contents.

3.27 \textbf{(Glossary: L...)} Removed Mental Retardation and replaced with Developmental Disability in the Learning Disabled definition.

3.33 \textbf{(Glossary: O-Q...)} Removed Mental Retardation and replaced with Developmental Disability in the Qualified Professional definition

4.9 \textbf{(Family Cap)} Updated Food Support amounts to match current grant amounts in the examples.

6.3.21 \textbf{(Chemical & Mental Health Assessments: Referrals/Costs)} Removed Mental Retardation language and replaced with Developmental Disability.

7.3.3 \textbf{(Plan Types)} Removed Mental Retardation language and replaced with Developmental Disability.

7.18.3 \textbf{(EP for Participants with a Disability)} Replaced sentence “Eligibility has been determined that a participant may meet FSS eligibility” with “Eligibility for FSS has been determined” located in the non-compliance section under Ill or Incapacitated for more than 30 days section.

8.15 \textbf{(Paid Employment Documentation & Verification)} Added the following language to section:

The following are strategies that can be used to help prevent last HRFs/paycheck stubs or in the event the participant turns in the HRF/paycheck stubs late to get the information needed without requiring that the pay stubs be turned in twice:

- Write a clause in the employment plan that if the participant fails to submit the paycheck stubs with the HRF by the 8th of the month, activity logs will be required. The activity log will need to include the number of hours worked in the month. Failure to turn in these activity logs is subject to sanction.

\textbf{Note:} you cannot send a participant the Notice of Intent to Sanction (NOITS) DHS-3175 or sanction them for not providing you with their paycheck stubs.
Try a positive approach by using incentives. Reward participants for turning in the HRF and paycheck stubs on time with gas vouchers or gift certificates.

9.45 (Holding & Other Activities) Changed 12 week exception to 12 month exemption. Replaced sentence “Hours tracked in these activities are not countable towards the participation rate.” with the following sentence “Hours tracked in these activities are not included in the work participation rate calculation.”

9.48 (Holidays & Excused Absences) Shortened the words Other Excused Absences to just OEA when possible. Clarified that OEA may be granted for reasons unrelated to good cause. Clarified where to record OEA hours in WF1. Removed the words “no more than” from the following sentence “If the participant has been granted OEA for 80 hours over the previous 11 months, the participant is not eligible for any additional hours of OEA in the 12th month.”

9.51 (Identifiers) Removed Mental Retardation language and replaced with Developmental Disability.

11.6 (FSS Eligibility Criteria) Replaced words “mental retardation” with “developmental disabilities.”

11.18 (FSS Sanction Provisions) Added information about the FSS Pre-sanction checklist DHS-6075 as the checklist is being removed from Appendix H.

13.15 (Hardship Extensions) Removed Mental Retardation language and replaced with Developmental Disability.

13.15.9 (Special Medical Criteria Extension) Replaced words “mental retardation” with “developmental disabilities.”

13.18 (Hard to Employ Extensions) Replaced words “mental retardation” with “developmental disabilities.”

13.18.3 (Developmental Disability/Mental Illness Extension Criteria) Changed section title from “Mental Retardation/Mental Illness Extension Criteria to Developmental Disability/Mental Illness Extension Criteria as well as replaced all words “mental retardation” with “developmental disabilities.”

13.18.6 (Learning Disabled Extension Criteria) Replaced words “mental retardation” with “developmental disabilities.”

13.18.9 (IQ Below 80 Extension Criteria) Replaced words “mental retardation” with “developmental disabilities.”
14.15 (Notifying the Participant) Updated sentence “You failed to meet school attendance requirements.” to “You failed to meet your school requirements.” Updated sentence “You failed to meet with your job counselor.” to “You failed to meet with your job counselor/case manager.” Updated sentence “You failed to follow through with the Employment Plan.” to “You failed to do the activities in your plan.” Updated sentence “You failed to accept suitable employment.” to “You failed to accept the following suitable employment.” Replaced sentence “You quit employment without good cause.” with “Continue working at suitable employment.”

16.6 (Federal Participation Requirements) Removed entire section as information is outdated.

17.33 (Non-Compliance and Disqualification) Added the following language “or maximum amount” to the following sentence “Regaining Eligibility after Initial Disqualification: There is no minimum or maximum amount of time the case must be closed due to non-compliance.” Removed last sentence in section “The county will require the family to complete a new CAF if the family has been disqualified from DWP for any length of time” and replaced it with “The family will need to complete a new CAF only if they have been off assistance for more than 30 days.”

Appendix A-1 (MFIP Initial Eligibility Threshold Guide) Added language about the current federal minimum wage being $7.25/hr for large employers. Federal Poverty guidelines were updated Jan. 20, 2011 and the chart in this section was updated to reflect the new 2011 monthly FPG amounts and the percent of FPG at threshold.

Appendix A-2 (Amount of Earnings Needed to Exit MFIP Cash) Updated the chart with new 2011 Federal Poverty Guidelines amounts and percentage of FPG when someone will lose the cash portion of the MFIP grant.

Appendix A-3 (Amount of Earnings Needed to Exit MFIP) Removed sentence “The figures on this table are EFFECTIVE 10-1-09.” Updated the chart with the new 2011 Federal Poverty Guidelines, Percent of FPG when Exit MFIP and Child Care Co-Pay when Exit MFIP. Removed sentence “** The 2009 FPG amounts are effective for calendar year 2009.”

Appendix D (What to Include in MFIP/DWP ES Paper Files) Updated reference to the “Activity Cheat Sheet” to its new name “Activity Tip Sheet.”

Appendix E (MFIP Activity Table) Removed words “That DO NOT Count Towards the Work Participation Rate” and added the word “Other” before MFIP on page 6 in the footer. On page 18 – removed the words “That DO NOT Count Towards the Work Participation Rate” and added the word “Other” before MFIP in the title (shaded) area. Removed ISP language on page 18. Removed language “That DO NOT Count Towards the Work
Participation Rate” from FSS section on pages 6 and 18 and added the word “Other” before the word “MFIP”. Removed words “Non-Countable Activities” from table on page 18.

**Appendix E-2 (Activity Tip Sheet)** Changed appendix section title from “Activity Cheat Sheet” to “Activity Tip Sheet.” Also updated language in section to say “Activity Tip Sheet” versus “Activity Cheat Sheet.”

**Appendix G (Resources for Americans with Disabilities ADA)** Updated link to JAN. Removed the “One-Stop Toolkit for Serving People with Disabilities” reference as it no longer exists. Removed link under “Private Non-Profit Organizations” as it no longer exists. Updated the MN Disability law Center web site address. Updated the NAMI web site address.

**Appendix G-3 (DHS – SSI Advocates List)** Removed the Anishinabe Legal Services web link as it no longer works. Updated FM Blake web site link. Added web site address to Judicare of Anoka County. Added web site address to Mid-Minnesota Legal Assistance. Updated Olmsted Community Action Program’s web site address. Updated Outreach Services of Minnesota, Inc. as they now have 3 regional offices instead of 14. Updated Ramsey County Workforce Solutions web address. Updated Dakota County Community Services web page address. Updated Dakota County Veterans Services web site address. Updated Ramsey County Human Services web site address. Added Dodge County Human Services web site address. Added Faribault and Martin County Human Services web site address. Added web site address for Hennepin County Human Services. Added web site address for Le Sueur County Human Services. Added web address for Meeker County Social Services. Added Steele County web site address. Added Wadena County Social Services web site address.

**Appendix G-4 (Disability Criteria for SSI Benefits)** Replaced reference to Mental Retardation with Developmental Disabilities.

**Appendix H (FSS Sanction Guidance)** Removed FSS Pre-sanction checklist and replaced it with a reference to the DHS form DHS-6075 which is the current FSS Pre-sanction checklist.
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LEARNING DISABLED:
A disorder in 1 or more of the psychological processes involved in perceiving, understanding, or using concepts through verbal language or non-verbal means. It does not include learning problems that are primarily the result of:
- Visual, hearing, or motor handicaps.
- Developmental Disability, emotional disturbance.
- Environmental, cultural, or economic disadvantage.

NOTE: For purposes of an extension to the 60-month time limit, the disability must severely limit the person’s ability to obtain, perform, or maintain suitable employment.

LEGAL CUSTODIAN:
A person under legal obligation to provide care for and who is in fact providing care for a minor. For a Native American child, any Native American person who has legal custody of a Native American child under tribal law or custom, under state law, or to whom temporary physical care, custody, and control has been transferred by the parent of the child. If assistance is being requested for the minor child, this person meets the definition of CAREGIVER. For the definition of CAREGIVER, see §3.9 (Glossary: C...). For the definition of MINOR CHILD, see §3.30 (Glossary: M-N...).

LIMITED ENGLISH PROFICIENCY (LEP):
Unable to speak, read, write, or understand the English language well enough to allow a person to interact effectively with health care, social services, or other providers. For more information, see §4.3.12 (Clients Rights - Limited English Proficiency (LEP)).

LOCAL LABOR MARKET:
A geographic area no more than 2 hours round trip from a person's home in which the person must search for suitable employment.

LUMP SUM:
Cash received on a non-recurring or irregular basis that cannot reasonably be anticipated. Lump sums include winnings, insurance settlements, and inheritances, retroactive payments of RSDI, VA, and unemployment insurance. See §4.12 (Treatment of Income).
OCCURRENCE OF NON-COMPLIANCE:
A month a participant is not in compliance with MFIP requirements. In post 60-month MFIP, an occurrence of non-compliance refers to non-cooperation with Employment Services and may result in sanction, removal (disqualification) of a household member, or case closure (disqualification of case).

ON-LINE DIPLOMA:
For an 18- or 19-year old with an on-line diploma other than from a program approved by the Dept. of Education, explain the MFIP policy and place the teen in the “work option”. See §6.3.9 (Requirements for Teen Parents).

For caregivers under 18 years of age, who are enrolled in an on-line secondary school or GED program, refer to the school district to determine its legitimacy. Each district has a transfer specialist who will sort this out, probably by doing testing.

ON-THE-JOB TRAINING (OJT):
Training in the public or private sector that is given to a paid employee while he or she is engaged in productive work and that provides knowledge and skills essential to the full and adequate performance of the job.

PARENT:
A child's natural, step, or adoptive mother or father. Also see STEPPARENTS in §3.39 (Glossary: S...).

PARTICIPANT:
A recipient of assistance who participates or is required to participate in the Diversionary Work Program or MFIP Employment Services.

PATERNITY:
Legal fatherhood, either adjudicated or established through a Recognition of Parentage.

PAYMENT MONTH:
The calendar month for which assistance is paid.

PERMANENT DISQUALIFICATION:
For extension purposes, permanent disqualification occurs when 1 or both caregivers are no longer eligible to receive MFIP due to failure to comply with Employment Services. Both caregivers may reach this point in post 60-month MFIP after the 6th
occurrence of non-compliance with Employment Services, or 1 caregiver in a 2-parent case may reach this point upon 2nd removal from the MFIP grant due to non-compliance with Employment Services.

PERSONAL NEEDS ALLOWANCE:
An allowance of up to $70 per month for each Diversionary Work Program unit member to pay for expenses such as household products and personal products.

PERSON TRAINE IN DOMESTIC VIOLENCE:
An individual who works for an organization designated by the Minnesota Center for Crime Victim Services as providing services to victims of family violence, a county staff person who has received similar training, or any other person or organization designated by a qualifying organization. See §7.3 (Employment Plan (EP)), §7.12 (Plan for Victims of Family Violence), §7.36 (Family Violence Waiver Option).

POST-SECONDARY SCHOOL:
A school serving students beyond the 12th grade, such as a community college, university, or technical college.

PROSPECTIVE BUDGETING:
A method of anticipating income and determining benefit levels in which the budget month and payment month are the same. See §4.24 (Budgeting Policies).

PROTECTIVE PAYMENT:
Assistance payments made to people outside the unit who receive the entire assistance benefit on behalf of the unit and are responsible for paying for the basic needs of the unit to the extent of the assistance payment.

PROTECTIVE SERVICES:
Social service programs designed to prevent abuse or neglect and safeguard dependent children and vulnerable adults.

QUALIFIED PROFESSIONAL:
Licensed physician, a physician’s assistant, a nurse practitioner, a certified midwife, or a licensed chiropractor. For qualified mental health professional or qualified professional to determine Developmental Disabilities, see §13.18.3 (Developmental Disability/Mental Illness Extension Criteria). For qualified professional to determine learning disability or IQ, see §13.18.6 (Learning Disabled Extension Criteria). For qualified professional to determine if participant is “unemployable”,
see §13.18.12 (Unemployable Extension Criteria).
The birth of an additional child to a family already receiving MFIP will NOT result in an increase in cash assistance, unless certain conditions are met.

The Family Cap applies to the Minnesota Family Investment Program (MFIP) and the Diversionary Work Program (DWP). Counties must inform applicants about the Family Cap at the time of each MFIP or DWP application and at MFIP recertification. You may use the flyer Important Information About the Family Cap (DHS-4198).

The Family Cap ONLY applies to the cash assistance portion of MFIP that the newborn would get. The baby will be eligible for the food portion of MFIP. The Transitional Standard will be different than regular MFIP standards when there is a child not eligible for cash due to the Family Cap.

**EXAMPLES:**

**Child subject to Family Cap**
If the new child IS subject to the Family Cap, the Transitional Standard will go from a household of 2 at $764 ($437 cash and $327 food) to a household of 3 at $910 ($437 cash and $473 food). The Family Wage Level (FWL) for a household with a child subject to the Family Cap will be based on the family size used to determine the food portion of the Transitional Standard.

**Child NOT subject to Family Cap**
If the new child who is NOT subject to the Family Cap is born to a household consisting of a mother and one other child, the Transitional Standard will go from a household of 2 at $764 ($437 cash and $327 food) to a household of 3 at $1005 ($532 cash and $473 food).

In both of these examples, the FWL would be that of a household of 3, or $1,106.

The child who is subject to the Family Cap is considered an assistance unit member in all ways except that any child support received or distributed on behalf of the child is excluded. Otherwise, all other income and resources of the child subject to the Family Cap must be counted the same as they are for other children who are not subject to the Family Cap. The caregiver must assign support for the child subject to the Family Cap and cooperate with the child support enforcement agency or be subject to sanction. Workers will continue to receive CSES DAIL messages detailing support distributed on behalf of the child who is subject to the Family Cap. Children who are subject to the Family Cap will be eligible for child care benefits the same as children who are receiving MFIP.
CHILDREN WHO MEET THE FOLLOWING CONDITIONS ARE NOT SUBJECT TO THE FAMILY CAP POLICY

A child (or children) conceived as a result of a sexual assault or incest. The mother must verify that the incident was reported to a law enforcement agency.

- The 1st child (or children of a multiple birth) born to a minor caregiver. This will mainly apply to a pregnant minor who receives DWP or MFIP as a “MINOR CHILD” before applying for her own MFIP grant as a minor caregiver.

- Children who are born within certain time frames:
  - For families receiving MFIP assistance on July 1, 2003, any child born to the adult parent before May 1, 2004.
  - For families who apply for the DWP or MFIP programs on or after July 1, 2003, any child born to the adult parent within 10 months of the date the family is eligible for assistance.

- An adopted child or a child living elsewhere who returns to the parent’s home.

- A relative’s child that an MFIP caregiver may apply for.

- Any child who had been subject to the Family Cap (and not receiving cash assistance) could receive the cash portion if the adult parent(s) has NOT received benefits from DWP or MFIP assistance in the previous 10 months and is reapplying for DWP or MFIP.

An adult parent(s) who reappplies and has received benefits from DWP or MFIP within 10 months is under the 10-month newborn eligibility period of the previous application. Therefore, a child born to the adult parent(s) within the original 10-month period is NOT eligible for cash assistance upon reapplication.
DO NOT use TANF funds to pay for medical services, including mental health diagnosis, psychological testing to make a learning disability determination and chemical dependency assessments. All mental health diagnostic assessments have an integral functional component necessary for diagnostic purposes but which is not in and of itself a billable service. A diagnostic assessment is a specific medical service that can only be conducted by a licensed mental health professional.

**NOTE:** A functional assessment conducted for the sole purpose of determining the impact of a barrier on an individual’s employment is NOT a medical service nor is it equivalent to a mental health diagnostic assessment. Use TANF funds for these assessments.

**IN MANAGED CARE COUNTIES:**

Participants who are enrolled in health plans or Managed Care programs should be assessed through the behavioral health network used by that plan. The cost will be covered for enrolled participants as long as the assessment is completed within the health plan’s network of providers.

Use the health plans to get the health-related assessments your participants need. Be sure to use the correct terminology to ensure that health plans recognize the request as a covered service.

- Use the MFIP Self Screen (DHS-3482) and DWP/MFIP Observation Checklist (DHS 3483) to help evaluate whether a participant has mental health and/or chemical dependency problems. Use the MFIP Self-Screen Scoring Form (DHS 3482A) to record a participant’s score from the MFIP Self Screen (DHS-3482).

- Find out from the participant which health plan he or she is enrolled in.

- Use the Greater Minnesota PMAP and MinnesotaCare Contact Grid for Mental Health and Chemical Health Services (DHS-4484) to determine how to find a provider to complete the needed professional assessment.

- If the plan requires authorization, help the participant contact the health plan if possible. You should identify yourself and your client, and explain what you are looking for. The participant should also speak directly to the staff.

- For mental health issues ask for a **mental health diagnostic assessment**. “Work” or “vocational” assessments are **not** covered by MA.
For intelligence testing, ask for a psychological assessment for the purpose of determining a developmental disability.

For a learning disability, ask for a psychological assessment for the purpose of determining a learning disability.

For a chemical health issue, ask for a chemical dependency assessment.

Let the behavioral health provider for the health plan know if you believe the participant needs a mental health assessment, or a chemical dependency assessment, or both, or if you are not certain which type of assessment needs to be done.


Send the assessor the MFIP Employment Services Authorization for Release of Information (DHS-4093), as well as a copy of the MFIP Self Screen (DHS-3482), DWP/MFIP Observation Checklist (DHS-3483), and any other relevant information.

**NOTE:** Do not forward third party information unless specifically detailed in the release of information.

Health plan providers will apply the “medically necessary” criteria when determining whether a service is covered. To help ensure that mental and chemical health assessments are recognized as covered services, participants should understand why they are being referred and be able to convey that information to the assessor. You should also develop a cover letter that can be sent to the assessor when a referral is being made, along with a copy of the MFIP Self-Screen Scoring Form (DHS-3482A) when the total score is 3 or more (requires a signed release of information).

**THINGS TO REMEMBER:**

- Assessing work functionality is not a core competency for professionals who administer psychological or behavioral assessments. Some professionals do have skills in this area, but it is a specialty. You can request an assessor with that specialty or specialization in Social Security disability assessment. Some health plans are able to identify their network providers with these specialties.
Asking for an IQ test is sometimes rebuffed; it is better to ask for a psychological assessment to determine a developmental disability or a learning disability. That will typically result in an IQ test being completed.

ARMHS is a benefit for adults with severe mental illness. These are not covered services under the health plans but PMAP members still have this benefit through straight MA.

Care managers at the health plans are available for difficult or complicated cases. Ask to speak with a care manager, but only if the intake or customer service staff can’t address your client’s needs.

ES providers have reported that if you take the participant to the assessment, the “no-show” rate drastically declines.

Create a relationship with the mental health provider and if the needed assessments are numerous enough, some ES providers have negotiated standing appointments they can fill with participants.

If the participant is recently out of school, many times learning disabilities have already been documented. Attempt to access any records there might be through the public school district last attended.

USEFUL TERMINOLOGY:

**Prepaid Medical Assistance Program (PMAP):** DHS contracts with and makes payments to health plans to deliver health care to eligible MA and GAMC recipients. Health plans must provide all medically necessary MA/GAMC covered services.

**Adult Rehabilitative Mental Health Services (ARMHS):** This is an option under MA that allows for greater flexibility in how and by whom services can be provided. The ARMHS services are mental health services which are rehabilitative and enable the recipient to develop and enhance psychiatric stability, social competencies, personal and emotional adjustment, and independent living and community skills, when these abilities are impaired by the symptoms of mental illness. ARMHS are also appropriate when provided to enable a recipient to retain stability and functioning, if the recipient would be at risk of significant functional decompensation or more restrictive service settings without these services.
ARMHS instruct, assist, and support the recipient in areas such as, interpersonal communication skills, community resource utilization and integration skills, crisis assistance, relapse prevention skills, health care directives, budgeting and shopping skills, healthy lifestyle skills and practices, cooking and nutrition skills, transportation skills, medication education and monitoring, mental illness symptom management skills, household management skills, employment-related skills, and transition to community living services.

ARMHS services are carved out of the health plans so providers bill straight MA when giving these services to PMAP members.

For a full list of ARMHS providers from the DHS website, go to this link: http://www.dhs.state.mn.us/id_004956. Or go to the DHS home page www.dhs.state.mn.us and type in “ARMHS” in the Search area. It will give you several options. One of the options is a list of all the ARMHS providers in the state.

**Work Assessment, Vocational Assessment, Functional Assessment:** These types of assessments are typically used by Mental Health Supported Employment or Rehabilitation Services Counselors. It combines a psychological assessment with a functional work assessment. They are used by the counselor to help make vocational recommendations about the type of work that might be appropriate for a participant as well as limitations.

**Mental Health Diagnostic:** This type of assessment is primarily for mental health but uses a more comprehensive approach in order to screen for other factors such as physical concerns and chemical use. When seeking a diagnostic assessment for suspected mental health issues, a “diagnostic or behavioral health assessment” should be requested. If it is unclear whether the issues are stemming from chemical abuse or mental health issues, this type of assessment would be able to screen for chemical dependency issues as well. It is best to advise the assessor if chemical issues are suspected.

**Rule 25 Assessment:** When seeking a chemical health assessment, do not ask a health plan for a Rule 25 assessment, just ask for a chemical dependency assessment. Only counties can provide Rule 25 assessments. Health plans may be contracted with other facilities to do such assessments.

**Learning Disability Assessment:** If you need an IQ determined, ask for a psychological assessment for determination of a developmental disability or learning disability.
IN FEE-FOR-SERVICE COUNTIES:

Participants who are NOT enrolled in health plans or managed care programs should be assessed by a qualified professional who will accept Medical Assistance (MA) reimbursement.

Refer or direct participants who have been determined to need a professional assessment to call a qualified MA enrolled professional. It is important to request “mental health diagnostic testing” and/or a “chemical dependency assessment”. Use the correct terminology to ensure that MA enrolled providers recognize the request as a covered service. A copy of the screening tool and scoring form should accompany the referral.
This is a function in the Workforce One (WF1) system that provides a place in employment services to keep track of Family Stabilization Services (FSS) plans and plans with reduced hours. Plan types are selected on the employment plan page under the Program tab. In addition to the online plans, plan types can also be chosen when a paper plan is completed.

One and only 1 plan type should be open at a time. New plan types will close the previous one.

**Employment Plan**

Use this when the participant is in a “regular” employment plan. There are no deviations from the range of expected performance and they do not qualify for FSS.

**Reduced Hours Due to Good Cause**

There are circumstances where participants meet good cause and therefore, need the hours of their plan to be reduced.

**Correct use:**

- The participant meets good cause.
- Good cause is the reason for the reduced hours.

**Incorrect Use:**

Reduced hours should not be used:

- On a long term basis, (recommend no longer than 3 months).
- To justify the reduced hours in the plan, only meeting good cause can justify the need.
- To eliminate the need to complete the assessment and diagnostics. See §7.15 (EP - Reduced Hours Due To Good Cause).

**FSS - Non-citizen/Refugee/Asylee**

Use this when the participant is a new immigrant within the first 12 months. After the 12 months is up, the participant can continue on FSS if the county/ES provider determines there
PLAN TYPES

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is a need. See §11.6 (FSS Eligibility Criteria).

FSS - Ill or Incapacitated

Use this when the participant has a diagnosis by a qualified professional as suffering from an illness or incapacity that is expected to continue for more than 30 days and severely limits the person’s ability to obtain or maintain suitable employment. See §11.6 (FSS Eligibility Criteria).

EXT/FSS - Ill or Incapacitated

Use this when the participant has a diagnosis by a qualified professional as suffering from an illness or incapacity that is expected to continue for more than 30 days and severely limits the person’s ability to obtain or maintain suitable employment. This is for post-60 month extended cases. See §11.6 (FSS Eligibility Criteria).

FSS - Needed in Home

Use this for a participant who is determined by a qualified professional as being needed in the home to care for an ill or incapacitated family member for over 30 days. See §11.6 (FSS Eligibility Criteria).

EXT/FSS - Needed in the Home

Use this for a participant who is determined by a qualified professional as being needed in the home to care for an ill or incapacitated family member for over 30 days. This is for post-60 month extended cases. See §11.6 (FSS Eligibility Criteria), §13.15.9 (Special Medical Criteria Extension).

FSS - Special Medical Criteria

Use this for a participant with a child or an adult in the household who meets the disability or medical criteria for home care services or a home and community based waiver services program or meets the criteria for severe emotional disturbance or serious and persistent mental illness. See §11.6 (FSS Eligibility Criteria).

EXT/FSS - Special Medical Criteria

Use this for a participant with a child or an adult in the household who meets the disability or medical criteria for home care services or a home and community based waiver services
MFIP EMPLOYMENT SERVICES MANUAL

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program or meets the criteria for severe emotional disturbance or serious and persistent mental illness. This is for post-60 month extended cases. See §11.6 (FSS Eligibility Criteria), §13.15.9 (Special Medical Criteria Extension).

**FSS - Hard-to-Employ**

Use this when the participant has a diagnosis of mental illness, developmental disability, learning disability, IQ under 80 or unemployable as defined by the current extension categories. In addition to the diagnosis, the condition must severely limit the person’s ability to obtain or maintain suitable employment. See §11.6 (FSS Eligibility Criteria).

**EXT/FSS - Hard-to-Employ**

Use this when the participant has a diagnosis of mental illness, developmental disability, learning disability, IQ under 80 or unemployable as defined by the current extension categories. In addition to the diagnosis, the condition must severely limit the person’s ability to obtain or maintain suitable employment. This is for post-60 month extended cases. See §11.6 (FSS Eligibility Criteria).

**FSS - Applied for SSI/RSDI**

Use this for participants when they qualify for FSS because they have applied or are appealing an SSI/RSDI application.

There may be overlap between this plan type and others, but you can only pick one. The “official” FSS category will be taken from MAXIS. Therefore, financial workers and employment services staff should communicate so both sides have an FSS case type recorded. An exact match is not necessary. See §11.6 (FSS Eligibility Criteria).

**FSS - Family Violence Waiver**

Use this when a participant is in an approved family violence waiver. See §11.6 (FSS Eligibility Criteria).

**EXT/FSS - Family Violence Waiver**

Use this when a participant is in an approved family violence waiver. This is for post-60 month extended cases. See §11.6 (FSS Eligibility Criteria).
FSS - Age 60+

Use this for participants when they qualify for FSS because they are 60 or older.

EXT - Working

Use this for participants who are extended for working at least 30 hours a week for a single parent and at least 55 hours combined for a 2-parent family. See §11.6 (FSS Eligibility Criteria).

EXT - Working Limited Hours

Use this for participants who are working limited hours due to a disability and are extended in this category. See §11.6 (FSS Eligibility Criteria).
When the caregiver has a documented disability the job counselor and participant should develop a plan that includes reasonable accommodations. When designing the plan, job counselors should seek input from those professionals who assessed the participant and can evaluate his or her ability to perform the activities in the plan. It is the responsibility of the job counselor to inform all participants of their right to reasonable accommodations per guidance under the Americans with Disabilities Act. See §4.3.9 (Civil Rights and the Americans with Disabilities Act).

EXAMPLES OF EPs

- **Ill or incapacitated for more than 30 days:**
  Caregivers in this category should have documentation from a qualified professional on file stating the nature and duration of the illness or incapacity. The plan should be based on this documentation until it is either updated or expires. If the participant is unable to participate for 30 days or more, verification in the file should document the participant’s inability to work 20 or more hours a week. This plan should include follow through with treatment recommendations, regular meetings with the job counselor, and the date when the verification must be updated.

  Employment Services providers should help with any special transportation requirements and make other accommodations as necessary.

  **NOTE:** Medical Assistance can reimburse participants for the cost of transportation for medical services covered by Medicaid. Refer participants to their financial worker for information about MA reimbursement.

  Alternate arrangements should be made if the participant’s condition prohibits him or her from coming to the Employment Services office. Alternate arrangements also include home visits, telephone interviews, and mailing the Employment Plan for signature if necessary.

  The plan should only contain activities and hourly requirements appropriate to the participant’s circumstances. If appropriate, an application for SSI should be pursued.

  **Non-Compliance:**
  Participants may not be sanctioned for failure to follow through with treatment recommendations. However, a sanction may be imposed for non-compliance
with developing a plan or other activities in the plan (required meetings, maintain contact, verifications, etc.) as long as those activities are within the participant’s abilities and necessary accommodations have been made. The participant may also be eligible to claim good cause if unable to meet the requirements of the plan. See §14.6 (Good Cause for Non-Compliance). There are certain provisions that need to be met prior to sanctioning when:

- Information has been received that an MFIP recipient may meet FSS Eligibility.

  OR

- Eligibility for FSS has been determined. See §11.18 (FSS Sanction Provisions).

Participant is unable to participate for less than 30 days:
The plan for a participant with verification of an illness or incapacity that expires within 30 days will most often include the same activities listed in the example above, as well as activities that will be required after the verification of illness expires.

Some participants may have recovered fully and will not need a specialized plan. Others may be able to participate but on a more limited basis. Activities included in the plan should be based on recommendations from the medical or other qualified professional who treats the participant. Continued treatment or therapy should be included in the plan as necessary and with the participant’s agreement. The plan should not include an expectation that the participant will accept a job that aggravates an identified disability/condition or that requires skills the disability prevents the person from acquiring. For example, an individual with a stress related mental health disorder should not be required to accept a position that would increase exposure to a stress level (demanding workload; deadline pressure) that would negatively impact the participant’s recovery.

The plan should only contain activities and hourly requirements appropriate to the participant’s circumstances. Employment Services providers should help meet any special transportation requirements and make other accommodations as necessary.

NOTE: Medical Assistance can reimburse participants for the cost of transportation for medical services covered by Medicaid. Job Counselors should refer participants to their financial worker for information about MA reimbursement.
Non-Compliance:
Participants may not be sanctioned for failure to follow through with treatment recommendations. However, a sanction may be imposed for non-compliance with developing a plan or other activities in the plan as long as those activities and hourly requirements are within the participant’s abilities and necessary accommodations have been made. A participant may have good cause for failure to comply. See §14.6 (Good Cause for Non-Compliance). There are certain provisions that need to be met prior to sanctioning when there is information that an MFIP recipient may meet FSS eligibility or eligibility has been determined. See §11.18 (FSS Sanction Provisions).

➢ Participant is needed in the home to care for a disabled household member:
The plan for participants with verification from a qualified professional should include information about the level of participation that can be reasonably expected from the participant given the family circumstances and the extent to which the caregiver is needed in the home.

If the household member is a child active in an educational program during part of the day, activities may be scheduled during the time the child is not under the parent’s supervision. For example, the plan may require the caregiver to attend parenting classes 2 days a week from 11:00 to 2:00 or could require the participant to seek part time work that does not interfere with the caregiver’s ability to care for the disabled household member.

The plan should only contain activities and hourly requirements appropriate to the participant’s circumstances.

Non-Compliance:
The participant can be sanctioned for non-compliance if he or she fails to cooperate with developing a plan or with activities in the plan that do not interfere with their responsibilities for providing care for the disabled household member. In situations where their plan conflicts due to changes in the needs of the household member, the plan should be modified. Good cause policies remain in effect. See §14.6 (Good Cause for Non-Compliance). There are certain provisions that need to be met prior to sanctioning when there is information that an MFIP recipient may meet FSS eligibility or eligibility has been determined. See §11.18 (FSS Sanction Provisions).
SELF-EMPLOYMENT EARNINGS & HOURS 8.6.3

Self-employed participants’ monthly earnings are used to determine ongoing exemptions as well as participation requirements for self-employed participants who are not exempt.

A participant's earnings are calculated by taking reported income from self-employment and subtracting reported self-employment expenses. The financial worker will gather and share this information.

Use the actual amount of earnings counted against the participant’s grant in a given month to determine participation hours for that month. This figure is taken from the MAXIS system. It can represent either the actual earnings for a previous month or a rolling average of earnings over the year, depending on how the participant's income is counted against the grant. Communicate each month with the financial worker so that you know what earnings figure was used that month in calculating the participant's additional work/job search requirement.

To determine the number of hours of participation:

1. Start with the participant's monthly earnings figure, as calculated by the financial worker. Call the financial worker for this figure if it is not provided in a Status Update.

2. Divide the figure from Step 1 by 4.3 to arrive at a weekly earnings figure (there are an average of 4.3 weeks in a month).

3. Divide the figure from Step 2 by the federal minimum wage to arrive at the number of hours per week for which the participant is earning minimum wage.

EXAMPLE: A participant's counted earnings are $460 in a given month.

\[
\begin{align*}
\text{Earnings} & \quad \$460.00 \\
\div & \quad 4.3 \\
\text{Weekly earnings} & \quad \$106.98 \\
\div & \quad \$7.25 \\
\text{Minimum wage} & \quad 14.75 \\
\text{Hours of minimum wage work equivalent} & \quad 14 \\
\text{Truncated hours of minimum wage work equivalent} & \quad 14
\end{align*}
\]

In this case, the expectation should be that the participant will find additional work or participate in job search for at least 7+ hours per week (with a child under 6) or 17+
hours per week (with a child over 6), unless there is a compelling reason to expect fewer hours.

A participant’s income from self-employment will fluctuate. This will be particularly true in the case of people who are seasonally employed and choose not to use the rolling average to calculate their earnings. This means that the required number of hours of work will also fluctuate from month to month.

Participants are required to fulfill this work requirement regardless of how many hours they actually work in self-employment. Many small businesses require long hours of work for very little economic return, especially when they are just starting out. Even if a participant is working 60 hours per week in self-employment, if he/she is not earning the equivalent of federal minimum wage for the required number of hours, he/she will be subject to additional work requirements or face sanction. Make this aspect clear to participants who are considering self-employment.
Financial Workers are responsible for obtaining documentation and verification for those participants in paid employment.

Financial Workers can accept the following documentation for all participants who are engaged in paid employment, who are not self-employed:

- Pay stubs that include hours worked.
- Employer reports that list hours worked.
- Employer time and attendance records.
- Employer statement of hours worked.

The county must verify the number of hours of paid employment.

MFIP participants submit a monthly Household Report Form (HRF) to the county and attach documentation and verification of the hours of paid employment. Employment Services Providers can not require additional verification of hours in unsubsidized employment. Department of Human Services (DHS) requires that if required verification information such as paycheck stubs is known to the agency, the employment counselor can not require that the participant submit the verification again. ES providers are included in this definition as part of the agency because of the contractual relationship with the respective county. Household Report Forms (HRF) must have the work verification attached. Requiring paycheck stubs both to the employment counselor AND along with the HRF violates this “known to the agency” policy.

When a participant submits a HRF and accompanying paycheck stubs by the 8th of the month, this is sufficient notice for both employment counselor and financial worker. As soon as the HRF is processed, this information comes across on the WF1/MAXIS interface and in Hennepin is loaded on Diamond.

The following are strategies that can be used to help prevent last HRFs/paycheck stubs or in the event the participant turns in the HRF/paycheck stubs late to get the information needed without requiring that the pay stubs be turned in twice:

- Write a clause in the employment plan that if the participant fails to submit the paycheck stubs with the HRF by the 8th of the month, activity logs will be required. The activity log will need to include the number of hours worked in the month. Failure to turn in these activity logs is subject to sanction.

**Note:** you cannot send a participant the Notice of Intent to Sanction (NOITS) **DHS-3175** or sanction them for not providing you with their paycheck stubs.
Try a positive approach by using incentives. Reward participants for turning in the HRF and paycheck stubs on time with gas vouchers or gift certificates.

SELF-EMPLOYMENT DOCUMENTATION & VERIFICATION

Self-employment participants are required to submit a monthly Household Report Form (HRF) and either a Self-Employment Report Form with documentation that supports the participant’s business related income and allowable expenses or other similar documentation of monthly business income and expenses. The hours of self-employment counted toward the participation rate requirement are determined by subtracting the allowable business expenses from the business income (net income) and dividing the remainder by the federal minimum wage ($7.25/hour). MAXIS will calculate the number of hours of self-employment.

Counties must inform Employment Services Providers (ESPs) of a participant’s hours of self-employment each month. Employment Services Counselors must determine if the countable hours of self-employment are sufficient to meet the work participation rate requirements. If the hours are not sufficient to meet the work participation rate, the ESP and participant must consider additional countable work activities.

DAILY SUPERVISION OF PAID EMPLOYMENT

Assume the participant’s employer will provide daily supervision. There are no additional supervision requirements.
Hours tracked in these activities are **not included** in the work participation rate calculation.

**HOLDING (Other Allowable Activity)**

This non-activity temporarily places a participant in “suspension”. Holding is commonly used to allow some time to pass before anticipated entry into another activity. It is also recommended to use this when someone already enrolled in MFIP takes the 12 month exemption, in order to avoid a new referral process.

**HOLDING – SANCTION (Other Allowable Activity)**

This non-activity is used when a participant is in sanction status for non-cooperation with MFIP Employment Services.

**OTHER (Other Allowable Activity)**

This activity is used to track hours for activities not included in other activity categories. Efforts to stabilize the family by securing suitable housing, doctor appointments, etc. may be included.
Participants in the activities listed below may be credited for holidays, plus a limited number of days for Other Excused Absences (OEA).

- Community Work Experience Program (CWEP).
- Unpaid Work experience.
- Job Search and Job Readiness Assistance.
- Community Service Programs.
- High School Completion.
- GED classes.
- Functional Work Literacy (FWL).
- English as a Second Language (ESL).
- Post-secondary Vocational Education Training lasting 12 months or less.
- Post secondary Vocational Education Training, 13 – 24 months.
- Job Skills Directly Related to Employment.
- Providing Child Care to Community Service Program Participant.

**NOTE:** It is also allowable to use OEA for activities not counted towards the TANF participation rate. Using OEA for activities such as “Social Services” or “Other”, count towards the 80 hours of holiday and OEA limits.

**Excused Holidays**

Participants will be credited as participating on the holidays listed below. Up to 8 hours can be used for each of these holidays; participants must be credited with the number of hours they would have been scheduled for if the day had not been a holiday.

- New Year’s Day (January 1st).
- Martin Luther King Day (3rd Monday in January).
- President’s Day (3rd Monday in February).
- Memorial Day (Last Monday in May).
- Labor Day (1st Monday in September).
- Veterans Day (November 11th).
- Thanksgiving Day (4th Thursday in November).
- The Day after Thanksgiving (4th Friday in November).
- Christmas Day (December 25th).

When New Year’s Day, Independence Day, Veterans Day, or Christmas Day falls on Sunday, the following Monday shall be a holiday. When New Year's Day, Independence Day, Veterans Day, or Christmas Day falls on Saturday, the preceding Friday shall be a holiday.
To correctly apply the holiday hours correctly, follow the guidance below.

1. To determine whether or not a participant can be credited with holiday hours the participant must be scheduled to participate in one or more unpaid activities on the date of the holiday, but was unable to participate because the office/location where the activity was to occur was closed due to the holiday.

2. Refer to the participant’s employment plan activity schedule to determine the number of holiday hours to credit the participant and the corresponding activity.

3. The holiday hours should be proportionately split between multiple activities when the participant was scheduled to be engaged in multiple activities on a holiday.

Other Excused Absences (OEA) for Participants in Education and Training Activities

Participants engaged in Education and Training Activities, including Vocational Educational Training, Adult Basic Education (ABE), Functional Work Literacy (FWL), English as a Second Language (ESL) and General Education Development Certificate (GED) Training will be credited with no more than 80 hours of excused absences over a 12 month period, with no more than 16 hours in a calendar month period. Participants will be considered to be meeting the attendance requirements and credited with excused hours when the educational institution is not in regular session, including holiday breaks. This policy does not apply to summer breaks.

Granting Excused Absence Credit

Participants do not have to accrue excused absence hours. A participant is eligible for the full excused absence policy as soon as they become engaged in one of the activities listed at the beginning of this section.

Credit a participant with no more than 16 hours per month for excused absences, with no more than 80 hours of excused absences over a 12-month period. The 12-month period is a rolling period. To determine whether the participant is eligible for an excused absence credit, look back over the previous 11 months.

If the participant has been granted OEA for 80 hours over the previous 11 months, the participant is not eligible for any additional hours of OEA in the 12th month.

If the participant has been granted OEA for less than 80 hours over the previous 11 months, the participant is eligible to be credited with the number of hours equal to 80 hours minus the
number of OEA hours credited in the previous 11 months.

Participants are eligible for up to the number of hours they were scheduled for on the OEA day(s). A participant may use as little as one hour of OEA per occurrence.

Hours must be recorded in the activity category where the hours were missed.

Case note the reason for the OEA and reference giving the participant an “Other Excused Absence” or “OEA” allowance for that day.

To apply the OEA hours correctly, follow the guidance below.

To determine whether or not a participant can be credited with OEA hours the participant must:

1. Check the previous 11 months to determine that they are eligible for OEA Hours.

2. Refer to the participant’s employment plan activity schedule to determine the correct number of OEA hours to credit the participant and the corresponding activity. If the plan is written for 25 hours a week. The participant would be credited 5 hours for the day.

3. The OEA hours should be proportionately split between multiple activities when the participant was scheduled to be engaged in multiple activities on the date the participant was unable to participate.

4. Use Good Cause Reasons to grant OEA hours. A participant may be credited with OEA hours for any good cause reason. However, OEA may also be granted for reasons unrelated to good cause. See §14.6 (Good Cause for Non-Compliance).

**NOTE:** The “OEA” for work participation purposes should not be confused with good cause as it relates to the sanction policy. Good cause is not limited to 80 hours per 12 months. Participants must not be sanctioned if they have good cause.

**Workforce One (WF1):** Record the OEA hours in the Excused row under the appropriate, corresponding activity (i.e. Job Search). A corresponding case note should be written documenting the reason.

Because participants are ONLY eligible for up to the number of hours they were scheduled for on the excused absence day(s). A participant may use as little as one hour of excused absence per occurrence.
This is a function in the Workforce One (WF1) system that provides a means for Employment Services to keep track of additional characteristics of a case. Additional information about a plan type, person, or activity can be collected by using identifiers. Identifiers are found on the activity page under the program tab and can be entered in 3 places:

- On the identifier table.
- As part of entering an activity.
- As part of entering an Employment Plan.

Close the identifier when it no longer applies to the participant or the case closes.

You may have zero to many identifiers.

IDENTIFIERS THAT FURTHER DESCRIBE THE PLAN TYPE OR A CHARACTERISTIC OF THE PERSON

**Mental Health (MH) Diagnosis** - Use this identifier when the participant is diagnosed with a mental health condition. This identifier will be used most likely in conjunction with the Hard to Employ FSS plan type, but could also be used with any other plan type including “Employment Plan”. People with mental health issues can successfully work and fully participate in work activities.

**Developmental Disability (DD)** - Use this identifier when the participant is diagnosed with a developmental disability. The diagnosis of a [developmental disability (DD)](https://www.mfip.org/identifiers) is included here. This identifier will most likely be used with the Hard to Employ FSS plan type, but could also be used with any other plan type, including “Employment Plan”. People with developmental disabilities can successfully work and fully participate in work activities.

**Learning Disability (LD)** - Use this identifier when the participant is diagnosed with a learning disability. This identifier will most likely be used with the Hard to Employ FSS plan type, but could also be used with any other plan type, including “Employment Plan”. People with learning disabilities can successfully work and fully participate in work activities.
Low IQ - Use this identifier when the participant is diagnosed with an IQ under 80. This identifier will most likely be used with the Hard to Employ FSS plan type, but could also be used with any other plan type, including “Employment Plan”. People with low IQs can successfully work and fully participate in work activities.

Physical Illness/Incapacity - Use this identifier when medical treatment for an illness or incapacity is expected to last 30 days or more. This identifier will most likely be used with the FSS – Ill or Incapacitated plan type, but could also be used with any other plan type, including “Employment Plan”. People with physical illness/incapacity can successfully work and fully participate in work activities.

Unemployable - Use this identifier for a participant who meets the definition of “unemployable”. The definition can be found in the current extension policy, §13.18.12 (Unemployable Extension Criteria). This is the only identifier that is associated with a plan type and is not a diagnosis. Department of Human Services (DHS) recommends the use of this identifier only if the person has been found eligible for the Hard to Employ – Unemployable category (FSS/extended & pre 60 month FSS). See §13.18 (Hard To Employ Extensions).

IDENTIFIERS THAT FURTHER DESCRIBE THE ACTIVITY OR OTHER SPECIAL CIRCUMSTANCE:

Child Under 12 Months Exemption - Use this identifier when the participant is using the child under 12 month exemption. This will primarily be used with the “Holding” activity.

Chemical Dependency (CD) Assessment - Use this identifier when a participant agrees to complete a CD assessment in his/her employment plan. This identifier can be opened when the CD assessment is put into the Employment Plan. Close it when you receive the assessment. If the participant does not follow through with completing the assessment, close the identifier, put “unsatisfactorily” completed and write in comments that they did not follow through. This will primarily be used with the “Job Search”, “Assessment”, or “Social Services” activities.

Mental Health (MH) Assessment - Use this identifier when a participant is scheduled for and completes an assessment. This identifier can be opened when the MH assessment is put into the employment plan. This identifier can be closed when you receive the assessment. If the participant does not follow through with completing the assessment, close the identifier, put “unsatisfactorily” completed and write in comments that they did not follow through.
Use in conjunction with “Job Search”, “Assessment”, or “Social Services” activities.

**Mental Health (MH) treatment** - Use this identifier when the participant has agreed to mental health treatment as part of the Employment Plan. This is includes but not limited to: counseling, in-patient or out-patient mental health services, and support groups.

Use in conjunction with the “Job Search” or “Social Services” activities.

**Chemical Health (CD) treatment** - Use this identifier when the participant has agreed to do CD treatment as part of the Employment Plan. Close it when all treatment is completed. Include Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) meetings here as well.

Use in conjunction with the “Job Search” or “Social Services” activities.

**Self Screen** - This is the MFIP Self Screen for mental and chemical health issues. When you administer this screening, open and close this identifier the same day. Hours (or minutes in this case) for this should be captured in whichever activity you are using for the appointment, typically “Job Search”, “Assessment”, or “Social Services”. This simply documents that the screening has been completed.

**Learning needs screen** - This is the Brief Screening Tool for Special Learning Needs. When you administer this screening, open and close this identifier on the same day. Hours (or minutes in this case) for this should be captured in whichever activity you are using for the appointment, typically “Job Search”, “Assessment”, or “Social Services”. This simply documents that the screening has been completed.

**Rehabilitation Services** - Use this identifier when a participant has been referred to Rehabilitation Services (RS). This identifier can be opened when the referral is made to RS and can be left open throughout the eligibility determination process. Close this if the RS Counselor finds them ineligible for services, puts them on a waiting list, or discontinues services with the participant.

Use in conjunction with the “Job Search” or “Social Services” activities.

**Child protection** - Use this when a participant is working with child protection and you have included activities related to child protection in the Employment Services Plan.
IDENTIFIERS

Use in conjunction with the “Social Services” activity.

Medical treatment - Use this when a participant has an illness or incapacity expecting to last 30 days or more and the Employment Plan includes medical treatment activities such as medical appointments, physical therapy, dialysis, etc. Use in conjunction with the “Other” activity.

Safety activities - Use this identifier when a participant has a Family Violence Waiver. This identifier will be for specifics in the Plan related to the violence such as meeting with the domestic violence advocate, doing activities through a battered women’s shelter, participating in domestic violence support groups, etc.

Bachelor’s degree - Use this identifier when the participant is in an approved education plan to complete a bachelor’s degree. Use in conjunction with the “Job Skills Training Directly Related to Employment” activity.

Advanced degree - Use this identifier when the participant is in an approved plan for obtaining an advanced degree such as a master’s degree or certificate. (For example, a certificate might be a teaching certificate). Use in conjunction with the “Job Skills Training Directly Related to Employment” activity.

CWEP - Use this identifier for a particular participant after exhausting other employment opportunities, including opportunities to participate in other work activities. This means that as a condition of making a CWEP placement the participant must first be provided with:

- An opportunity for placement in suitable subsidized or unsubsidized employment through participation in job search.

OR

- Placement in suitable employment through participation in On-The-Job Training, if such employment is available.

Use in conjunction with the “Community Service” activity.

Housing – Use this identifier when the participant is homeless and their employment plan includes looking for housing.
Use in conjunction with the “Other” activity.

**Supported Work** – Use this identifier for a participant who is in a supported work position.
A person who is applying for or receiving DWP or MFIP (pre or post 60 months) or a person who was disqualified due to fraud on or after October 1, 2007, who meets 1 or more of the following criteria is eligible for Family Stabilization Services (FSS).

The following are the “ill or incapacitated” eligibility categories:

**ILL OR INCAPACITATED**

Participants who are ill, injured, or incapacitated MUST provide professional certification of an illness, injury, or incapacity that is expected to last more than 30 days and severely limits the participant’s ability to obtain or maintain suitable employment.

**NOTE:** A participant is considered to have met the employment related criteria for this category if the qualified professional determines that the participant’s condition prevents him/her from working 20 or more hours per week.

Participants who are ill or incapacitated ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements. See §13.15.3 (Ill/Incapacitated Extensions).

**NEEDED IN THE HOME**

Participants who are needed in the home MUST provide verification that they are needed to provide care for another member of the assistance unit, a relative in the household, or a foster child in the household who has a professionally certified illness or incapacity that is expected to continue for more than 30 days. Participants in this category are not expected to work but ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements. See §13.15.12 (Needed In The Home Extension Criteria).

**SPECIAL MEDICAL CRITERIA**

Participants with a child or an adult in the household who meets the special medical criteria for home care services or a home and community-based waiver services program, severe emotional disturbance, or serious and persistent mental illness. Those meeting the special medical criteria must be receiving or eligible to receive these services or programs. Verification of the ability of caregivers to obtain or retain employment is not required. The participant in a single parent MFIP unit and 1 of the parents in a 2-parent unit are presumed to be unable to work but ARE REQUIRED to develop an EP for FSS participants and follow FSS service requirements.
If the participant’s health care provider cannot or will not provide the information needed to determine if the participant is eligible for FSS, obtain a release of information from the participant authorizing you to contact the health care provider. Explain to the health care provider that this information is needed to determine if the participant is eligible for a service track in MFIP. If the health care provider still does not respond, contact the consumer representative at the health plan. If the health plan does not respond, contact DHS Health Care Purchasing Division, at 651-296-3386 or 1-800-657-3756. Indicate which health plan you have contacted. See §13.15.9 (Special Medical Criteria Extension)

The following are the “hard to employ” eligibility categories:

UNEMPLOYABLE

Before determining whether a participant is unemployable for purposes of FSS, counties and Employment Services Providers should assess whether he or she is eligible under a different FSS category. If he or she does not meet the criteria for another category, but appears to have significant and severe issues that impact their ability to work, a determination of unemployability should be done by a vocational rehabilitation specialist or another qualified professional designated by the county. For more information on Qualified Professional, see §3.33 (Glossary: O-Q...).

There is no single factor or cluster of factors which would indicate unemployability, but take the following into consideration:

- The participant’s work history over the past 5 years. If the person has worked, review his or her work history and the reason or reasons the participant left employment to determine whether any barriers exist which prevent the participant from maintaining a job. If the participant has not worked, review the reason he or she has not been employed to identify any barriers to employment.

- Extremely limited ability to speak or understand English, despite efforts to learn it. There must be documentation of the participant’s efforts to learn English.

- Felony record that inhibits employment in existing positions.

- Other severe and chronic mental health or chemical dependency issues that have not been professionally certified because the nature of the illness interfere with the participant’s ability to seek assessment or treatment. There must be documentation of the agency or other professionals attempt to engage the participant in necessary services.
Participants in this category ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements.

**NOTE:** Factors such as lack of child care, transportation, or housing, while they may be significant barriers to employment, do not in and of themselves constitute a basis for unemployability.

After reviewing the above, determine whether there are any factors that would result in the participant being unable to work. If there are not significant factors that would result in the participant being unable to work, he or she is considered employable and is NOT eligible for FSS. If the participant cannot work, determine whether he or she could work with a reasonable investment of available supports to address his or her limitations.

- If yes, these supports must be provided. The participant is not eligible for FSS under the category of “unemployable”.
- If no, the county must document the lack of available supports, and the participant may be extended as “unemployable”. When appropriate, the county should assist a participant who is assessed as “unemployable” to apply for SSI.

See §13.18.12 (Unemployable Extension Criteria).

**DEVELOPMENTAL DISABILTY OR MENTALLY ILL**

Participants who are developmentally disabled or mentally ill must be diagnosed by a licensed physician, psychological practitioner, or other qualified professional as developmentally disabled or mentally ill or the condition severely limits the participant’s ability to obtain or maintain suitable employment. See §13.18.3 (Developmental Disability/Mental Illness Extension Criteria).

**NOTE:** A participant is considered to have met the employment related criteria for this category if the qualified professional determines that the participant’s condition prevents him/her from working 20 or more hours per week.

Participants in this category ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements.

**PARTICIPANTS WITH IQ BELOW 80**

Participants with an IQ below 80 must have been assessed by a vocational specialist qualified
professional to determine that the condition severely limits the participant’s ability to obtain or maintain suitable employment.

NOTE: A participant is considered to have met the employment related criteria for this category if the qualified professional determines that the participant’s condition significantly restricts:

- The range of employment that the person is able to perform.
- OR
- The condition significantly interferes with the person’s ability to obtain or maintain suitable employment for 20 or more hours per week.

Participants in this category ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements.

Determining if a person has an IQ below 80 may be difficult due to limited English proficiency or lack of cultural assessment tools. Standard methods used to determine IQ may be inappropriate or ineffective. Only accept statements from professionals who are qualified to determine IQ scores AND who have experience assessing functional limitations with non-English speakers. See §13.18.9 (IQ Below 80 Extension Criteria).

**LEARNING DISABLED**

Participants with a learning disability must have been assessed by a vocational specialist or qualified professional to determine that the condition severely limits the participant’s ability to obtain or maintain suitable employment. Learning disabled means that the person has a disorder in 1 or more of the psychological processes involved in perceiving, understanding, or using language. The determination must be based on a statement provided by a licensed professional who is qualified to assess learning disabilities. Statements from qualified professionals submitted for purposes of determining eligibility for these criteria must include verification that:

- There is a pattern of intra-individual discrepancy when compared to similar language of peers.
- The disability is not primarily the result of visual, hearing, or motor handicaps, developmental disability, emotional disturbance or due to environmental, cultural, or economic disadvantage.

NOTE: A participant is considered to have met the employment related criteria for this category if the qualified professional determines that the participant’s condition
significantly restricts:

- The range of employment that the person is able to perform.

OR

- The condition significantly interferes with the person’s ability to obtain or maintain suitable employment for 20 or more hours per week.

Participants in this category ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements.

Determining if a person has a learning disability may be difficult due to limited English proficiency or lack of cultural assessment tools. Verify by seeking and only accepting statements from professionals who are qualified to determine learning disabilities, and have experience assessing functional limitations with non-English speaking clients. See §13.18.6 (Learning Disabled Extension Criteria).

FAMILY VIOLENCE WAIVER

Participants who are victims of family abuse are considered FSS participants. The abuse MUST be verified. See §7.36 (Family Violence Waiver Option) for a list of acceptable forms of verification. These participants must work with a job counselor and/or FSS case manager and a person trained in domestic violence (if they are not already working with a domestic violence advocate) to develop an EP for FSS participants. The primary goal of an EP for Victims of Family Violence is to ensure the safety of the caregiver and the children. The job counselor and/or FSS case manager has final approval of the EP, see §7.12 (Plan for Victims of Family Violence). Participants in this category ARE REQUIRED to develop an EP for FSS participants and follow FSS service requirements.

The following are the remaining eligibility categories:

IN THE COUNTRY 12 MONTHS OR LESS

Participants who are legal non-citizens in the United States 12 months or less are considered an FSS participant and ARE REQUIRED to develop an EP for FSS participants and follow FSS service requirements.

NOTE: Legal non-citizens may continue to receive FSS beyond the initial 12 month period if it is determined by the participant and the case manager that the participant should continue with ESL or skills training or both.
APPLYING FOR SSI/RSDI

Participants who are applying for or those who are appealing a denial of an SSI or RSDI application are considered an FSS participant and ARE REQUIRED to develop an EP for FSS participants and follow FSS service requirements.

AGE 60 OR OLDER

Participants who are age 60 or older are considered FSS participants. They ARE REQUIRED to develop an EP for FSS participants and follow FSS service requirements.
There are specific sanction provisions that MUST be followed once a participant has been determined eligible for Family Stabilization Services (FSS), even if the participant has not developed an EP for FSS Participants. For more information, see Appendix H (FSS Sanction Guidance) and the Family Stabilization Services Pre-Sanction Checklist (DHS-6075). The provisions must also be followed at the time the provider has information that a participant may meet the eligibility criteria. These provisions apply to pre or post 60-month cases.

Examples of what could constitute “information” include:

- Documentation of previous mental health diagnosis.
- Past involvement with other systems; adult or children’s mental health, development disability services, waivered services.
- Self-reported attempts to get help for a mental health condition that has impacted their ability to obtain or maintain suitable employment.
- Previously diagnosed with a chronic health condition that has impacted their ability to obtain or maintain suitable employment.

Employment services staff are often aware that something is interfering with a participant’s ability to follow through with program expectations. The precise nature of the barrier is often not clear. Although signals which raise concerns are not necessarily indicators that a participant may meet FSS eligibility criteria, they may be signs that the participant could benefit from a professional assessment or engagement in other social service systems.

Sanction policy regarding notices, amounts and closure/counting occurrences are the same for FSS as they are for child support and ES sanctions. However, the FSS sanction requirements prior to imposing a sanction, are different. See Chapter 14 (Non-Compliance & Sanctions).

The provisions also apply to FSS participants who were disqualified from MFIP due to fraud after October 1, 2007. In these cases, if a sanction is imposed, it would be applied against the household’s remaining grant amount.
Participants who have reached their 60-month lifetime limit as outlined in §13.3 (60-Month Lifetime Limit) may be eligible for an extension of MFIP if they meet criteria under 1 of the hardship categories listed below:

- **Ill or Incapacitated.** See §13.15.3 (Ill/Incapacitated Extensions). Extensions in this category include ill/incapacitated, needed in the home, and special medical criteria. These participants and are considered Family Stabilization Services (FSS) participants and ARE REQUIRED to develop an employment plan for FSS participants and follow FSS service requirements.

- **Hard to Employ.** See §13.18 (Hard to Employ Extensions). Extensions in this category include developmental disabilities, mental illness, IQ below 80, learning disability, and victims of family violence. These participants are considered Family Stabilization Services (FSS) participants and ARE REQUIRED to develop an employment plan for FSS participants and follow FSS service requirements.

- **Employed.** See §13.21 (Employed Extensions). Extensions in this category include employed and employed/limited hours.

Extended participants may continue to receive MFIP as long as:

- State law provides for extensions.
- The criteria for an extension are met.
- All other MFIP requirements (including ES) continues to be met.

When the criteria or requirements are no longer met, the participant may be sanctioned, have their case closed, or in the case of a 2-parent household be removed from the grant depending on the extension category. If a participant meets FSS eligibility the FSS sanction provisions must be followed before the participant can be sanctioned. See §14.30 (Post-60 Month ES Sanctions - General Provisions). Also see §13.21.6 (Employed Extension Criteria - 2-Parent Units).

**REQUIREMENTS COMMON TO ALL EXTENSIONS**

Although there are separate eligibility criteria for each extension under the categories listed above, there are 3 requirements that are common to all extensions:
**Requesting an Extension**

In most cases, participants must request a hardship extension, either verbally or in writing. Counties MUST document whether the participant requests an extension or indicates that he/she is not interested in applying for an extension. If you receive the request, notify the county immediately. An extension request form should be completed at the face-to-face meeting, if possible. If the participant does not attend the face-to-face meeting, an extension request form must be sent to the participant telling him or her to notify the county, orally or in writing, if he/she wants to be considered for a hardship extension.

There are 2 instances when participants do not need to request an extension:

- When an extension had been approved but eligibility under the original extension category ends. These participants may have to provide documentation that they are eligible under another category.

- When re-applying for MFIP. As part of the application process, these applicants will be required to provide documentation that they are eligible for a hardship extension.

**Providing Documentation**

Participants must provide the documentation necessary for the county to approve an extension. Participants who need help obtaining verifications may sign a release of information that will allow the county or ES Provider to assist on their behalf.

**Compliance in the 60th Month**

Participants may request a hardship extension in any month before or after month 60. However, they must be (or must have been) in compliance with all program requirements in the 60th month. “In compliance with all program requirements” means that the participant was not in sanction for any reason. See “Provisions for 2-Parent Households” below for information on how this requirement applies in a 2-parent family.

If a participant who applies for an extension after the 60th month is able to document that a sanction was incorrectly applied, or that the participant had good cause for the non-compliance, the county must consider the participant compliant.
for the purpose of establishing eligibility for any hardship extension.

ASSISTING PARTICIPANTS WITH THE EXTENSION PROCESS

Counties and ES Providers should work with each family to determine eligibility for an extension. Potential eligibility for an extension such as “ill/incapacitated” or “hard to employ” may involve identifying barriers, referring for assessments, and obtaining documentation. Potential eligibility for the “employed” extension may mean helping participants increase work hours or making subsidized work opportunities available. Counties and ES Providers must tell families who do not qualify for an extension that they would continue to receive benefits such as Food Support and Health Care when they are eligible, and receive information about other community resources.

In all cases, it is important to reach out, follow through, and work with each family as intensively as needed. Families must also follow through on appointments, provide the necessary documentation, complete assessments, and attend scheduled meetings. Expectations need to be clearly communicated.

IDENTIFYING THE APPROPRIATE EXTENSION CATEGORY

Some participants may meet criteria for an extension in more than 1 category, and others may switch categories over time as their situation and family circumstances change. Counties and Employment Services Providers should make initial extension decisions based on the best available information at that time. As more information becomes available, the category of extension may need to be reviewed and changed.

Listed below are examples of the potential extension categories based on a participant with mental health issues. To determine which category to use, consider the following:

- If the doctor's statement says the participant cannot work 20 or more hours per week or participate in work activities at all, extend under Hard-to-Employ Mentally Ill the ill or incapacitated category. See §13.18 (Hard to Employ Extensions).

- If the participant can work in an unsubsidized job but only a limited number of hours, extend under the employed/limited work category. See §13.21.9 (Limited Work Due to Illness/Disability Extension Criteria).
If the participant has been able to obtain and retain unsubsidized employment at the required number of hours, extend under the regular employed category. See §13.21 (Employed Extensions).

PARTICIPANTS WHO SPEAK LIMITED ENGLISH

Counties, and Employment Services Providers under contract with the county, MUST follow the county’s limited English proficiency (LEP) plan to communicate information about hardship extensions to participants who speak limited English. Employment Services Providers should review the LEP plan to make sure they understand what language assistance resources are available to help participants understand necessary information about hardship extensions and what they need to do to request an extension. The most common language assistance resources will be in-person or telephone interpreters and translated documents. Prior to face-to-face meetings, counties should review MAXIS information about the participant’s primary language and the need for an interpreter. If an interpreter is necessary, the county should arrange for one before the interview. Counties must provide meaningful access to the information for clients who speak limited English.

CASES THAT ARE NOT EXTENDED

If the case is closed because the parent(s) do not meet extension criteria, a review must be conducted by the job counselor’s supervisor or the review team designated in the county’s approved Service Agreements to determine if the extension criteria were applied appropriately.

PROVISIONS FOR 2-PARENT HOUSEHOLDS

Hardship extension policy for 2-parent units when both parents reach the 60-month lifetime limit at the same time differs from the policy for 2-parent units when 1 parent reaches the 60-month lifetime limit before the other. The differences are outlined below.

WHEN BOTH PARENTS REACH THE 60-MONTH LIFETIME LIMIT AT THE SAME TIME

BOTH parents must:

- Be in compliance in month 60.

AND
Meet criteria for an extension or have banked months in order for MFIP to be continued.

If 1 parent is not in compliance, does not meet criteria for an extension, or have banked months, the unit may choose to remove the non-compliant or ineligible parent. See §13.21.6 (Employed Extension Criteria - 2-Parent Units).

Parents being evaluated for the employed extension must be in compliance with all program requirements in at least 10 out of the previous 12 months. If the parent being evaluated for the employed extension does not meet the 10 of 12 criteria, the unit may choose to remove that parent from the MFIP unit.

**WHEN 1 PARENT REACHES THE 60-MONTH LIFETIME LIMIT BEFORE THE OTHER**

The parent who reaches the 60-month limit must:

- Be in compliance in month 60.
- Meet criteria for an extension or have accrued banked months in order for MFIP to be continued.

If the parent who has reached month 60 is not in compliance, does not meet criteria for an extension, or have banked months, the unit may choose to remove that parent. See §13.21.6 (Employed Extension Criteria - 2-Parent Units).

The parent who has less than 60 months does NOT:

- Need to be in compliance in month 60.
- Need to meet an extension criteria.

The family may choose to remove the sanctioned parent, who HAS NOT used 60 months, in month 61 and extend the case if the parent who HAS reached month 60 meets any extension criteria.

If the family chooses NOT to remove the sanctioned parent, post 60-month sanction provisions apply and could result in a permanent case closure.
MFIP participants who have household members with serious disabilities qualify for an extension to the 60-month time limit when certain “special medical criteria” are met. These provisions apply to:

- **Participants with a child in the household who meets disability or medical criteria for:**
  - Home care services.
  - Community-based waiver services.
  - Severe emotional disturbance.

  **OR**

- **Participants with an adult in the household who meets disability or medical criteria for:**
  - Home care services.
  - Community-based waiver services.
  - Serious and persistent mental illness

**NOTE:** Although the adult or child must meet eligibility criteria, he/she does not need to be receiving services.

Participants in this category are presumed to be unable to work, and must be evaluated for an extension on or before the 60th month.

“Special medical criteria” means that 1 of the following applies:

- **HOME CARE SERVICES** - Child or adult in the household who meets the disability or medical criteria for home care services. For the purpose of this determination, home care services means a medically necessary health service that is ordered by a physician and documented in a service plan that is reviewed by the physician at least once every 60 days for the provision of home health services or private duty nursing, or at least once every 365 days for personal care. Home care services are provided to the client at the client’s residence that is a place other than a hospital or long term care facility.

- **HOME AND COMMUNITY-BASED WAIVERED SERVICES** - Child or adult in the household who meets the disability or medical criteria for a home and community-based waiver services program. The provisions of these criteria apply to the following home and community-based waiver services programs:
  - **Alternative Care Grant Program (ACG):** A state-funded program that targets people age 65 or older who are at risk of nursing facility level of care
and whose personal financial resources would allow no more than a 6-month stay in a nursing facility. The service menu is the same as that available for people receiving services under the Elderly Waiver.

- **Community Alternatives for Disabled Individuals (CADI):** Targets people under the age of 65 at risk of nursing facility level of care.

- **Community Alternative Care (CAC):** Targets people under the age of 65 at risk of long term or frequently recurring hospitalization (initially designed to serve medically fragile children).

- **Traumatic Brain Injury Waiver (TBIW):** TBIW targets people at risk of the level of care provided in a neurobehavioral hospital or those at risk of the level of care provided in a specialized nursing facility (designed for people who have cognitive and/or behavioral issues).

- **Waiver for Persons with Developmental Disabilities (DD) Waiver:** Targets people who are determined to have DD and are at risk of the level of care provided in an Intermediate Care Facility for people with developmental disabilities. (ICF/DD).

- **Elderly Waiver (EW):** Targets people over the age of 65 who are in a nursing facility or at risk of placement in a nursing facility.

Each of the waivers serves both people moving from an institutional setting to the community and people who are determined to be "at risk of" the level of care provided in the respective institutional setting.

CADI, TBIW, and CAC clients may remain on the waiver after age 65 if warranted by their needs and service plan.

- **SEVERE EMOTIONAL DISTURBANCE (SED) -** There is a child in the household who meets the following definition of “severe emotional disturbance” as determined by a qualified professional, such that he/she:

  - Has been admitted within the last 3 years or is at risk of being admitted to inpatient or residential treatment.

  OR

  - Is a Minnesota resident receiving inpatient treatment or residential treatment for the emotional disturbance through the Interstate Compact.
OR
- Has been determined by a mental health professional to have psychosis or clinical depression, to be at risk of harming self or others, or to have psychopathological symptoms that resulted from physical or sexual abuse or psychic trauma within the past year.

OR
- Has significantly impaired home, school, or community functioning for at least 1 year or for a period that a mental health professional documents as presenting substantial risk of lasting at least a year.

➢ SERIOUS AND PERSISTENT MENTAL ILLNESS (SPMI) - There is an adult who meets the definition of “serious and persistent mental illness” as determined by a qualified professional, such that he/she:

- Has undergone 2 or more episodes of inpatient care for a mental illness within the preceding 24 months.

OR
- Has continuously experienced a psychiatric hospitalization or residential treatment exceeding 6 months' duration within the preceding 12 months.

OR
- Has been treated by a crisis team 2 or more times within the preceding 24 months.

OR
- Has a diagnosis of schizophrenia, bipolar disorder, major depression, or borderline personality disorder which significantly impairs his or her functioning, and a mental health professional documents that he/she is reasonably likely to have future episodes requiring inpatient or residential treatment unless ongoing case management or community support services are provided.

OR
- Has been court-committed as a mentally ill person in the past 3 years or has had his or her commitment stayed or continued.

OR
- Meets any of the criteria above, but the specified time period has expired.

OR
- Was diagnosed with severe emotional disturbance as a child and who a mental health professional has documented in the past 3 years is reasonably likely to have future episodes requiring inpatient or residential treatment unless ongoing case management or community support services are provided.
Participants in this category are presumed to be unable to work, and must be evaluated for extension on or before the 60th month.

**BANKING MONTHS**

Participants with an adult or child in the household who meets special medical criteria may have banked months beginning 1-1-98. These months are used to extend eligibility after the 60-month time limit is reached and ONLY when a participant no longer meets the condition for extension under the special medical criteria. Participants who have banked months must use them before they can be assessed for another category of extension.

Participants using banked months are subject to pre-60 month sanction policies.

After banked months are exhausted, the participant should be **re-evaluated** to determine whether another extension category applies.

**NOTE:** A caregiver can accrue banked months based on the special medical criteria of a child or other adult in the household, but cannot bank months based on his or her own special medical criteria. If the participant meets these criteria, the participant may be extended under the ill or incapacitated category, for example, but would not bank months.

As long as the participant has a household member who meets the special medical criteria, he/she will bank months to be used after reaching the time limit when there is no longer eligibility for a special medical criteria extension. Participants who choose to work do not lose eligibility for the extension. Participants who choose to work do not lose eligibility for the extension.

In a 2-parent household with a child or an adult who meets the special medical criteria, only 1 parent is presumed to be prevented from obtaining or retaining employment. If the family provides documentation from their health care provider that a 2nd parent is also needed in the home to care for the child or adult who meets the special medical criteria or disability, extend 1 parent in the special medical category, and extend the other in the category for participants whose presence is needed in the home. See §13.15.3 (Ill/Incapacitated Extensions), §13.15.12 (Needed in the Home Extension Criteria).
MFIP Employment Services Manual

HARD TO EMPLOY EXTENSIONS

13.18

MFIP participants who have reached their 60-month life time limit may be extended if they meet eligibility criteria for 1 of the following categories:

- Developmental Disability or Mental Illness. See §13.18.3 (Developmental Disability/Mental Illness Extension Criteria).
- Learning Disabled. See §13.18.6 (Learning Disabled Extension Criteria).
- IQ below 80. See §13.18.9 (IQ Below 80 Extension Criteria).
- Unemployable. See §13.18.12 (Unemployable Extension Criteria).

Participants who are extended in any of the Hard to Employ categories are considered Family Stabilization Services (FSS) participants and ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements. The Employment Plan should be developed in consultation with other professionals who work with the individual, and incorporate activities and hours appropriate to each person’s abilities and overall family circumstances. Hourly requirements must be written into the Employment Plan and non-compliance may result in sanction, however, FSS sanction provisions must be followed prior to imposing a sanction. Once it has been determined that a participant can be sanctioned disqualification is part of the post 60-month sanction process. See §14.30 (Post 60-Month ES Sanctions - General Provisions). For information on Employment Plans, see §7.3 (Employment Plan (EP)).

NOTE: Victims of family violence are considered FSS participants and ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements. See §7.12 (Plan for Victims of Family Violence), §13.18.15 (Family Violence Extension Criteria).

Counties may extend MFIP benefits for participants in the above categories after 60 months when documentation is not available by the 60th month. Participants must cooperate with efforts to obtain the documentation, and they may be responsible for an overpayment if they are later determined to not qualify for an extension. Also see §13.6 (Transition Period - 48 to 60 Months).
WHEN BOTH PARENTS REACH MONTH 60 AT THE SAME TIME

When both parents reach month 60 at the same time, evaluate both adults for an extension. If both parents qualify for 1 or more of the hard-to-employ categories, both must participate in and comply with an Employment Plan. Review to determine whether revisions are necessary if 1 or both parents have an existing plan.

WHEN 1 PARENT REACHES MONTH 60 BEFORE THE OTHER

If 1 parent reaches month 60 before the other, evaluate the parent who has reached 60 months for an extension. Participants who meet the hard to employ extension criteria are considered FSS participants and ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements. If this parent has an existing plan, it should be reviewed to determine whether revisions are necessary. The Employment Services status and Employment Plan of the parent who has not reached month 60 should also be reviewed at this time.

See §13.3 (60-Month Lifetime Limit) for an explanation of the 60-month lifetime limit and exceptions. See §13.15 (Hardship Extensions) for general information and requirements for hardship extensions. Also see §13.15.3 (Ill/Incapacitated Extensions), §13.21 (Employed Extensions).
MFIP EMPLOYMENT SERVICES MANUAL          ISSUE DATE   04/2011

DEVELOPMENTAL DISABILITY/MENTAL ILLNESS  
EXTENSION CRITERIA  13.18.3

MFIP participants with mental illness or developmental disabilities are eligible for an extension of their benefits when the condition severely limits the participant’s ability to obtain or maintain suitable employment.

**NOTE:** A participant is considered to have met the employment related criteria for this category if the qualified professional determines that the participant’s condition prevents him/her from working 20 or more hours per week. These participants are considered Family Stabilization Services (FSS) participants and ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements.

Employment Plans developed for participants who are extended due to mental illness or developmental disabilities should be developed in consultation with other professionals working with the participant. The plan should include only activities and hourly requirements appropriate to that person’s abilities and current situation.

**DETERMINATION OF MENTAL ILLNESS**

The determination of mental illness must be made by a licensed physician or a qualified mental health professional. Qualified mental health professional means:

- **In psychiatric nursing, for children:** A registered nurse who is licensed under Minnesota Statutes, Sections 148.171 and who is certified as a clinical specialist in child and adolescent psychiatric or mental health nursing by a national nurse certification organization, or who has a master's degree in nursing or 1 of the behavioral sciences or related fields from an accredited college or university or its equivalent, with at least 4,000 hours of post-master's supervised experience in the delivery of clinical services in the treatment of mental illness.

- **In psychiatric nursing, for adults:** A registered nurse who is licensed under Minnesota Statutes, Sections 148.171 and who is certified as a clinical specialist in adult psychiatric and mental health nursing by a national nurse certification organization or who has a master's degree in nursing or 1 of the behavioral sciences or related fields from an accredited college or university or its equivalent, with at least 4,000 hours of post-master's supervised experience in the delivery of clinical services in the treatment of mental illness.

- **In clinical social work:** A person licensed as an Independent Clinical Social Worker (LICSW) under Minnesota Statutes, Section148D.050, subdivision 6, or a
person with a master's degree in social work from an accredited college or university, with at least 4,000 hours of post-master's supervised experience in the delivery of clinical services in the treatment of mental illness.

- **In psychology:** An individual licensed by the board of psychology under Minnesota Statutes, Sections 148.90, who has stated to the Board of Psychology competencies in the diagnosis and treatment of mental illness.

- **In psychiatry:** A physician licensed under Minnesota Statutes, chapter 147, and certified by the American Board of Psychiatry and Neurology or eligible for board certification in psychiatry.

- **In marriage and family therapy:** A marriage and family therapist licensed under Minnesota Statutes, Sections 148B.29, with at least 2 years of post-master's supervised experience in the delivery of clinical services in the treatment of mental illness.

**DETERMINATION OF DEVELOPMENTAL DISABILITY**

The determination of developmental disability must be made by a professional qualified by training and experience to administer the tests necessary to make such a determination (tests of intellectual functioning, assessment of adaptive behavior, adaptive skills, and developmental function). These professionals include licensed psychologists, certified school psychologists, or a certified psychometrist working under supervision of a licensed psychologist.

Person with developmental disabilities means a person who has been diagnosed as having substantial limitations in present functioning, manifested as significantly sub-average intellectual functioning, existing concurrently with demonstrated deficits in adaptive behavior and who manifests these conditions before the person’s 22nd birthday.

Deficits in adaptive behavior means a significant limitation in an individual’s effectiveness meeting the standards of maturation, learning, personal independence, and social responsibility expected for the individual’s age level and culture group, as determined by clinical assessment and generally standardized scales.

Significantly subaverage intellectual functioning means a full scale IQ score of 70 or less based on assessment that includes 1 or more individually administered standardized
intelligence tests developed for the purpose of assessing intellectual functioning. Errors of measurement must be considered.

**WHEN THE PARTICIPANT SPEAKS LIMITED ENGLISH**

Listed below is guidance to counties and Employment Services Providers to use when the participant speaks limited English:

- Consider other categories of extension 1st before requesting a mental health diagnostic for purposes of determining developmental disability or IQ below 80.

- For purposes of an extension, counties may accept a statement from a qualified professional regarding IQ that identifies a range instead of a specific score. Professionals qualified to administer tests of intellectual functioning, assessment of adaptive behavior, adaptive skills, and developmental function include licensed psychologists, certified school psychologists, or certified psychometrists working under supervision of a licensed psychologist. Counties and Employment Services Providers should make every effort to ensure that professionals making these determinations have experience conducting cross-cultural evaluations.

- Request that the assessment report include a discussion of the limitations of testing.

- Request that the assessment report include a statement of the clinician’s confidence in the results.

- Request that the assessment report related to developmental disability or low IQ include a description of the participant’s functional level and functional restrictions.

- Request that the assessment report identify the interpreter, his or her qualifications and relationship to the assessor, the participant, and anyone else involved in the process.

Verification of developmental disabilities or mental illness should include a statement that the person is unable to obtain or retain unsubsidized employment. Participants in this category must participate in ES. The Employment Plan should be developed with input from other professionals working with the participant and should include activities and hours
approved to their ability. See §7.3 (Employment Plan (EP)), §14.30 (Post 60-Month ES Sanctions - General Provisions).

See §13.3 (60-Month Lifetime Limit) for an explanation of the 60-month lifetime limit and exceptions. See §13.15 (Hardship Extensions) for an explanation of the requirements for hardship extensions. Also see §13.18.6 (Learning Disabled Extension Criteria), §13.18.9 (IQ Below 80 Extension Criteria), §13.18.12 (Unemployable Extension Criteria), §13.18.15 Family Violence Extension Criteria).
MFIP participants with learning disabilities may be eligible for an extension if the condition severely limits the participant’s ability to obtain or maintain suitable employment.

NOTE: A participant is considered to have met the employment related criteria for this category if the qualified professional determines that the participant’s condition prevents him/her from working 20 or more hours per week.

“Learning disabled” means the person has a disorder in 1 or more of the psychological processes involved in perceiving, understanding, or using concepts through verbal language or non-verbal means. It does not include learning problems that are primarily the result of visual, hearing, or motor handicaps, developmental disability, emotional disturbance, or due to environmental, cultural, or economic disadvantage.

Participants who are extended in the learning disabled category are considered an FSS participant and ARE REQUIRED to develop an Employment plan for FSS participants and follow FSS service requirements. Whenever possible, the Employment Plan should be developed with input from other professionals working with the participant, or with input from the psychologist who made the determination.

DETERMINATION OF A LEARNING DISABILITY

The determination of a learning disability must be made by a qualified professional. A qualified professional for this purpose is a licensed psychologist or school psychologist with experience determining learning disabilities. Counties and Employment Services Providers should request that the determination also include a statement about the extent to which the learning disability impacts work.

WHEN THE PARTICIPANT SPEAKS LIMITED ENGLISH

Determining if a person has a learning disability may be difficult due to limited English proficiency or lack of cultural assessment tools. Listed below is guidance for counties and Employment Services Providers to use when participants who speak limited English are referred for assessments and evaluated for extensions:

- Consider other categories of extension before requesting a mental health diagnosis for purposes of determining a learning disability.

- For purposes of an extension, counties may accept a report from a qualified professional stating that a participant who speaks limited English may have a learning disability, as long as other issues have been ruled out and the
participant’s ability to work is severely impaired. This determination should have been made within the previous 12 months. Counties and Employment Services Providers should make every effort to ensure that the qualified professional making the determination has experience conducting cross-cultural evaluations.

- Request that the assessment report include a discussion of the limitations of testing.

- Request that the assessment report include a statement of the clinician’s confidence in the results.

- Request that the assessment report identify the interpreter, his/her qualifications and relationship to the assessor, the participant, and anyone else involved in the process.

See §13.3 (60-Month Lifetime Limit) for an explanation of the 60-month lifetime limit and exceptions. See §13.15 (Hardship Extensions) for general information and requirements for hardship extensions. Also see §13.15.3 (Ill/Incapacitated Extensions), §13.18.3 (Developmental Disability/Mental Illness Extension Criteria), §13.18.9 (IQ Below 80 Extension Criteria), §13.18.12 (Unemployable Extension Criteria), §13.18.15 (Family Violence Extension Criteria).
MFIP participants with an IQ below 80 may be eligible for an extension of benefits if they have been assessed by a vocational specialist or qualified professional to determine that the condition severely limits the participant’s ability to obtain or maintain suitable employment.

NOTE: A participant is considered to have met the employment related criteria for this category if the qualified professional determines that the participant’s condition prevents him/her from working 20 or more hours per week.

Participants extended in this category are considered a Family Stabilization Services (FSS) participant and ARE REQUIRED to develop an Employment Plan for FSS participants and follow FSS service requirements. Employment Plans developed for participants who are extended due to a developmental disability should be developed in consultation with other professionals working with the participant. The plan should include only activities and hourly requirements appropriate to that person’s abilities and current situation.

DETERMINATION OF IQ

The determination of IQ must be made by a professional qualified by training and experience to administer the tests necessary to make such a determination (tests of intellectual functioning, assessment of adaptive behavior, adaptive skills, and developmental function). These professionals include a licensed psychologist, certified school psychologists, or certified psychometrics’ working under supervision of a licensed psychologist.

WHEN THE PARTICIPANT SPEAKS LIMITED ENGLISH

Determining if a person has an IQ below 80 may be difficult due to limited English proficiency or lack of cultural assessment tools. Listed below is guidance for counties and Employment Services Providers to use when participants who speak limited English are referred for assessments and evaluated for extensions:

- Consider other categories of extension before requesting a mental health diagnostic for purposes of determining a developmental disability or IQ below 80.

- For purposes of extensions, counties may accept statements from qualified professionals regarding IQ that identifies a range instead of a specific score. Professionals qualified to administer tests of intellectual functioning, assessment of adaptive behavior, adaptive skills, and developmental function include licensed psychologists, certified school psychologists, or certified psychometrics’ working under supervision of a licensed psychologist. Counties and Employment Services Providers
Providers should make every effort to ensure that the professional making the determination has experience conducting cross-cultural evaluations.

- Request that the assessment report include a discussion of the limitations of testing.

- Request that the assessment report include a statement of the clinician’s confidence in the results.

- Request that the assessment report related to a developmental disability or low IQ, include a description of the participant’s functional level and functional restrictions.

- Request that the assessment report identify the interpreter, his or her qualifications and relationship to the assessor, the participant, and anyone else involved in the process.

See §13.3 (60-Month Lifetime Limit) for an explanation of the 60-month lifetime limit and exceptions. See §13.15 (Hardship Extensions) for general information and requirements for hardship extensions. Also see §13.18 (Hard to Employ Extensions).
Job counselors are responsible for sending the participant an MFIP Notice of Intent to Sanction (DHS-3175) form (NOITS) when there is a determination of non-compliance.

This form must note the category of non-compliance. Options are:

- You failed to attend the overview.
- You failed to meet with your job counselor/case manager.
- You failed to develop an Employment Plan.
- You failed to meet your school requirements.
- You failed to do the activities in your plan.
- You failed to accept the following suitable employment.
- Continue working at suitable employment.

The DHS-3175 also has space to describe what the participant must do to come into compliance. Be specific so that the participant understands EXACTLY what action must be taken and the deadline for those actions. Allow a minimum of 10 days for the participant to comply.
FAILURE TO COMPLY WITH PROGRAM REQUIREMENTS

DWP job seekers are required to comply with Employment Services, including complying with the terms of his/her Employment Plan, as well as child support enforcement. Cooperation with child support means working with child support to establish paternity and pursuing established child support court orders so that a family can receive child support benefits.

DISQUALIFICATION (CASE CLOSURE)

When a job seeker is non-compliant and does not have good cause rather than apply a sanction, the county financial worker will close the family’s DWP case. For a 2-parent family, if 1 or both parents is out of compliance, the financial worker will close the case.

Prior to closure, apply all MFIP notice of adverse action and appeal provisions, except that when there is an appeal; do not continue benefits beyond the 4-month DWP period. No Notice of Intent to Sanction (NOITS) is required, however the financial worker should indicate the reason the case is disqualified on the 10-Day Notice of Adverse Action. While the case is closed, the DWP consecutive 4-month period continues to run.

Regaining Eligibility after Initial Disqualification: There is no minimum or maximum amount of time the case must be closed due to non-compliance.

To regain DWP eligibility after an initial disqualification, a job seeker must comply with the terms of her/his EP (or cooperate with Child Support). Since DWP is a short-term program, it is important that job seekers do not remain disqualified for an extended period of time. The county and ES provider should work to re-engage the disqualified job seeker in Employment Services as soon as possible, so the job seeker can regain eligibility and continue receiving DWP benefits and services.

REGAINING ELIGIBILITY AFTER SUBSEQUENT DISQUALIFICATION

If the same job seeker fails to comply with his/her EP a 2nd time and becomes disqualified again, the county should attempt a home visit to determine whether the disqualified job seeker may have other barriers to participation that were not evident when the job seeker was participating in DWP Employment Services. If it is determined that such barriers exist, the job counselor should modify the job seeker’s Employment Plan to include activities that address the job seeker’s particular circumstances. When the job seeker agrees to the revised Employment Plan, the employment counselor should notify the county that the job seeker is cooperating with Employment Services so DWP eligibility can be reinstated.
If no barriers are determined the definition of compliance with Employment Services may differ from the previous determination, which was driven in part by the desire to have the job seeker re-engage in DWP Employment Services as quickly as possible. For example, with the 1st disqualification, a county may simply require the job seeker to start attending job search again to regain eligibility for DWP. When the job seeker is disqualified a 2nd time for failing to attend job search sessions, the county may decide that the job seeker must make up all of the missed days or job search workshops before regaining eligibility.

Compliance expectations should be reasonable, applied equitably, and support the program goal of engaging people in work and improving family stability within the 4-month program. Counties should develop guidance for Employment Services Providers to ensure that all job seekers are treated equitably. The county’s may not develop a policy which sets a specific length of time a case must remain disqualified.

If the job seeker complies within the 4-month DWP period, the county will issue DWP benefits to the family unit. The county will prorate the benefits from the date of compliance/cooperation.

The family will need to complete a new CAF only if they have been off assistance for more than 30 days.
The maximum earnings on this initial eligibility threshold chart are calculated assuming that the unit is employed at application, has only earned income, has not been on MFIP in the previous 4 months, receives the regular Transitional Standard and has no children subject to the Family Cap. The earnings amounts listed assume that the unit has no child care expenses, makes no child or spousal support payments and allocates no income to others in the household. Unless otherwise noted, the table assumes working 40 hours per week and 4.3 weeks per month.

This chart should be used only as a guide and not to determine eligibility.

To be eligible for MFIP, the assistance unit's gross earnings minus an 18% disregard must be below the Transitional Standard for that size unit in the month of application. These earnings thresholds apply to a DWP family who applies for MFIP after having received 4 months of DWP benefits. The current federal minimum wage is $7.25/hour for large employers. The Federal Poverty Guidelines changed January 20, 2011.

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Transitional Standard</th>
<th>Maximum Gross Earnings of Applicant to be Eligible for MFIP</th>
<th>Hourly Wage of Applicant to be Eligible for MFIP</th>
<th>*2011 Monthly Federal Poverty Guidelines</th>
<th>Percent of Federal Poverty Guideline at Threshold</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$428</td>
<td>$520</td>
<td>16hrs/wk @ $7.25</td>
<td>$908</td>
<td>57%</td>
</tr>
<tr>
<td>2</td>
<td>$764</td>
<td>$930</td>
<td>29 hrs/wk @ $7.25</td>
<td>$1,226</td>
<td>76%</td>
</tr>
<tr>
<td>3</td>
<td>$1,005</td>
<td>$1,224</td>
<td>39 hrs/wk @ $7.25</td>
<td>$1,544</td>
<td>79%</td>
</tr>
<tr>
<td>4</td>
<td>$1,222</td>
<td>$1,489</td>
<td>$8.65</td>
<td>$1,863</td>
<td>80%</td>
</tr>
<tr>
<td>5</td>
<td>$1,399</td>
<td>$1,704</td>
<td>$9.90</td>
<td>$2,181</td>
<td>78%</td>
</tr>
<tr>
<td>6</td>
<td>$1,608</td>
<td>$1,959</td>
<td>$11.38</td>
<td>$2,499</td>
<td>78%</td>
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<tr>
<td>7</td>
<td>$1,754</td>
<td>$2,137</td>
<td>$12.41</td>
<td>$2,818</td>
<td>76%</td>
</tr>
<tr>
<td>8</td>
<td>$1,940</td>
<td>$2,364</td>
<td>$13.73</td>
<td>$3,136</td>
<td>75%</td>
</tr>
<tr>
<td>9</td>
<td>$2,125</td>
<td>$2,590</td>
<td>$15.05</td>
<td>$3,454</td>
<td>75%</td>
</tr>
<tr>
<td>10</td>
<td>$2,304</td>
<td>$2,808</td>
<td>$16.31</td>
<td>$3,773</td>
<td>74%</td>
</tr>
</tbody>
</table>

*The 2011 FPG amounts are effective for Calendar Year 2011.
This table is used to calculate the amount of earnings needed to exit the MFIP cash portion and eligible only for the food portion.

**NOTE:** MFIP does not count against 60-month clock if only the food portion is received. A participant can choose to “opt out” of cash portion to stop the 60-month clock.

Unless otherwise noted, this table assumes working 40 hours per week and 4.3 weeks per month. It also assumes no allocation, deeming or sanctions. Calculations are based on MFIP standards effective October, 2009. The current federal minimum wage is $7.25 per hour for large employers. The earned income disregard is 37% of gross earnings.

### Amount of Earnings Needed to Reach the Food Portion

<table>
<thead>
<tr>
<th>HH Size</th>
<th>Full MFIP Food Portion</th>
<th>Monthly Income</th>
<th>Annual Income</th>
<th>Weekly Hours Must Work at Minimum Wage</th>
<th>Hourly Wage</th>
<th>Child Care Co-Pay when Lose Cash Portion</th>
<th>*2011 Federal Poverty Guidelines (FPG)</th>
<th>Percent of FPG when Lose Cash Portion</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$178</td>
<td>$464</td>
<td>$5,568</td>
<td>15 hrs @ $7.25</td>
<td>None</td>
<td>$10,890</td>
<td>51%</td>
<td></td>
</tr>
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<td>2</td>
<td>$327</td>
<td>$813</td>
<td>$9,756</td>
<td>27 hrs @ $7.25</td>
<td>None</td>
<td>$14,710</td>
<td>66%</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>$473</td>
<td>$1,004</td>
<td>$12,048</td>
<td>33 hrs @ $7.25</td>
<td>None</td>
<td>$18,530</td>
<td>65%</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>$601</td>
<td>$1,178</td>
<td>$14,136</td>
<td>38 hrs @ $7.25</td>
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<td>$22,350</td>
<td>63%</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>$702</td>
<td>$1,327</td>
<td>$15,924</td>
<td>43 hrs @ $7.25</td>
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<td>$26,170</td>
<td>61%</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>$835</td>
<td>$1,481</td>
<td>$17,772</td>
<td>48 hrs @ $8.62</td>
<td>None</td>
<td>$29,990</td>
<td>59%</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>$904</td>
<td>$1,626</td>
<td>$19,512</td>
<td>53 hrs @ $9.46</td>
<td>None</td>
<td>$33,810</td>
<td>58%</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>$1,024</td>
<td>$1,761</td>
<td>$21,132</td>
<td>57 hrs @ $10.24</td>
<td>None</td>
<td>$37,630</td>
<td>56%</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>$1,145</td>
<td>$1,893</td>
<td>$22,716</td>
<td>61 hrs @ $11.01</td>
<td>None</td>
<td>$41,450</td>
<td>55%</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>$1,269</td>
<td>$2,007</td>
<td>$24,084</td>
<td>65 hrs @ $11.67</td>
<td>None</td>
<td>$45,270</td>
<td>53%</td>
<td></td>
</tr>
</tbody>
</table>

*The 2011 FPG amounts are effective for Calendar Year 2011.*
This table is used to calculate the amount of earnings needed to exit the MFIP program (both the cash and food portion).

<table>
<thead>
<tr>
<th>HH Size</th>
<th>Family Wage Level</th>
<th>Monthly Income</th>
<th>Annual Income</th>
<th>Hourly Wage</th>
<th>*Child Care Co-Pay when Exit MFIP</th>
<th>Annual 2011 Federal Poverty Guidelines (FPG)</th>
<th>Percent of FPG when Exit MFIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$471</td>
<td>$747</td>
<td>$8,964</td>
<td>24 hrs/wk @ $7.25</td>
<td>NA</td>
<td>$10,890</td>
<td>82%</td>
</tr>
<tr>
<td>2</td>
<td>$840</td>
<td>$1,332</td>
<td>$15,984</td>
<td>$7.74</td>
<td>$17</td>
<td>$14,710</td>
<td>109%</td>
</tr>
<tr>
<td>3</td>
<td>$1,106</td>
<td>$1,754</td>
<td>$21,048</td>
<td>$10.20</td>
<td>$21</td>
<td>$18,530</td>
<td>114%</td>
</tr>
<tr>
<td>4</td>
<td>$1,344</td>
<td>$2,132</td>
<td>$25,584</td>
<td>$12.39</td>
<td>$26</td>
<td>$22,350</td>
<td>114%</td>
</tr>
<tr>
<td>5</td>
<td>$1,539</td>
<td>$2,442</td>
<td>$29,304</td>
<td>$14.20</td>
<td>$30</td>
<td>$26,170</td>
<td>112%</td>
</tr>
<tr>
<td>6</td>
<td>$1,769</td>
<td>$2,807</td>
<td>$33,684</td>
<td>$16.32</td>
<td>$35</td>
<td>$29,990</td>
<td>112%</td>
</tr>
<tr>
<td>7</td>
<td>$1,929</td>
<td>$3,061</td>
<td>$36,732</td>
<td>$17.80</td>
<td>$37</td>
<td>$33,810</td>
<td>109%</td>
</tr>
<tr>
<td>8</td>
<td>$2,134</td>
<td>$3,386</td>
<td>$40,632</td>
<td>$19.69</td>
<td>$46</td>
<td>$37,630</td>
<td>108%</td>
</tr>
<tr>
<td>9</td>
<td>$2,338</td>
<td>$3,710</td>
<td>$44,520</td>
<td>$21.57</td>
<td>$51</td>
<td>$41,450</td>
<td>107%</td>
</tr>
<tr>
<td>10</td>
<td>$2,534</td>
<td>$4,021</td>
<td>$48,252</td>
<td>$23.38</td>
<td>$61</td>
<td>$45,270</td>
<td>107%</td>
</tr>
</tbody>
</table>

* The child care co-pay amounts are effective 9/20/10.
Include the following items in the MFIP/DWP Employment Services (ES) paper files:

- Notice of Requirement to attend MFIP Overview (DHS-2929-ENG).

  **NOTE:** If the MFIP ES overview is being scheduled by income maintenance staff, this form does not necessarily need to be in the ES file. When scheduling the overview, income maintenance staff have the option of using this form or the ES referral SPEC/LTR can be used.

- Employment Services Rights and Responsibilities (DHS-3172-ENG) and Release of Information forms.

- Case notes (may be on-line).

- Signed copies of the MFIP/DWP Employment Plan(s) (DHS-4209A-ENG) and Employment Plan (EP) Modifications.

- Assessment materials, test scores, Chemical Dependency (CD), Mental Health (MH) and Learning Disabilities (LD) screening tools and observation check lists.

- Medical, psychological, and other pertinent data collected.

- Verification of activity hours contained in the EP and entered on Workforce One (WF1) including:*  
  - Activity logs/attendance records  
  - School attendance records  
  - Non-paid employment activities attendance records.

- Copies of Status Updates generated manually by job counselor.


- Copies of On-The-Job Training (OJT) contracts or worksite agreements with employers.

- MFIP Notice of Intent to Sanction (NOITS) (DHS-3175-ENG) and other communications.

- Any documents needed for an external or internal fiscal review or audit.

*Refer to Appendix E (MFIP Activity Table), Appendix E-2 (Activity Tip sheet) for more details on documentation and verification.
## MFIP Paid Employment Activities

<table>
<thead>
<tr>
<th>Activities</th>
<th>Core Activity (applies to all types of paid employment).</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsubsidized Employment.</td>
<td>Daily Supervision – Provided by the participant’s employer.</td>
</tr>
<tr>
<td>Subsidized Private Sector Employment.</td>
<td>Documentation Requirement – Wage stubs or other employer produced document (submitted with Household Report Form). Documentation must include the participant’s name, the dates/pay period for the hours paid, the number of paid hours (including paid holidays, vacation and sick leave and other paid time off), and the employer’s name (and signature, if available). <strong>NOTE:</strong> If a wage stub or other employer produced document cannot be obtained, documentation can be obtained by a phone call to the employer.</td>
</tr>
<tr>
<td>Subsidized Public Sector Employment.</td>
<td>Documentation Retention – Financial Worker retains a copy of the wage stub or other employer produced document in the participant’s case file. Follow MFIP records retention schedule. When verification is based on information obtained from a phone call, the Financial Worker must enter a case note to document the substance of the call, including the name and contact information of the person verifying the hours, the number or hours and the dates/pay period.</td>
</tr>
<tr>
<td>On-The-Job Training (both public and private sector).</td>
<td>Recording/Tracking Hours – All types of paid employment are recorded and tracked on the MAXIS system. Apply all hours of paid employment to the month the earned income is received; not the month in which the hours were actually worked.</td>
</tr>
<tr>
<td>Grant Diversion (reported as Subsidized Private or Subsidized Public Sector Employment).</td>
<td>Verification Requirements – Financial Worker verifies the participant’s name, earned income amount, the number of hours, the pay period dates and employer name (and signature and phone number, if available).</td>
</tr>
</tbody>
</table>
### Core Activity.

**Daily Supervision** – Provided by the participant’s employment counselor. The employment counselor must have a check-in meeting with the participant who is self-employed no less frequently than monthly to review the participant’s self-employment status and progress toward self-sufficiency. FW should inform the employment counselor when self-employment hours do not meet TANF hourly participation requirements.

**Documentation Requirements** – Self-Employment Report Form (DHS-3336) or comparable document (submitted with Household Report Form (DHS-2120)) containing the participant’s name, the dates covered, the amount of gross income and allowable business expenses for the month, and the participant’s signature.

**Documentation Retention** – Financial Worker retains DHS-3336 form or comparable document in the participant’s case file. Follow MFIP records retention schedule.

**Recording/Tracking Hours** – All (paid) self-employment hours are tracked on the MAXIS system.

**Verification Requirements** – Financial Worker verifies the participant’s name, the amount of gross income and allowable business expenses for the month and the participant’s signature.

### Family Stabilization Services (FSS)

Follow all supervision, documentation, retention, tracking, and verification standards for paid employment activities.

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1. Paid Work Experience is reported as unsubsidized employment when the wages are paid directly to the participant. Paid Work Experience is reported as subsidized employment when payment is made to the participant’s employer to reimburse the employer for wages that are paid to the work experience participant.

2. Self-Employment hours of participation are derived by dividing the participant’s net business income (gross income less allowable business expenses) by the federal minimum wage ($7.25/hour). The hours are derived automatically by the MAXIS system.
MFIP Unpaid Work Activities

<table>
<thead>
<tr>
<th>Activities</th>
<th>Core Activity (applies to both types of unpaid work activities).</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Unpaid) Work Experience.</td>
<td></td>
</tr>
<tr>
<td>Community Service Program¹.</td>
<td></td>
</tr>
</tbody>
</table>

**Daily Supervision** – Provided by the work site supervisor or other responsible individual employed by or stationed at the work site.

**Documentation Requirement** – Time sheet (or activity log) submitted no less frequently than monthly. Must include the participant’s name, the dates covered by the time sheet (or activity log), the actual number of hours of participation each day, the name of the worksite supervisor, the worksite supervisor’s signature and phone number. **NOTE:** Another responsible individual who is employed by or stationed at the worksite may also sign the timesheet if the worksite supervisor is unable to do so.

**Additional Documentation Requirements for Community Service Program Placements** - Community Service Program placements and the work performed by participants engaged in them must serve a useful public purpose and the work performed by the participant must improve the participant’s employability. Employment Service Providers must enter a case note that describes the useful public purpose of the position and how the placement will improve the participant’s employability.

**Documentation Retention** – Employment Service Provider retains the time sheet (or activity log) in the participant’s case file. Follow MFIP records retention schedule.

**Recording/Tracking Hours** – All unpaid work hours are recorded and tracked on the Workforce One (WF1) system.

**Verification Requirements** – Employment Service Provider verifies the participant’s name, the number of actual hours, the dates and worksite supervisor’s or other responsible individual’s name, signature and phone number.
### Fair Labor Standards Act (FLSA)

Most MFIP participants engaged in unpaid work experience or community service programs are covered under the FLSA and may not be required or permitted to work more than the number of hours equal to their combined MFIP cash and food support benefits divided by the federal minimum wage ($7.25/hr). Participants who are engaged in the maximum number of hours as allowed by the FLSA are deemed to be meeting the TANF work participation rate. Exceptions to this are participants working for AmeriCorp and AmeriCorp/VISTA.

### Family Stabilization Services (FSS)

The only differences for unpaid employment is that a time sheet or activity log must be submitted no less frequently than monthly and it can be completed by the participant, case manager or the job counselor with information provided by the participant or unpaid work supervisor. Ensure that any contact with the participant is case noted. Verification is only necessary if any activities on the time sheet or activity log are questionable.

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¹ Community Service Program placements must serve a useful public purpose in fields such as health, social services, environmental protection, education, urban and rural redevelopment, welfare, recreation, public facilities, public safety and child care.
### CD/MH Treatment and Rehabilitation Services

<table>
<thead>
<tr>
<th>Activities</th>
<th>Core Activity</th>
<th>Neither Core nor Non-Core¹ when:</th>
</tr>
</thead>
</table>
| - Chemical/Substance Abuse Treatment.         |               | ➢ The participant does not have enough countable hours to meet the numerator requirement  
➢ The participant has more countable hours than are needed to meet the numerator requirement  
➢ The 120 or 180 hour 12-month limit is reached  
➢ Hours are reported in the 5th week following 4 consecutive weeks with countable Job Search/Job Readiness Assistance hours  
AND  
➢ The CD/MH treatment or Rehabilitation Services are tracked under Participating in Social Services category. |
| - Mental Health Treatment.                    |               |                                                                                                                                                                                                                                   |
| - Rehabilitation Services.                    |               |                                                                                                                                                                                                                                   |

**Daily Supervision** – Provided by a responsible individual overseeing the treatment or services provided to the participant or another responsible individual employed by or stationed at the treatment or service provider facility.

**Documentation Requirement** – Time sheet or activity log submitted no less frequently than monthly. Must include the participant’s name, the dates covered by the time sheet or activity log, the actual number of hours of participation each day, the name, signature and phone number of the person providing the daily supervision for the treatment or rehabilitation services provider. **NOTE:** Another responsible individual who is employed by or stationed at the treatment or rehabilitation service provider may also sign the timesheet if the person providing the daily supervision is unable to do so.

**Documentation Retention** – Employment Service Provider retains the time sheet or activity log in the participant’s case file. Follow MFIP records retention schedule.
| **Family Stabilization Services (FSS)** | **Recording/Tracking Hours** – All Treatment, Rehabilitation Services and Social Services hours are recorded and tracked on the Workforce One (WF1) system.  
**Verification Requirements** – Employment Service Provider verifies the participant’s name, the number of actual hours, the dates and name, signature and phone number of the person providing the daily supervision of the participant receiving treatment or rehabilitation services (or other responsible individual’s name, signature and phone number).  
CD/MH documentation and verification standards do not apply to FSS. See documentation and verification standards for Other MFIP Allowable Activities. |

¹ See Other MFIP Allowable Activities for information about daily supervision and the levels of documentation and verification for Chemical Abuse Treatment, Mental Health Treatment and Rehabilitation Services that are not tracked and reported under the TANF Job Search/Job Readiness Assistance category.
### Vocational Educational Training

| Activities                                                                 |  
|----------------------------------------------------------------------------|---
| **Post Secondary Vocational Educational Training**¹ (1-12 month educational program). |  
| **Post Secondary Vocational Educational Training**² (13-24 month educational program). Includes baccalaureate and advanced degree programs. |  

#### Core Activity: (12 month lifetime limit. The first 12 months of either vocational educational training program [1-12 month and 13-24 months] is reported as a core activity under the Vocational Educational Training activity category).  

#### Non-Core Activity: (after a participant reaches the 12 month lifetime Vocational Educational Training limit, hours in either vocational educational training program activity [1-12 month and 13-24 month] is reported (behind the scene) as non-core under the Job Skills Training Directly Related to Employment activity category).  

**Daily Supervision** – Provided by a responsible individual employed by or stationed at the vocational educational training institution, including but not limited to, course instructors, student advisors, or attendance office personnel.  

**Documentation Requirement** – Time sheet or activity log submitted no less frequently than monthly. Must include the participant’s name, the dates covered by the time sheet or activity log, the actual number of hours of participation each day, the name, signature and phone number of the individual responsible for providing the daily supervision for the vocational educational training provider. **NOTE:** Another responsible individual who is employed by or stationed at the vocational educational training provider may also sign the timesheet if the person providing the daily supervision is unable to do so. **Electronic attendance records** must contain all of the above information, but do not need to be signed by a responsible individual.
**Study Time Documentation** - In order to count any hours of study time, the employment services provider must receive a statement from the Vocational Educational Training provider or course instructor (including baccalaureate and advanced degree education programs) which specifies the amount of study time that is required or advised in order to make satisfactory progress or complete the education and training program. Up to 1 hour of unsupervised study time per class time hour is allowed, provided it does not exceed the specified number of hours. Any additional study time must be supervised. The total unsupervised and supervised study time cannot exceed the amount of study time required or advised by the education program or instructor. The amount of study time that is accepted by the employment provider must be documented on the activity log or in a case note.

**On-line and Distance Learning Programs - Allowed when:**

- The on-line or distance training program has mechanisms for providing reports that document the actual time the participant is accessing the on-line training program.

**OR**

- The on-line or distance training program is conducted in a supervised setting.

**AND**

- Daily supervision is provided by the course instructor or other responsible individual who is overseeing the participant’s on-line or distance course work and progress.

**Documentation Retention** – Employment Service Provider retains the time sheet or activity log in the participant’s case file. Follow MFIP records retention schedule.

**Recording/Tracking Hours** – All Vocational Educational Training hours are recorded and tracked on the Workforce One (WF1) system.

**Verification Requirements** – Employment Service Provider verifies the participant’s name, the number of actual hours, the dates and name, signature and phone number of the person providing the daily supervision of the participant attending vocational educational training (or other responsible individual’s name, signature and phone number).
| **Family Stabilization Services (FSS)** | The only difference for vocational education training is that a time sheet or activity log must be submitted no less frequently than monthly. It can be completed by the participant, case manager or the job counselor with information provided by the participant. The individual responsible for providing the supervision and signing the time sheet or activity log can be the job counselor or case manager. Verification is only necessary if any activities on the time sheet or activity log are questionable. |

---

¹ The appropriate activity for a participant enrolled in Post Secondary Vocational Educational Training is based on the length of the educational program. For example, if a participant is attending a 2-year program, enroll the participant into Post Secondary Vocational Educational Training (13-24 months) starting with the initial month in the Post Secondary program. Do not enroll the participant in Post Secondary Vocational Educational Training (1-12) months for the first 12 months of a program lasting more than 12 months.

The reporting process used in the TANF Work Participation Report will automatically determine the number of months a participant has been engaged in the training and report the hours as Vocational Educational Training until the participant has reached the 12 month lifetime limit. Any additional months are reported (behind the scene) under the Job Skills Training Directly Related to Employment category. This is done at DHS and will not require additional coding by employment service providers or counselors.
### Jobs Skills Training Directly Related to Employment

<table>
<thead>
<tr>
<th>Activities ¹</th>
<th>Non Core Activity.</th>
</tr>
</thead>
</table>

- **Adult Basic Education (ABE).**
- **English as a Secondary Language (ESL).**
- **Functional Work Literacy (FWL).**
- **Job Skills Training Directly Related to Employment Courses.**

**Daily Supervision** – Provided by a responsible individual employed by or stationed at the job skills training directly related to employment institution, including but not limited to, course instructors, student advisors, or attendance office personnel.

**Documentation Requirement** – Group attendance sheets or time sheet or activity log submitted no less frequently than monthly. Must include the participant’s name, the dates covered by the group attendance sheets, individual time sheet or activity log, the actual number of hours of participation each day, the name, signature and phone number of the individual responsible for providing the daily supervision for the job skills training directly related to employment provider. **NOTE:** Another responsible individual who is employed by or stationed at the job skills training directly related to employment provider may also sign the timesheet if the person providing the daily supervision is unable to do so. **Electronic attendance records** must contain all of the above information, but do not need to be signed by a responsible individual.

**Study Time Documentation** – In order to count any hours of study time, the employment services provider must receive a statement from the Job Skills Training Directly Related to Employment provider or course instructor which specifies the amount of study time that is required or advised in order to make satisfactory progress or complete the education and training program. Up to 1 hour of unsupervised study time per class time hour is allowed, provided it does not exceed the specified number of hours. Any additional study time must be supervised. The total unsupervised and supervised study time cannot exceed the amount of study time required or advised by the education program or instructor. The amount of study time that is accepted by the employment provider must be documented on the activity log or in a case note.

**On-line and Distance Learning Programs Allowed when:**
- The on-line or distance training program has mechanisms for providing reports that document the actual time the participant is accessing the on-line training program.

**OR**
- The on-line or distance training program is conducted in a supervised setting

**AND**
Daily supervision is provided by the course instructor or other responsible individual who is overseeing the participant’s on-line or distance course work and progress.

**Documentation Retention** – Employment Service Provider retains the time sheet or activity log in the participant’s case file. A group attendance sheet may be filed in the participant’s case file or a location that is readily accessible to program monitors. Follow MFIP records retention schedule.

**Recording/Tracking Hours** – All Job Skills Training Directly Related to Employment hours are recorded and tracked on the Workforce One (WF1) system under the specific categories listed in the left hand column.

**Verification Requirements** – Employment Service Provider verifies the participant’s name, the number of actual hours, the dates and name, signature and phone number of the person providing the daily supervision of the participant attending job skills training directly related to employment training (or other responsible individual’s name, signature and phone number).

| **Family Stabilization Services (FSS)** | Documentation requirements for Job Skills Training Directly Related to Employment activities is a time sheet or activity log submitted no less frequently than monthly. The time sheet or activity log should include the number of hours of participation for the month. Verification is only necessary if any activities on the time sheet or activity log are questionable. |

---

¹ All activities listed in the left hand column of this chart are reported (behind the scene) as Job Skills Training Directly Related to Employment.

² A participant may be approved for college (including advanced degrees) when the participant is within 24 months of completing his/her educational program and the participant meets the conditions outlined in Minnesota Statutes 256J.53, Subd 2.
### Providing Child Care to Child(ren) of a Participant who is Participating in a Community Service Program

<table>
<thead>
<tr>
<th>Activities</th>
<th>Core Activity</th>
</tr>
</thead>
</table>
| **Providing Child Care to Children of a Participant who is Participating in a Community Service Program.** | **Daily Supervision** – Provided by the participant’s employment counselor (and in conjunction with the participant who is participating in the community service program). The employment counselor must meet with the participant who is providing child care to child(ren) of a participant who is participating in a community service program to review the services provided by the participant and the participant’s progress toward self-sufficiency.  
**Documentation Requirement** – A time sheet or activity log submitted no less frequently than monthly. Must include the participant’s name, the dates covered by the time sheet or activity log, the actual number of hours of participation each day, the name, signature and phone number of the participant who is participating in the community service program.  
**Documentation Retention** – Employment Service Provider retains the time sheet or activity log in the participant’s case file. Follow MFIP records retention schedule.  
**Recording/Tracking Hours** – All hours of Providing Child Care to Child(ren) of a Participant who is Participating in a Community Service Program are recorded and tracked on the Workforce One (WF1) system.  
**Verification Requirements** – Employment Service Provider verifies the participant’s name, the number of actual hours, the dates and the name, signature and phone number of the participant whose child(ren) is/are being cared for by the participant providing the child care (or other responsible individual’s name, signature and phone number). |  
| **Family Stabilization Services (FSS)** | The only difference for Providing Child Care to Child(ren) of a Participant who is Participating in a Community Service Program is that a time sheet or activity log must be submitted no less frequently than monthly and it can be completed by the participant, case manager or the job counselor with information provided by the participant. Verification is only necessary if any activities on the time sheet or activity log are questionable. |
### Satisfactory Attendance at a Secondary School And Courses Leading to a Certificate of General Equivalence

<table>
<thead>
<tr>
<th>Activities</th>
<th>Non-Core Activity.¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfactory Attendance at a Secondary School (for participants who are under 20 years old)¹.</td>
<td>Daily Supervision – Provided by personnel from the secondary school or GED course instructor.</td>
</tr>
<tr>
<td>General Educational Development (GED) (for participants who are under 20 years old)¹.</td>
<td>Documentation Requirement – High School Attendance - There are several methods of documenting satisfactory attendance of a secondary school including: (1) a time sheet or activity log submitted no less frequently than monthly, (2) Request for Verification of School Attendance/Progress (DHS-2883) or similar form submitted no less than monthly, (3) an on-line attendance record collected no less than monthly, or (4) via the phone. The documentation must include the participant’s name, the dates covered, the actual number of hours of participation each day, the name, signature and phone number of the school official verifying the hours of participation.  <strong>NOTE:</strong> If an on-line attendance record is used to document school attendance, the record must include the participant’s name, the dates covered by the on-line attendance record, and the number of hours of attendance (or the methodology used to determine the actual hours). If the student’s attendance information is received by phone, the employment provider must document the hours, the name and contact information of the person providing the attendance information. <strong>Electronic attendance records</strong> do not need to be signed by a responsible individual.</td>
</tr>
<tr>
<td>Satisfactory Attendance at a Secondary School or General Educational Development (for participants who are 20 years and older).</td>
<td>Documentation Requirement – GED – In addition to the above mentioned documentation requirements, a group attendance sheet may be used to document attendance for a participant who is less than 20 years old and engaged in GED.</td>
</tr>
<tr>
<td></td>
<td>Study Time Documentation - In order to count any hours of study time, the employment services provider must receive a statement from the secondary or GED provider or course instructor which specifies the amount of study time that is required or advised in order to make satisfactory progress or complete the education and training program. Up to one hour of unsupervised study time per class time hour is allowed, provided it does not exceed the specified number of hours. Any additional study time must be supervised. The total unsupervised and supervised study time cannot exceed the amount of study time required or advised by the education program or instructor. The amount of study time that is accepted must be documented on the activity log or in a case note.</td>
</tr>
</tbody>
</table>
### On-line and Distance Learning Programs – Allowed when:

- The on-line or distance training program has mechanisms for providing reports that document the actual time the participant is accessing the on-line training program
- OR
  - The on-line or distance training program is conducted in a supervised setting
- AND
  - Daily supervision is provided by the course instructor or other responsible individual who is overseeing the participant’s on-line or distance course work and progress.

### Documentation Retention – Employment Service Provider retains a copy of the activity log, Request for School Attendance/Form (or similar form), or a copy of the on-line attendance record in the participant’s case file. When the attendance information is received by phone, the information must be entered as a case note or retained in the case file. Follow MFIP records retention schedule. For GED, a group attendance sheet may be filed in the participant’s case file or a location that is readily assessable to program monitors. Follow MFIP records retention schedule.

### Recording/Tracking Hours – All hours of Secondary School Attendance and GED are recorded and tracked on the Workforce One (WF1) system.

### Verification Requirements – Employment Service Provider verifies the participant’s name, the number of actual hours, the dates and the name, signature and phone number of the school official verifying the hours of participation. If on-line attendance records are used, the Employment Service Provider verifies the participant’s name, the number of actual or derived hours of participation, the method used to derive the hours of participation and the dates. If the information is received by phone, the employment provider must verify the name and contact information of the person providing the attendance information.

| Family Stabilization Services (FSS) | Follow all supervision, documentation, retention, tracking, and verification standards for Satisfactory Attendance at a Secondary School and Courses Leading to a Certificate of General Equivalence. |

¹ Participants who are less than 20 years old and are the head of household or married are deemed to be meeting the TANF Work Participation Rate if they are attending a secondary school or GED classes an average of at least one hour per week during a month.
### Job Search and Job Readiness Assistance (Not CD/MH Treatment or Rehab Services)¹

<table>
<thead>
<tr>
<th>Activities</th>
<th>Core Activity - counts toward the Job Search/Job Readiness Assistance 120 or 180 hour limit over a 12-month period (current month plus previous 11 months). Hours recorded in more than 4 consecutive weeks are not countable as a core or non-core activity.</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ <strong>Job Search and Job Readiness Assistance</strong> (not including CD/MH treatment or Rehabilitation Services).</td>
<td>Neither Core non Non-Core¹ when:</td>
</tr>
<tr>
<td></td>
<td>➢ The participant does not have enough countable hours to meet the numerator requirement</td>
</tr>
<tr>
<td></td>
<td>➢ Then the participant has more countable hours than are needed to meet the numerator requirement</td>
</tr>
<tr>
<td></td>
<td>➢ The 120 or 180 hour 12-month limit is reached</td>
</tr>
<tr>
<td></td>
<td>AND</td>
</tr>
<tr>
<td></td>
<td>➢ Hours are reported in the 5th week following 4 consecutive weeks with countable Job Search/Job Readiness Assistance hours.</td>
</tr>
</tbody>
</table>

**Daily Supervision** – Provided by the employment counselor and other responsible individuals, such as other employment provider or workforce center staff.

**Documentation Requirement** – There are 3 documents that can be used to record participation in job search and job readiness assistance:

- An activity log is used by the participant to list the job search and job readiness assistance activities a participant completed. The participant must submit the activity log no less frequently than weekly. The activity log must contain the date of and time spent on each contact or job search/job readiness assistance task, the type of contact or task, the position the participant was interested in, the status of the contact or task, the name of the employer/business and contact information, plus the participant’s signature stating the activity log and the hours contained on it are accurate.

- A sign-in attendance sheet can also be used to document job search and job readiness assistance for group meetings, such as job club and when the participant is engaged in job search and job readiness assistance at a workforce center or other location that uses sign-in attendance sheets. The sign-in attendance sheet must contain each participant’s name, the date, actual hours of participation, and a signature of a responsible individual who oversees the job search and job readiness assistance activity.²

---

¹ When:
- The participant does not have enough countable hours to meet the numerator requirement
- Then the participant has more countable hours than are needed to meet the numerator requirement
- The 120 or 180 hour 12-month limit is reached

² Hours are reported in the 5th week following 4 consecutive weeks with countable Job Search/Job Readiness Assistance hours.
A computerized printout stating the amount of time a participant was engaged in on-line job search activities.

**Documentation Retention** – Employment service provider retains the activity log in the participant’s case file. A group attendance sheet may be filed in the participant’s case file or a location that is readily assessable to program monitors. Follow MFIP records retention schedule.

**Recording/Tracking Hours** – All hours of job search and job readiness assistance are recorded and tracked on the Workforce One (WF1) system.

**Verification Requirements** – As part of the weekly check-in meetings, the employment service provider will review the activity log and verify all of the required information that is contained on the activity log. The employment counselor should sign the activity log attesting that the required information is contained on the activity log and the hours have been verified. A case note may also be used to document the participant’s activity log was reviewed and the hours have been verified.

**Verification of a Job Contact** - In addition, the employment service provider must verify at least 1 job contact no less frequently than bi-weekly. Methods for verifying a job contact include (1) asking the employer to verify the job contact, (2) obtaining a copy of a computerized “receipt” for on-line applications, and (3) copies of applications, letters and business cards when questions are asked during a check-in meeting to corroborate the job contact. The employment services provider will sign a statement on the activity log or enter a case note indicating the employment provider has reviewed the activity and note whether the information contained on it was acceptable and the method used to verify the job contact.

<table>
<thead>
<tr>
<th><strong>Family Stabilization Services (FSS)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>FSS participants do not need to follow the daily supervision requirements as specified by the Deficit Reduction Act (DRA) however; it is good practice to support FSS participants who are in job search by doing a weekly check in.  FSS documentation requirements for job search include a monthly time sheet or activity log completed by the participant or the case manager with information provided by the participant or the structured job search supervisor. Verification is only necessary if any activities on the time sheet or activity log are questionable.</td>
</tr>
</tbody>
</table>
¹ See CD/MH Treatment and Rehabilitation for Chemical Dependency treatment, Mental Health treatment, and Rehabilitation Services when tracked and reported under the Job Search/Job Readiness Assistance TANF category.

² DHS Recommendation: For participants who have exhausted their 6 weeks of countable (core) Job Search/Job Readiness Assistance, use the same documentation and verification standards after the 6 weeks are exhausted. It will be less confusing for the participant if the documentation standards do not change back and forth.
### Other MFIP Allowable Activities

<table>
<thead>
<tr>
<th>Activities</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment</td>
<td><strong>Daily Supervision</strong> – Provided by the employment services counselor. Weekly or bi-weekly check-ins are recommended but no less frequently than monthly. Case note or enter on participant’s employment plan the frequency of the check-in meetings.</td>
</tr>
<tr>
<td>Social Services¹</td>
<td><strong>Documentation Requirement</strong> – Participant employment plans must include activities. Case notes should be used to document the activity hours. Additional documentation varies according to the non-countable activity.</td>
</tr>
<tr>
<td>Screening</td>
<td><strong>Assessment</strong>: Professional MH or CD assessments, ES counselor’s assessments and/or case notes that assess participants for, including but not limited to, chemical health, mental health, physical health, child behavior, personal skills, childcare, dependent care, transportation, legal, safe living environment, housing, financial, education and social support, employability measure (if information is in WF1, additional documentation in paper file is not necessary).</td>
</tr>
<tr>
<td>Family Violence Waiver</td>
<td><strong>Social Services</strong>: Treatment plans, correspondence from health care, CD and MH professionals, counseling, meeting with advocates and child protection (signatures of professionals are recommended to reduce complication).</td>
</tr>
<tr>
<td>Holding</td>
<td><strong>Screening</strong>: MFIP Self-screen (DHS-3482), learning disabilities screen and other screening tools used by the county or ES provider.</td>
</tr>
<tr>
<td>Holding-Sanctioned</td>
<td><strong>Family Violence Waiver</strong>: Employment plan created with and signed by an advocate. Examples of supporting documentation used to approve the Family Violence Waiver include, but are not limited to, police reports and sworn statements.</td>
</tr>
<tr>
<td>Other</td>
<td><strong>Holding</strong>: Case note the reason why the person is in Holding (at the minimum).</td>
</tr>
<tr>
<td></td>
<td><strong>Holding-Sanction</strong>: MFIP Notice of Intent to Sanction (DHS-3175). Status Update (DHS-3165) implementing the sanction.</td>
</tr>
</tbody>
</table>
### MFIP Activity Table

| **Other:** Medical opinion form. Correspondence and other statements from qualified medical providers. |
| **Documentation Retention** – Employment Service Provider retains the time sheet, or activity log or other forms of documentation in the participant’s case file. Follow MFIP records retention schedule. |
| **Recording/Tracking Hours** – All hours of activities that are neither core nor non-core are recorded and tracked on the Workforce One (WF1) system. |
| **Verification Requirements** – Employment provider verifies the information contained on the various forms, documents, related correspondence, and signatures (if required by the provider) to ensure the information is complete and accurate. |

| **Family Stabilization Services (FSS)** |
| The only difference for **Other** MFIP Allowable Activities is that a time sheet or activity log must be submitted no less frequently than monthly and it can be completed by the participant, case manager or the job counselor with information provided by the participant. Ensure that any contact with the participant is case noted. Verification is only necessary if any activities on the timesheet or activity log are questionable. |
| If the case manager is from another discipline, hours may be documented in accordance with the standard practices of the discipline but must be recorded on WF1 on a monthly basis by the case manager. |

¹ See CD/MH Treatment and Rehabilitation for Chemical Dependency treatment, Mental Health treatment, and Rehabilitation Services when tracked and reported under the Job Search/Job Readiness Assistance TANF category.

DHS Recommendation: For participants who are receiving CD/MH treatment or Rehabilitation services that previously were reported as Job Search/Job Readiness Assistance, use the same documentation and verification standards after the 6 weeks of job search are exhausted. It will be less confusing for the participant if the documentation standards don’t change back and forth.
The Activity Tip sheet provides a quick reference tool on how various Employment Services (ES) activities are verified and counted. See also Appendix E (MFIP Activity Table).

<table>
<thead>
<tr>
<th>Activity</th>
<th>Documentation</th>
<th>Hourly Tracking</th>
<th>Core/Non Core---Used in Work Participation Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment</td>
<td>Copies of assessments, notation in case notes.</td>
<td>Record hours for each week of month.</td>
<td>Not used.</td>
</tr>
<tr>
<td>Screening</td>
<td>Copy of screening tool, notation in case notes.</td>
<td>Hours not tracked but activity opened and closed.</td>
<td>Not used.</td>
</tr>
<tr>
<td>Job skills training directly related to employment</td>
<td>School or instructor statement with hours.</td>
<td>Record hours for each week of month.</td>
<td>Non core, see page 1 of activity table for details.</td>
</tr>
<tr>
<td>Vocational Training/ Education - 12 months or less</td>
<td>School statement with hours or instructor statement.</td>
<td>Record hours for each week of month.</td>
<td>Core, for 1st 12 months in a lifetime.</td>
</tr>
<tr>
<td>Vocational Training/ Education - 13 to 24 months</td>
<td>School statement with hours or instructor statement.</td>
<td>Record hours for each week of month.</td>
<td>Core, for 1st 12 months in a lifetime.</td>
</tr>
<tr>
<td>English as a Second Language (ESL)Training</td>
<td>Monthly school attendance sheet with hours or instructor statement.</td>
<td>Record hours for each week of month.</td>
<td>Non core, see page 3 of activity table for details.</td>
</tr>
<tr>
<td>Adult Basic Education (ABE)/Remedial Training</td>
<td>Monthly school attendance sheet or instructor statement.</td>
<td>Record hours for each week of month.</td>
<td>Non core, see page 4 of activity table for details.</td>
</tr>
<tr>
<td>--------------------------------------------</td>
<td>-------------------------------------------------------</td>
<td>-----------------------------------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>Functional Work Literacy (FWL)</td>
<td>Monthly school attendance sheet with hours sheet or instructor statement.</td>
<td>Record hours for each week of month.</td>
<td>Non core, see page 5 of activity table for details.</td>
</tr>
<tr>
<td>High School Completion</td>
<td>Monthly school attendance sheet with hours or instructor statement.</td>
<td>Record hours for each week of month.</td>
<td>Non core, see page 6 of activity table for details.</td>
</tr>
<tr>
<td>General Educational Development (GED) Training</td>
<td>Monthly school attendance sheet with hours or instructor statement.</td>
<td>Record hours for each week of month.</td>
<td>Non core, see page 7 of activity table for details.</td>
</tr>
<tr>
<td>On-The-Job Training (OJT), Public Sector</td>
<td>FW will collect check stubs and HRF.</td>
<td>Optional, on MAXIS.</td>
<td>Core.</td>
</tr>
<tr>
<td>On-The-Job Training (OJT), Private Sector</td>
<td>FW will collect check stubs and HRF.</td>
<td>Optional, on MAXIS.</td>
<td>Core.</td>
</tr>
<tr>
<td>Community Service</td>
<td>Client statement verified by on-site supervisor.</td>
<td>Record hours for each week of the month.</td>
<td>Core.</td>
</tr>
<tr>
<td>Activity</td>
<td>Documentation</td>
<td>Hourly Tracking</td>
<td>Core/Non Core--- Used in Work Participation Rate</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>--------------------------------------------------------------------</td>
<td>-------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>Grant Diversion</td>
<td>FW will collect check stubs and HRF.</td>
<td>Optional, on MAXIS.</td>
<td>Core.</td>
</tr>
<tr>
<td>Community Work Experience Program (CWEP)</td>
<td>Client statement verified by on-site supervisor.</td>
<td>Record hours for each week of month.</td>
<td>Core.</td>
</tr>
<tr>
<td>Paid Work Experience</td>
<td>FW will collect check stubs and HRF.</td>
<td>Optional, on MAXIS.</td>
<td>Core.</td>
</tr>
<tr>
<td>Unpaid Work Experience</td>
<td>Client statement verified by on-site supervisor.</td>
<td>Record hours for each week of month.</td>
<td>Core.</td>
</tr>
<tr>
<td>Holding</td>
<td>Case notes.</td>
<td>No hours tracked.</td>
<td>Not used.</td>
</tr>
<tr>
<td>Holding – Sanction</td>
<td>Case notes.</td>
<td>No hours tracked.</td>
<td>Not used.</td>
</tr>
<tr>
<td>Job Search</td>
<td>Weekly signed client statement with actual hours. Daily supervision required.</td>
<td>Record hours for each week of month.</td>
<td>Core, see page 11 of activity table for details.</td>
</tr>
<tr>
<td>Employed Less Than 30 Hours Per Week</td>
<td>FW will collect check stubs and HRF.</td>
<td>Optional, on MAXIS.</td>
<td>Core.</td>
</tr>
<tr>
<td>Activity</td>
<td>Instructions</td>
<td>Status</td>
<td>Notes</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>------------------------------------------------------------------------------</td>
<td>---------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Employed 30 Hours or More Per Week</td>
<td>FW will collect check stubs and HRF. Optional, on MAXIS. Core.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participating in Social Services</td>
<td>Case notes, phone contacts. Record hours for each week of month. Not used.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Providing Child Care for Parent Working in a</td>
<td>Client statement with actual hrs. Record hours for each week of month. Core, see page 13 of activity table for details.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Service Program</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Violence Waiver</td>
<td>Signed client statement with actual hours. Hours tracked weekly under Other activities. Not used, see page 16 of activity table for details.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>Case notes. Record hours for each week of month. Not used, see page 14 of activity table for details.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The Americans with Disabilities Act (ADA) of 1990
The ADA protects the civil rights of people with disabilities. A wide range of people are covered, some examples are: people with physical conditions, people with mental illness, and people with learning disorders. The ADA addresses the following areas:

- Title I – Employment
- Title II – Public Services
- Title III – Public Accommodations
- Title IV – Telecommunications
- Title V – Miscellaneous

Equal access to the MFIP program is addressed under Title II of the ADA.

FEDERAL RESOURCES
There are a number of federal resources available to county agencies and providers that will assist them in becoming more knowledgeable about what is required under the ADA.

- **Office for Civil Rights (OCR)**
  The Office for Civil Rights within the U.S. Department of Health and Human Services is the federal agency responsible for enforcing Title II with state and local health and human services agencies. OCR posted guidance on its web site clarifying the obligations Title II of the ADA imposes on local government agencies. The guidance also sets out promising practices in modifying policy and programs to ensure access for people with disabilities. The title of the document is “Prohibition Against Discrimination on the Basis of Disability”. [http://www.hhs.gov/ocr/prohibition.html](http://www.hhs.gov/ocr/prohibition.html).

- **Jobs Accommodation Network (JAN)**
  This is a service of the U.S. Department of Labor’s Office of Disability Employment Policy. This web site contains a fact sheet on possible accommodations for persons with certain disabilities. [http://www.jan.org](http://www.jan.org).

- **Great Lakes ADA and Accessible IT Center**
  This is a Disability and Business Technical Assistance Center located at the University of Illinois at Chicago. It is one of ten regional centers funded by the U.S. Department of Education. The Chicago center operates a toll free information line for answering questions about all aspects of the ADA. Anyone seeking information is encouraged to use this service by calling 1-800-949-4232. Counties and providers can also access their web site for additional information on ADA issues at [http://www.adagreatlakes.org](http://www.adagreatlakes.org).
STATE RESOURCES
The following is a list of resources available at the state level:

- **Disability Linkage Line**
  This is an information and referral service for people with disabilities. Disability Linkage Line can be reached statewide by calling toll-free 1-866-333-2466. A resource specialist is available during regular business hours (8:30 a.m. to 4:30 p.m.) to provide one-to-one assistance to help people learn about their options and connect them with the supports and services they choose.

- **MinnesotaHelp.info**
  This is an online human services database of resources to help people find services to meet their needs.

- **Social Security Income (SSI) Advocates**
  A list of individuals/agencies that have contracted with DHS to provide advocacy services is in Appendix G-3 (DHS - SSI Advocates List). The services provided by these advocates are paid for by DHS and are free of charge to MFIP applicants/participants. Appendix G-3 (DHS - SSI Advocates List) identifies which SSI advocates provide full service and which advocates handle SSI appeals.

- **Minnesota Department of Employment and Economic Development (DEED)**
  DEED provides a listing of accredited Community Rehabilitation Programs throughout the State that deliver employment services to people with disabilities and may be able to provide information about services available in the community.
  [http://www.deed.state.mn.us/rehab/crp/crp.htm](http://www.deed.state.mn.us/rehab/crp/crp.htm).

- **Vocational Rehabilitation (VR)**
  This is a state agency that provides services to people with disabilities so they can prepare for work, or to find and keep a job. Vocational Rehabilitation can be found on the DEED website at [http://www.deed.state.mn.us/rehab/vr/main_vr.htm](http://www.deed.state.mn.us/rehab/vr/main_vr.htm).

- **Focus on Ability:**
  This is an on-line educational tool designed for employers that discusses the ADA. While the main focus of this tool is what is required of employers under the ADA, it can also be helpful in providing information to county agencies and employment service providers about various disabilities, possible
accommodations, and providers offering employment related services for persons with disabilities. This training and information can be found at http://www.focusonability.net.

- **Disability Criteria for SSI Benefits**
  This is a desk guide that is currently being used by a state funded SSI advocacy group to assist workers in identifying possible applicants for SSI benefits, see Appendix G-4 (Disability Criteria for SSI Benefits). The advocacy group is allowing the state to share this document so that it can be used by all county financial workers and job counselors.

- **DWP/MFIP Observation Checklist**
  The DWP/MFIP Observation Checklist (DHS-3483) is a tool job counselors have historically used as one way to determine if a participant needs to be screened for chemical dependency abuse or mental health issues as well as a way to document other issues or behaviors that need to be addressed. This form could also be used by job counselors or financial workers as a “resource” to identify behavior that would warrant a discussion about a possible disability and whether the participant needs an accommodation in order to access the program or services.

  The DWP/MFIP Observation Checklist (DHS-3483) and MFIP Self Screen (DHS-3482) may be used to indicate when a modification to an employment plan needs to be made. If these forms are used as a “checklist” where information is recorded, they would be protected under Minnesota Data Privacy Law.

**LOCAL/COUNTY RESOURCES**
County agencies are encouraged to seek out resources within the county administration, including the county ADA Coordinator, local disability specialists, Rehabilitation Services, employment service providers who specialize in vocational rehabilitation services and managers or staff that have expertise in the areas of mental health, developmental disabilities, and chemical dependency.

- **PRIVATE NON-PROFIT ORGANIZATIONS**
  There are several organizations that provide advocacy and education on issues relating to specific disabilities. Some organizations that provide services as well as education include:
- **Arc Minnesota**, 770 Transfer Rd. #26, St. Paul, MN 55114-1422, 651-523-0823, 1-800-582-5256, 651-523-0829 fax, mail@arcars.org, Web site: [http://www.thearcofminnesota.org/](http://www.thearcofminnesota.org/). This organization provides support and advocacy for persons with developmental disabilities and their families.

- **Brain Injury Association of Minnesota**, 43 Main St. SE #135, Minneapolis, MN 55414, 612-378-2742, 612-378-2789 fax, 1-800-669-6442 Toll-free, info@braininjurymn.org, Web site: [www.braininjurymn.org](http://www.braininjurymn.org).


- **Mental Health Association of Minnesota**, 2021 E Hennepin Ave. #412, Minneapolis, MN 55413-2726, 612-331-6840 voice/TTY, 1-800-862-1799, 612-331-1630 fax, info@mentalhealthmn.org, Web site: [www.mentalhealthmn.org](http://www.mentalhealthmn.org).

- **Minnesota Association for Children's Mental Health**, 165 Western Ave. #2, St. Paul, MN 55102, 651-644-7333, 1-800-528-4511, 651-644-7391 fax, dsaxhaug@macmh.org, Web site: [www.macmh.org](http://www.macmh.org).


- PACER Center, Inc. (Parent Advocacy Coalition for Educational Rights), 8161 Normandale Blvd., Minneapolis, MN 55437-1098, 952-838-9000, 1-800-537-2237, 952-838-0199 fax, 952-838-0190 TTY, pacer@pacer.org, Website: www.pacer.org. This organization is the federal government's designated parent training and information center in Minnesota for families of children with disabilities.

Special Needs
This information is available in other forms to persons with disabilities by calling Aaron Coonce at 651-431-4049, or contact DHS through the Minnesota Relay Service at 1-800-627-3529 (TTY) or 1-877-627-3848 (speech-to-speech relay service).
### DHS – SSI ADVOCATES LIST
Effective through December 31, 2011

<table>
<thead>
<tr>
<th>Agency</th>
<th>Service Area</th>
<th>Specialty</th>
</tr>
</thead>
</table>
| **Anishinabe Legal Services**  
411 First Street  
PO Box 157  
Cass Lake, MN 56633  
218-335-2223  
[www.alslegal.org](http://www.alslegal.org) | Leech Lake, Red Lake, White Earth Reservations | Outreach, Applications, Appeals |
| **Association for the Advancement of Hmong Women in Minnesota (AAHWM)**  
1101 Snelling Ave N  
St. Paul, MN 55108  
(651) 255-0799  
| **Chamberlin Edmonds**  
Hennepin County Mental Health Center  
1800 Chicago Avenue  
Minneapolis, MN 55404  
(612) 872-2080  
fax: (612) 870-0239  
| **Churches United in Ministry (CHUM)**  
102 W 2nd St  
Duluth, MN 55802  
(218) 720-6521  
[www.chum duluth.org](http://www.chum duluth.org) | Duluth | Applications, Appeals, Homeless |
<table>
<thead>
<tr>
<th>Community Resource Connections</th>
<th>Bemidji and surrounding area</th>
<th>Outreach. Applications Appeals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Resource Connections</td>
<td>Community Resource Connections</td>
<td>Community Resource Connections</td>
</tr>
<tr>
<td>616 America Ave, #170</td>
<td>Bemidji and surrounding area</td>
<td>Outreach. Applications Appeals</td>
</tr>
<tr>
<td>Bemidji, MN 56601</td>
<td>Community Resource Connections</td>
<td>Community Resource Connections</td>
</tr>
<tr>
<td>(218) 333-8260</td>
<td>Bemidji and surrounding area</td>
<td>Outreach. Applications Appeals</td>
</tr>
<tr>
<td><a href="http://www.communityresourceconnections.org">www.communityresourceconnections.org</a></td>
<td>Bemidji and surrounding area</td>
<td>Outreach. Applications Appeals</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disability Specialist, Inc.</th>
<th>Statewide</th>
<th>Applications Appeals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability Specialist, Inc.</td>
<td>Disability Specialist, Inc.</td>
<td>Disability Specialist, Inc.</td>
</tr>
<tr>
<td>1907 Wood Road</td>
<td>Disability Specialist, Inc.</td>
<td>Disability Specialist, Inc.</td>
</tr>
<tr>
<td>Cook, MN 55723</td>
<td>Disability Specialist, Inc.</td>
<td>Disability Specialist, Inc.</td>
</tr>
<tr>
<td>1-800-642-6393</td>
<td>Disability Specialist, Inc.</td>
<td>Disability Specialist, Inc.</td>
</tr>
<tr>
<td><a href="http://www.disabilityspecialist.net">www.disabilityspecialist.net</a></td>
<td>Disability Specialist, Inc.</td>
<td>Disability Specialist, Inc.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</th>
<th>Statewide</th>
<th>Outreach. Applications Appeals</th>
</tr>
</thead>
<tbody>
<tr>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
</tr>
<tr>
<td>826 Main Street</td>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
</tr>
<tr>
<td>Lewiston, ID 83501</td>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
</tr>
<tr>
<td>1-800-805-8329</td>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
<td>FM Blake, a Division of Public Consulting Group (PCG.FM Blake)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goodwill/Easter Seals</th>
<th>Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, Washington counties and Greater St. Cloud area</th>
<th>Outreach. Applications Appeals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goodwill/Easter Seals</td>
<td>Goodwill/Easter Seals</td>
<td>Goodwill/Easter Seals</td>
</tr>
<tr>
<td>553 Fairview Ave N</td>
<td>Goodwill/Easter Seals</td>
<td>Goodwill/Easter Seals</td>
</tr>
<tr>
<td>St. Paul, MN 55104</td>
<td>Goodwill/Easter Seals</td>
<td>Goodwill/Easter Seals</td>
</tr>
<tr>
<td>(651) 379-5800</td>
<td>Goodwill/Easter Seals</td>
<td>Goodwill/Easter Seals</td>
</tr>
<tr>
<td><a href="http://www.goodwileasterseals.org">www.goodwileasterseals.org</a></td>
<td>Goodwill/Easter Seals</td>
<td>Goodwill/Easter Seals</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Heartland Community Action Agency</th>
<th>Kandiyohi, McLeod, Meeker, and Renville counties</th>
<th>Outreach. Applications Appeals</th>
</tr>
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<tbody>
<tr>
<td>Heartland Community Action Agency</td>
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<tr>
<td>PO Box 1359</td>
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<tr>
<td>409 19th Ave SW</td>
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<tr>
<td>Willmar, MN 56201</td>
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<tr>
<td>(320) 235-0850</td>
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<tr>
<td><a href="http://www.heartlandcaa.org">www.heartlandcaa.org</a></td>
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<tr>
<td>Housing Coalition of the St. Cloud Area</td>
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<td>Applications Homeless</td>
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<tr>
<td>777 Lincoln Ave NE</td>
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<tr>
<td>St. Cloud, MN 56304</td>
<td></td>
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<tr>
<td>(320) 299-7684</td>
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<th>Judicare of Anoka County, Inc.</th>
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<tr>
<td>1201 89th Avenue NE, Suite 310</td>
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<td></td>
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<tr>
<td>Blaine, MN 55434</td>
<td></td>
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<tr>
<td>763-783-4970</td>
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<tr>
<th>Korstad Law Office LLC</th>
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<tr>
<td>136 E Maine St</td>
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<tr>
<td>PO Box 400</td>
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<tr>
<td>Amboy, MN 56010-0400</td>
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<tr>
<td>507-674-3434</td>
<td></td>
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<tr>
<td>Clients only: 1-800-983-3440</td>
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<thead>
<tr>
<th>Richard Kreutzfeldt</th>
<th>Aitkin, Cass, Crow Wing, Morrison, Wadena, north Mille Lacs, North Todd counties, Park Rapids</th>
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<tbody>
<tr>
<td>Attorney at Law</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14084 Baxter Drive, Suite 14</td>
<td></td>
<td></td>
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<tr>
<td>Baxter, MN 56425</td>
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<td></td>
</tr>
<tr>
<td>218-829-3477</td>
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<tr>
<td><a href="http://www.attorneyrick.com">www.attorneyrick.com</a></td>
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<thead>
<tr>
<th>Legal Services of Northwest MN</th>
<th>Northwest counties, Wadena County</th>
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<tbody>
<tr>
<td>1015 7th Avenue N.</td>
<td></td>
<td></td>
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<tr>
<td>PO Box 838</td>
<td></td>
<td></td>
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<tr>
<td>Moorhead, MN 56561-0838</td>
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<tr>
<td>218-233-8585 or 1-800-450-8585</td>
<td></td>
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<tr>
<td><a href="http://www.lsnmlaw.org">www.lsnmlaw.org</a></td>
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<tr>
<td>Lifetrack Resources, Inc.</td>
<td>Hennepin County and Ramsey County</td>
<td>Outreach Applications Refuges and immigrants</td>
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<tr>
<td>--------------------------</td>
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</tr>
<tr>
<td>709 University Avenue West St. Paul, MN 55104-4804 651-227-8471 <a href="http://www.lifetrackresources.org">www.lifetrackresources.org</a></td>
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</tr>
<tr>
<td>Mahube Community Council</td>
<td>Becker, Hubbard and Mahnomen counties</td>
<td>Outreach Applications Appeals Long-term homeless</td>
</tr>
<tr>
<td>PO Box 747 1125 W River Rd Detroit Lakes, MN 56502 (218) 847-1385 <a href="http://www.mahube.org">www.mahube.org</a></td>
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<tr>
<td>MedEligible Services</td>
<td>Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, Washington counties</td>
<td>Outreach Applications Appeals Patients at Allina hospitals and clinics</td>
</tr>
<tr>
<td>6160 Summit Dr #400 Brooklyn Center, MN 55430 (763) 585-8408</td>
<td></td>
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<tr>
<td>Mid-Minnesota Legal Assistance</td>
<td>20 county area in Central Minnesota</td>
<td>Outreach Applications Appeals</td>
</tr>
<tr>
<td>New American Community Services</td>
<td>Dakota, Hennepin Olmsted, Ramsey, Scott, Stearns Counties</td>
<td>Outreach Applications African immigrants and refugees</td>
</tr>
<tr>
<td>1821 University Avenue, Ste. S-286 St. Paul, MN 55104 651-287-5223 <a href="http://www.newamericans.us">www.newamericans.us</a></td>
<td></td>
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<tr>
<td><strong>Olmsted Community Action Program</strong></td>
<td>Olmsted County</td>
<td>Outreach Applications Appeals</td>
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<tr>
<td>2116 Campus Dr SE Rochester, MN 55904</td>
<td>(507) 328-6345</td>
<td><a href="http://www.mncaa.org/OlmstedCAP.html">http://www.mncaa.org/OlmstedCAP.html</a></td>
</tr>
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<table>
<thead>
<tr>
<th><strong>Outreach Services of Minnesota, Inc.</strong></th>
<th>Outreach Applications Appeals</th>
</tr>
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<tbody>
<tr>
<td>4294 Dahlberg Drive Golden Valley, MN 55422</td>
<td>(612) 332-6773</td>
</tr>
<tr>
<td><a href="http://www.outreacheservices.com">www.outreacheservices.com</a></td>
<td>3 offices throughout state</td>
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<thead>
<tr>
<th><strong>Pine Technical College</strong></th>
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<tbody>
<tr>
<td>900 4th St SE Pine City, MN 55063</td>
<td>(320) 629-6741</td>
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<tr>
<td><a href="http://www.etc.pinetech.edu">www.etc.pinetech.edu</a></td>
<td>Chisago, Isanti, Kanabec, Mille Lacs, and Pine counties</td>
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<thead>
<tr>
<th><strong>Ramsey County Workforce Solutions</strong></th>
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<tbody>
<tr>
<td>2098 11th Avenue East North St. Paul, MN 55109</td>
<td>(651) 770-5666</td>
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<tr>
<td><a href="http://www.co.ramsey.mn.us/workforce/">http://www.co.ramsey.mn.us/workforce/</a></td>
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<tr>
<th><strong>Red Lake Housing Authority</strong></th>
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<tbody>
<tr>
<td>PO Box 219 Red Lake, MN 56671</td>
<td>(218) 679-3368</td>
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<tr>
<th><strong>Reitan Law Office, Chaska</strong></th>
<th>Applications Appeals</th>
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<tbody>
<tr>
<td>1454 White Oak Dr. Chaska, MN 55318</td>
<td>(952) 448-2800</td>
</tr>
<tr>
<td><a href="http://www.reitanlawoffice.com">www.reitanlawoffice.com</a></td>
<td>Chaska and Southwest metro</td>
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<tr>
<td><strong>DHS – SSI ADVOCATES LIST</strong></td>
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</tbody>
</table>

| **Reitan Law Office, Mankato** |
| 142 S. Riverfront Dr.  |
| Mankato, MN 56001  |
| (507) 388-1800  |
| [www.reitanlawoffice.com](http://www.reitanlawoffice.com)  |
| Mankato and Southern Minnesota  |
| Applications Appeals  |

| **Southern Minnesota Regional Legal Services, Inc. (SMRLS)** |
| 166 East 4th St., Suite 200  |
| St. Paul, MN 55101  |
| 651-222-5863  |
| [www.smrls.org](http://www.smrls.org)  |
| 33 counties in metro and Southern Minnesota  |
| Outreach Appeals  |

| **Southwest Minnesota Private Industry Council** |
| 607 West Main  |
| Marshall, MN 56258  |
| (507) 537-6987  |
| [www.swmnpic.org](http://www.swmnpic.org)  |
| 14 counties in Southwest Minnesota  |
| Outreach Applications  |

| **The Salvation Army** |
| 2445 Prior Ave  |
| Roseville, MN 55113  |
| (651) 746-3400  |
| [www.thesalvarmy.org](http://www.thesalvarmy.org)  |
| Anoka, Carver, Chisago, Dakota, Hennepin, Ramsey, Scott, Sherburne, Washington, Wright counties  |
| Outreach Applications  |
| Long-term homeless  |

| **United Cambodian Association of Minnesota (UCAM)** |
| 1101 Snelling Ave N  |
| St. Paul, MN 55108  |
| (651) 255-0724  |
| [www.ucaminc.org](http://www.ucaminc.org)  |
| Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, Washington counties  |
| Outreach Applications  |
| Southeast Asian immigrants and refugees  |
Volunteers of America, Minnesota  
7625 Metro Blvd  
Minneapolis, MN 55439  
(763) 546-3242  
www.voamn.org

<table>
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<tr>
<th>County</th>
<th>Contact Person</th>
<th>Minneapolis</th>
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<td>Aitkin County Health &amp; Human Services</td>
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<tr>
<td></td>
<td>204 First Street NW</td>
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<td></td>
<td>Aitkin, MN 56431</td>
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<td></td>
<td><a href="mailto:kryan@co.aitkin.mn.us">kryan@co.aitkin.mn.us</a></td>
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<td>Anoka</td>
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<tr>
<td></td>
<td>2100 Third Avenue</td>
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<td>Anoka, MN 55303</td>
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<td>(763) 422-6941</td>
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<td>Carlton</td>
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<td>Dakota</td>
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<td></td>
<td>1 Mendota Rd, Ste 500</td>
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<td></td>
<td>West St. Paul, MN 55118</td>
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<td></td>
<td>(651) 554-5742</td>
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<td><a href="http://www.co.dakota.mn.us/Departments/CSAdmin/default.htm">http://www.co.dakota.mn.us/Departments/CSAdmin/default.htm</a></td>
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<td>Dakota</td>
<td>Dakota County Veterans’ Service Center</td>
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<td>Dodge</td>
<td>Dodge County Dept. of Human Services</td>
<td>507-635-6170</td>
<td><a href="http://www.co.dodge.wi.us/humanservices/index.html">http://www.co.dodge.wi.us/humanservices/index.html</a></td>
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<td>Faribault &amp; Martin</td>
<td>Human Services of Faribault &amp; Martin Counties</td>
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<td>Hennepin</td>
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<td>Le Sueur</td>
<td>Le Sueur County Department of Human Services</td>
<td>651-266-3660</td>
<td><a href="http://www.co.le-sueur.mn.us/humanservices.html">http://www.co.le-sueur.mn.us/humanservices.html</a></td>
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<td>Meeker</td>
<td>Meeker County Social Services</td>
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<td><a href="http://www.co.meeker.mn.us/index.asp?Type=B_BASIC&amp;SEC=%7BFA1024EA-A4EB-4ABF-B2E6-AD52214A0C62%7D">http://www.co.meeker.mn.us/index.asp?Type=B_BASIC&amp;SEC=%7BFA1024EA-A4EB-4ABF-B2E6-AD52214A0C62%7D</a></td>
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<td>Ramsey</td>
<td>Ramsey County Community Human Services Department</td>
<td>651-266-3660</td>
<td><a href="http://www.co.ramsey.mn.us/hs/index.htm">http://www.co.ramsey.mn.us/hs/index.htm</a></td>
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</table>
### Steele County
- **Address:** 630 Florence Ave, Owatonna, MN 55060
- **Phone:** (507) 444-7500
- **Website:** [http://www.co.steele.mn.us/](http://www.co.steele.mn.us/)

### Wadena County
- **Address:** 124 First Street SE, Wadena, MN 56482
- **Phone:** (218) 631-7605
- **Website:** [http://www.co.wadena.mn.us/county_directory/social_service/social_service.htm](http://www.co.wadena.mn.us/county_directory/social_service/social_service.htm)
The final determination of disability qualification for SSI is made by the Social Security Administration. For further information see the Social Security Administration web site: http://www.ssa.gov/.

The following information is courtesy of Chamberlin Edmonds:

To qualify for SSI benefits, you must be aged, blind or disabled.

**Aged** = 65 years or older.

**Blind** = corrected vision of 20/200 or less in better eye.

**Disabled adult** = your medical condition is expected to keep you out of work for at least 12 months or result in death.

**Disabled child** = child’s medical condition causes marked and severe functional limitations that can be expected to cause death or last for at least 12 months.

### Some Basic Disability Criteria

- **Muscles/Joints**
  - Rheumatoid arthritis, osteoarthritis, severe back disorders, amputations, severe burns, any joint disorder.
  - **Watch for** - the need to use a cane, walker or wheel chair.
  - **Issue** - must affect more than one appendage otherwise SSA will deem it only a partial disability (for example, both legs, or one arm and one leg).

- **Breathing/Respiratory**
  - Severe breathing disorders that limit walking or exercise or cause client to use oxygen (for example, chronic obstructive pulmonary disease (COPD), cystic fibrosis, cor pulmonale, severe asthma).
  - **Watch for** - difficulty even talking without break, unable to walk stairs without rests, use of multiple pillows at night to breath.
  - **Issue** - asthma attacks need to require Emergency Room/Clinic visit 6 times in 12 months or 3 inpatient stays within 12 months.

- **Heart**
  - Congestive heart failure, heart disease, severe circulation problems (swelling in hands and/or feet), multiple or recent heart attacks.
  - **Watch for** - chest pain with only mild exertion, use of nitro pills
**Issue** - one heart blockage with stint placement rarely gets approved. Need multiple ongoing heart problems.

- **Stomach/Digestive**
  - Liver disease, cirrhosis, kidney failure, on dialysis
  - **Watch for** - ascites (fluid build up causing severely swollen/protruding stomach, jaundice (yellowing skin and eyes)
  - **Issue** - bleeding from stomach ulcers is not disabling but bleeding from esophagus is a disability listing.

- **Hemic/Lymphatic**
  - Severe sickle cell anemia, acute leukemia, lymphoma
  - **Watch for** - sickle cell pain crisis requiring Emergency Room/Clinic visits 6 times in 12 months or 3 inpatient hospital stays in 12 months.
  - **Issue** - acute lymphoblastic leukemia (ALL) is very treatable and rarely lasts 12 months if successful. Disability will probably delay to see if treatment is succeeding. Acute myeloid leukemia (AML) is very aggressive and is always a disability listing.

- **Endocrine**
  - Diabetes with organ damage to kidneys, eyes, heart or diabetes that is causing severe swelling or tingling/numbness in legs and feet.
  - **Watch for** - the longer someone is on insulin (shots) the more complications that develop. Eye sight gets blurry, fingers and toes tingle, feet swell.
  - **Issue** - insulin taken in pill form usually means mild case and few complications.

- **Neurological**
  - Stroke, cerebral palsy, multiple sclerosis, brain tumors, severe head trauma
  - **Watch for** - case by case depending on severity
  - **Issue** - Disability will place on hold any neuro trauma (strokes, head trauma) for 3 months to see what the residual functioning level will be.

- **Mental Disorders**
  - Severe and long term psychiatric problems requiring medication and/or counseling. The condition must be so severe that it affects the client’s ability to perform daily living or work activities (for example, developmental disability, organic mental disorders, schizophrenic personality disorders, severe depression, paranoia or anxiety).
**Watch for** - need multiple treatment sources that can demonstrate long term illness. Must be compliant with treatments that are available to client (for example, medications).

**Issue** - just going to see doctor once a month to get medications rarely gets approved for disability.

- **Learning Disorders**
  History of special needs education. Demonstrated disruption in activities of daily living. Full scale Intelligence Quotient (IQ) score of less than 70.

- **Cancers**
  Cancers that have spread (metastatic) or are inoperable (for example, brain, liver, esophageal, pancreatic, lung, colon or uterine cancer)
  - **Watch for** - aggressive treatment.
  - **Issues** - breast cancer is more and more treatable so it is harder to get approved for disability.

- **Immune System**
  Human immunodeficiency virus (HIV), severe lupus
  - **Watch for** - with HIV a blood count (CD4) < 200, and opportunistic infections (thrush, pneumocystic carinii pneumonia (PCP)) or wasting syndrome (unintentional loss of 10% of body weight), with Lupus must have frequent flair ups requiring Emergency Room/inpatient hospital visits.
  - **Issue** - Must be compliant with medications to control the illness.

- **Learning Disabilities/Low Intelligence Quotient (IQ)**
  - **Watch for** - IQ below 70.
  - **Issue** - Need tests from doctor to assess IQ.

**NOTE:** Alcoholism and Drug Abuse are no longer listings. These disorders were delisted in 1997. However, if it can be proven that a person’s medical problems are primary and chemical use is secondary to that illness, the person could still be approved for SSI.
A participant has qualified for Family Stabilization Services
(Or there is information that indicates the participant would qualify for FSS)
At the point of non-compliance:

**First:** Review the most recent employment plan and/or all case file materials available to determine if the participant qualifies for good cause.

- **If yes,** qualifies for good cause, do not continue with the sanction process.
- **If no,** does not qualify for good cause, continue with the sanction process.

(1) **Invite in for face-to-face meeting.** Participant must be informed they have a right to bring an advocate to the meeting.

(1A) **Participant does come in for face-to-face meeting.** The employment counselor /case manager shall:
- Enroll the participant now if they have not attended an employment services overview.
- Review the good cause policy with the participant to determine if they qualify.
- Ensure there is an updated release of information in the file to allow the employment counselor to speak with the participant’s primary treating professional.
- Review the most recent employment plan to determine if it is still appropriate; update if necessary.
- Identify other resources that may be available to meet the family’s needs.
- Explain the consequences of further non-compliance.
- Inform the participant of their right to appeal if a sanction is ever imposed.

- **Complies. End.**
- **Does not comply.** Proceed to Step (3).

(2) **Attempt home visit.**

(2A) **Home visit is unsuccessful**
Send the participant the information that would have been discussed during the face-to-face meeting and proceed to Step (3).

(2B) **Home visit is successful**
Follow steps of face-to-face (1A).

(1B) **Participant does not come in for face-to-face meeting.** The employment counselor /case manager shall:
- Schedule a home visit. Send a letter to the participant with a proposed time and date of the home visit. Encourage the participant to contact the employment counselor to confirm the time and date works with their schedule; also inform the participant that they can suggest a central location for the visit if they prefer.

- Participant **does not contact** the employment counselor to reschedule/confirm availability.
- Participant **does contact** the employment counselor & agrees to home visit or to come into office.

Follow steps required for face-to-face meeting (1A).
Family Stabilization Pre-Sanction Checklist

(3) Obtain a current assessment by a behavioral health or medical professional. The intent is, prior to any sanction being imposed, a participant's situation be evaluated by a behavioral or medical professional. The professional must determine the participant had the ability to comply with the specific requirements of the program, such as following their FSS employment plan or developing an FSS employment plan. Reasonable steps should be taken to obtain the primary treating professional's opinion.

<table>
<thead>
<tr>
<th>There is a primary treating professional and a release of information.</th>
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<tbody>
<tr>
<td>There is a primary treating professional but there is no release of information. Send the participant a letter explaining the purpose of contacting the primary treating professional and enclose a release of information for the participant to sign and return.</td>
</tr>
<tr>
<td>There is no primary treating professional; attempt to refer the participant to a behavioral health or medical provider, depending on the participant’s specific circumstances. Assist the participant in making an appointment. This could be a consulting physician working with the ES provider.</td>
</tr>
<tr>
<td>The reason the participant has been determined FSS does not necessitate the involvement of a medical or behavioral health professional. Consult with other professionals involved with the participants. Send the participant a letter explaining the purpose of contacting the professional and enclose a release of information for the participant to sign and return.</td>
</tr>
</tbody>
</table>

(3A) Request a review of the plan; or a review of the program requirements if there is no plan in place. For example, attending an employment services overview.

| If yes, a participant signs a release, and there is a professional to contact. Proceed to step (3A). |
| If no, a participant fails to sign a release of information or they will not cooperate with the referral, send a MFIP Notice of Intent to Sanction (NOITS). |

(4) A current assessment (review) is obtained and the professional indicates the participant did have the capacity to either, follow the plan or comply with program requirements; send a MFIP Notice of Intent to Sanction (NOITS).

OR

A current assessment (review) is obtained and the professional indicates the participant did not have the capacity to either, follow the plan or comply with program requirements; do not send a MFIP Notice of Intent to Sanction (NOITS). Inform the participant that the professional indicated that the plan or the program requirements were not appropriate based on their individual circumstances and continue attempts to work with them to develop an appropriate plan.

OR

A current assessment (review) is not obtained; continue steps to engage the participant and the primary treating professional.
Additional guidance can be found on the Family Stabilization Services Pre-Sanction Checklist (DHS-6075).