COMBINED MANUAL
DESCRIPTION OF CHANGES ATTACHMENT
REVISED SECTIONS – ISSUED 04/2013

The EFFECTIVE DATE of the changes is the same as the issuance date unless stated otherwise.

All sections update Food Support and FS to Supplemental Nutrition Assistance Program (SNAP) and FSET to SNAP E&T throughout.

0001 (Table of Contents) changes section titles of 0012.06 (Requirements for Caregivers Under 20), 0025.12.03.09 (Claim Compromise & Termination), 0028.18.01 (MFIP Good Cause--Caregivers Under 20).

0002.33 (Glossary: Independent…) in the definition for INDIGENT IMMIGRANT in the SNAP provisions deletes reference to assets because SNAP has no asset limit.

0002.63 (Glossary: Special Diet…) deletes the definition for SUBSIDIZED ADOPTION because this language is no longer used in statute.

0002.67 (Glossary: Thrifty…) deletes the definition for TITLE IV-E SUBSIDIZED ADOPTION because this language is no longer used in statute.

0007.12.03 (What is a Complete HRF/CSR) adds a new 8th paragraph that the Earned Income/Pay Period/Date Tracking Form (DHS-5006F) may be used to help track paystubs.

0007.15 (Unscheduled Reporting of Changes - Cash) in MFIP adds, deletes and rearranges information throughout. It also in DWP deletes the last paragraph because it is redundant.

0008.06.15 (Removing or Recalculating Income) in MFIP in the 2nd paragraph adds cross-references to TEMP Manual TE19.156 (QTIP #156 - MFIP Stop Work Procedures) and Chapter 10 (Verification).

0010.03 (Verification - Cooperation and Consent) in MFIP, DWP in the 1st paragraph in the 3rd bullet adds to not accept a signed statement from the caregiver as proof of paternity and to refer the father to Child Support to establish paternity.

0010.06 (Sources of Verification - Documents) breaks MFIP, WB and DWP into its own provisions and adds for SNAP MSA, GA, GRH to follow general provisions.

0010.18.01 (Mandatory Verifications - Cash Assistance) in MFIP adds, deletes and rearranges information throughout. It also in DWP deletes the last paragraph because it is not needed.

0011.21 (Receipt of Other Assistance) in MFIP in the 1st paragraph in the 1st bullet deletes unnecessary language for clarity.
0012.06 (Requirements for Caregivers Under 20) changes the section title to Requirements for Caregivers Under 20. In MFIP deletes and adds language for clarity throughout. It also in the 1st paragraph changes "natural" to "birth". This is due to 2012 Legislation.

0014.06 (Who Must Be Excluded From Assistance Unit) in MFIP, WB, DWP in the 1st paragraph in the 2nd bullet deletes reference to monthly adoption assistance payments and moves it to a new 3rd bullet.

0015.48.03 (Whose Assets to Consider - Sponsors W/ I-864) in SNAP rearranges and deletes information for clarity.

0015.54 (Evaluation of Vehicles) in general provisions in the last paragraph adds a cross-reference to 0015.09 (Excluded Assets for Self Support).

0016.18.01 (200 Percent of Federal Poverty Guidelines) in MFIP, WB, DWP updates the 200% of Federal Poverty Guidelines (FPG) amounts.

0016.21.03 (Income of Sponsors of Immigrants With I-864) in SNAP in the 2nd paragraph in the 6th bullet deletes reference to assets because SNAP has no asset limit.

0017.15.99 (Housing Subsidy) in MFIP deletes and adds information throughout.

0018.15.09 (Utility Deductions) in SNAP adds a new 6th paragraph to not allow a standard utility deduction when an ineligible student is responsible to pay and is the one paying the utility expense.

0025.12.03 (Overpayments Exempt From Recovery) in SNAP updates the cross-reference to 0025.12.03.09 (Claim Compromise & Termination) due to section title change.

0025.12.03.03 (Suspending or Terminating Recovery) in MFIP, WB, DWP, MSA, GA, GRH adds a cross-reference to 0025.12.03.09 (Claim Compromise & Termination).

0025.12.03.09 (Claim Compromise & Termination) changes section title to Claim Compromise & Termination.

0028.03 (County Agency Empl. Serv. Responsibilities) in MFIP in the 4th paragraph in the 2nd bullet deletes to use the Employment Services Referral (DHS-3166) and adds cross-references to the MFIP Employment Services Manual and to TEMP Manual sections.

0028.12 (Education Requirements) in MFIP in the 6th paragraph updates the cross-reference to 0012.06 (Requirements for Caregivers Under 20) due to section title change. In the 12th and 13th paragraphs changes custodial parents to caregivers. It also in the 13th paragraph deletes and adds language for clarity.
0028.18.01 (MFIP Good Cause--Caregivers Under 20) changes section title to MFIP Good Cause--Caregivers Under 20. In MFIP, DWP changes language throughout for clarity. It also updates the cross-reference to 0012.06 (Requirements for Caregivers Under 20) due to section title change.

0030.03.18 (RCA Overpayments and Underpayments) updates the cross-reference to 0025.12.03.09 (Claim Compromise & Termination) due to section title change.

The following sections update cross-references to 0012.06 (Requirements for Caregivers Under 20) due to section title change. No policy was changed:

0005.12.12 (Application Interviews).
0005.12.12.01 (Forms/Handouts for Applicants).
0005.12.15 (Application Processing Standards).
0008.06.18 (Change in Participant's Age).
0009.06.06 (Recertification Interview).
0011.18 (Students).
0011.30 (60-Month Lifetime Limit).
0012 (Procedural Eligibility).
0013.03.06 (MFIP Basis - State Funded Cash Portion).
0014.03.03 (Determining the Cash Assistance Unit).
0020.09 (MFIP/DWP Assistance Standards).
0024.09 (Protective and Vendor Payments).
0028.06.03 (Who Must Participate in Empl. Services/FSET).
0028.15 (Employment Plan (EP)).
0028.18.06 (Conciliation Conferences).
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## CHAPTER 30 REFUGEE RESETTLEMENT PROGRAM

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INDEPENDENT LIVING OUTSIDE A LONG TERM CARE FACILITY
Not needing the ongoing care provided by a hospital or nursing home.

INDIAN LAND HELD IN TRUST
REAL PROPERTY held in trust for an Indian TRIBE by the federal government.

INDIAN RESERVATIONS
The geographical area recognized by the federal or a state government as being set aside for the use of Indians and governed by Indians.

INDIGENT IMMIGRANT
SNAP: A sponsored immigrant who is determined by the county to be unable to obtain food and shelter taking into consideration the sponsored immigrant's own income, and assistance provided by others such as a sponsor. “Unable to obtain food and shelter” means that the sum of all contributions, income, and in-kind assistance provided by the sponsor and others does not exceed 130% of the federal poverty income guideline for the unit's size. The county may only deem the actual amount the sponsor provides. Indigence may last up to 12 months and be renewed for additional 12-month periods. The county must notify DHS of the indigent cases including the names of the sponsor and the sponsored immigrant involved. See 0015.48.03 (Whose Assets to Consider - Sponsors W/I-864), 0016.21.03 (Income of Sponsors of Immigrants with I-864).

INELIGIBLE NON-CITIZENS
People who are not United States citizens, whose non-citizen status causes them to be ineligible for benefits.

INELIGIBLE PERSON
A person who does not meet eligibility requirements for ASSISTANCE.

INITIAL ELIGIBILITY
MFIP, WB, DWP : The determination of eligibility for an APPLICANT.

INITIAL MONTH
SNAP: The 1st month for which a SNAP allotment is issued to a household, or the 1st month for which an allotment is issued to a household after any period in which the household was not participating in the SNAP program after the expiration or termination of a certification period. This does not apply to reinstatement for a late HOUSEHOLD REPORT FORM (HRF) or COMBINED SIX-MONTH REPORT (CSR). For more information, see 0002.11 (Glossary: Child Care...), 0002.31 (Glossary: Honoraria...).

INPATIENT
A person admitted to a HOSPITAL. Inpatient applies to a person absent from the hospital on pass or as ordered by a physician. Inpatient does not apply to a person absent from the hospital against medical advice.

INQUIRY
A communication to a county agency through mail, telephone, or in person, by which a person or authorized representative requests information about public assistance. The county agency shall also treat as an inquiry any communication in which a person requesting assistance offers information about the person's family circumstances that indicates that eligibility for public assistance may exist.

INSTALLMENT CONTRACT
A conditional sales contract for purchase of real estate, vehicles, or other assets. This includes, but is not limited to, CONTRACTs FOR DEED, mortgages, and chattel mortgages.

INSTALLMENT PAYMENT
One of several successive payments in the settlement of a debt.

INSTITUTION
An establishment providing services or treatment in addition to room and board to people unrelated to the proprietor.

SNAP: A university or college where a student may live on or off campus and purchase meal plans. See 0011.12 (Institutional Residence), 0011.18 (Students).
MSA: A hospital, regional treatment center inpatient services, a nursing facility, or an intermediate care facility for persons with developmental disabilities.

**INSTITUTION FOR MENTAL DISEASES (IMD)**
An institution for the treatment of mental diseases.

**INSTITUTION OF HIGHER LEARNING**
SNAP: Any institution which normally requires a high school diploma or equivalency certificate before enrollment. This includes, but is not limited to, colleges, universities, and vocational or technical schools at the post-high school level.

**INTERIM ASSISTANCE**
Assistance people receive pending receipt of other maintenance benefits they have applied for. See 0012.03 (Interim Assistance Agreements).

**INTERSTATE COMPACT FOR JUVENILES (ICJ)**
An agreement between states that are part of a compact to transfer supervision of probation and parole of juveniles from one state to another. The compact is the means of returning youth who have run away, escaped, absconded or fled to avoid prosecution and crossed state lines. See 0008.06.06 (Adding a Person to the Unit – Cash), 0011.21 (Receipt of Other Assistance).

**INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN (ICPC)**
An agreement among all 50 states that coordinates the movement of children across state lines for the purpose of placement in foster care, adoptive homes, group homes, residential treatment centers, or on a trial basis with a parent.
SPECIAL DIET
A diet prescribed by a physician for 1 of the medical conditions listed in 0023.12 (Special Diets).

SPECIAL NEED FUNDS
Money available to some participants for some expenses not covered by the monthly grant. See 0023 (Special Needs Payments).

SPONSOR
Any person, or public or private agency or organization, who signed an AFFIDAVIT agreeing to support an IMMIGRANT (who is not the MINOR CHILD or SPOUSE of the sponsor) as a condition of the IMMIGRANT’s entry into the United States.

SPOUSAL SUPPORT
An allowance for support that a court orders a person to pay to his/her SPOUSE or former spouse.

SPOUSE
A person who is legally married to another person; husband or wife.

SR
See SIX-MONTH REPORTING in 0007.03.02 (Six-Month Reporting - FS).

SSA
See SOCIAL SECURITY ADMINISTRATION in 0002.61 (Glossary: SELF...).

SSDI
See SOCIAL SECURITY DISABILITY INSURANCE in 0002.61 (Glossary: SELF...).

SSI
See SUPPLEMENTAL SECURITY INCOME (SSI) in 0002.65 (Glossary: Suitable...). Also see 0029.06.03 (Supplemental Security Income Program).

SSI GROSS LIMIT
The FEDERAL BENEFIT RATE for the Supplemental Security Income Program. See FEDERAL BENEFIT RATE (FBR) in 0002.23 (Glossary: Fair Hearing...).

SSI RECIPIENT
A person who receives at least $1, or who is not receiving SSI due to recoupment or a 1-month suspension by SSA due to excess income. See the definitions of 1619A SOCIAL SECURITY ACT and 1619B SOCIAL SECURITY ACT in 0002.01 (Glossary: 1619A...).

SSN
Social Security number.

STAGGERED ISSUANCE
SNAP: A BENEFIT issuance system which issues regular monthly SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM benefits throughout the 1st 15 days of the month. Units receive their benefits on the same day each month.

STAGGERED ISSUANCE CYCLE
Issuing BENEFITs over several days.

STANDARD DISREGARD
An income DISREGARD some programs apply to the EARNED INCOME or UNEARNED INCOME of every CLIENT. See 0018.21 (Standard Disregard).

STANDARD UTILITY ALLOWANCE
A type of expense allowance available only to units that incur expenses for heating and/or cooling. The allowance covers heating, cooling, electricity, water, sewer, garbage, and phone expenses. For information on specific utility allowance amounts, see 0018.15 (Shelter Deductions).
STATE MEDICAL REVIEW TEAM (SMRT)
People appointed by the COMMISSIONER to determine DISABILITY.

STATE VERIFICATION AND EXCHANGE SYSTEM (SVES)
The electronic data exchange which verifies Social Security numbers in a monthly batch job. It initiates SDX and BENDEX data exchanges to verify Title II (RSDI) and Title XVI (SSI) benefit information. It initiates BEER data exchanges to verify wages, self-employment and federal pension earnings from federal tax returns.

STEPPARENT
The spouse of a child's birth, adoptive, or legal parent.

STORED VALUE CARD (SVC)
The Stored Value Card or debit card is an option custodial parents have of an account to have their child's support payment directly deposited into. The Stored value card has a VISA logo and can be used like a credit or debit card for purchases or at ATM's. The only money on the SVC card is child support that has been deposited by the Minnesota Child Support Payment Center. See LIQUID ASSETS in 0002.37 (Glossary : Learning…) and excluded assets in 0015.27 (Excluded Assets - Income).

STRIKER
An employee involved in a work stoppage, slowdown, or interruption of work, whether or not the employee voted for the strike.

STRUCTURED SETTLEMENT
Compensation awarded as a result of a lawsuit which is paid over a period of time.

STUDENT EDUCATIONAL LOAN FUNDS
State financial aid program for post-secondary students.

STUDENT FINANCIAL AID
Loans, grants, scholarships, and work study funds to be used for educational and living expenses while attending school.
THRIFTY FOOD PLAN AMOUNT
The standardized maximum amount of monthly SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM a UNIT can receive based on its size.

TIMELY NOTICE
A notice sent at least as far ahead of the proposed action as program rules require.

TITLE IV
A title of the Federal Higher Education Act which authorizes grants and loans for post-secondary students.

TITLE IV-A
The section of the Social Security Act authorizing the TANF program.

TITLE IV-D
The part of the Social Security Act that authorizes establishing PATERNITY and collecting CHILD SUPPORT by the IV-D UNIT.

TITLE IV-E FOSTER CARE
FOSTER CARE payments authorized under Title IV-E of the Social Security Act.

TITLE XX
The section of the Social Security Act authorizing block grants to the states to provide social services.

TORT LIABILITY
The legal obligation of a party responsible for an accident or injury to pay for the resulting costs.

TORT SETTLEMENT
Compensation awarded as a result of a lawsuit.

TRADE ADJUSTMENT ACT
Federal law which provides payments to people whose employment was adversely affected by the importation of goods.

TRAFFICKING VICTIMS
People who are forced into the international sex trade, prostitution, slavery, and forced labor through coercion, threats of physical violence, psychological abuse, torture, and imprisonment, who have been certified as trafficking victims by the Office of Refugee Resettlement (ORR) of the United States Department of Health and Human Services (HHS). NOTE: People under age 18 who are trafficking victims are not required to be certified but are issued letters of confirmation by ORR. See 0011.03.30 (Non-Citizens - Trafficking Victims).

TRANSFER
To cause right, title, or interest in REAL PROPERTY or PERSONAL PROPERTY to pass from 1 person to another.

TRANSITIONAL HOUSING
Housing designed for independent living and provided to a homeless person or family at a rental rate of at least 25% of the family income for a period of up to 24 months. If a transitional housing program is associated with a licensed facility or shelter, it must be located in a separate facility or a specified section of the main facility where residents can be responsible for their own meals and other daily needs.

TRANSITIONAL STANDARD
MFIP : The basic standard for a family with no earnings consisting of a combination of the CASH ASSISTANCE needs and the food assistance needs for a family of that size.

TREATMENT PLAN
GA : Method of rehabilitation, care, and therapy designed by a social service agency for chemically dependent or mentally ill people in certain facilities.

TREATMENT RESIDENCES
SNAP: Public or private non-profit facilities licensed by either the Minnesota Department of Human Services or Department of
Health for the treatment of drug or alcohol abuse. (The state does not license hospitals with residential treatment facilities.)
Conduct a face-to-face interview with applicants or their authorized representatives before determining eligibility. Some programs grant EXCEPTIONS to this requirement; see the program provisions below. Also see 0005.12.03 (Waiving In-Office Interviews).

Offer applicants or their authorized representatives a single interview that covers all the programs for which they apply. For example, a SNAP interview must also cover any other programs for which the household applied. Advise people of any preliminary verifications they may bring to the interview. Give people written confirmation of the date, time, and location of their interview. Inform them they are responsible for rescheduling any interview they miss.

Units may bring anyone they choose to the interview. See 0005.06 (Authorized Representatives).

During the interview:

- Inform people of their responsibilities and rights, including their rights under the Americans with Disabilities Act (ADA). Provide them with the brochure “Do you have a disability?” (DHS-4133). Also see 0003.09.03 (Client Rights - Civil Rights).

- Review information on the application. Make sure the application is complete.

- Refer people to Social Services if they request help with family problems or family planning.

- Explain program eligibility requirements, benefits, processing standards, and payment methods.

- Give the client brochures on assistance programs and other available services.

- Review available verifications and get client consent for 3rd-party verifications. See 0010 (Verification).

Do not require another interview for people who amend an application or request an additional category of assistance if you have not acted on the original application.

If you have taken action on an original application, clients must fill out a new Combined Application Form (DHS-5223) (CAF) and have another interview.

If a client misses the initial interview and makes no further contact with the county agency, send a denial notice by the 30th day after the date of application. If the client contacts the county agency before the end of the 30-day processing period, reinstate the application effective the date you received the signed and dated page number 1 of the CAF.

**MFIP:**
The interview may be with any caregiver(s) of the unit or their authorized representative.

Inform applicants that they are NOT automatically eligible for health care based on receiving cash assistance. Applicants who want to apply for health care must check “Y” for Health Care programs on the Combined Application Form (DHS-5223) (CAF) when they apply. If an applicant does not check “Yes” or “No” for “health care programs”, follow up to determine if he/she wants to apply for health care coverage. Do not require the applicant to complete any additional application or other forms. Use the information on the CAF to determine health care eligibility. See the Health Care Programs Manual for additional instructions.

Refer people to the appropriate county person if they request help with family violence issues. See 0005.12.09 (Family Violence Provisions/Referrals). Give the client the Family Violence Referral (DHS-3323). Provide information about counseling and support services, exemptions, and permanent residence procedures for battered non-citizens. See 0010.18.33 (Verifying Family Violence).
Explain the living arrangement requirements to minor caregivers or minor pregnant women. See 0005.12.12.01 (Forms/Handouts for Applicants). Refer a minor caregiver to Social Services as soon as he/she applies and alleges that he/she or the minor child would be physically or emotionally jeopardized by living with the minor’s caregiver or legal guardian, or that the caregiver or legal guardian will not allow him/her to live at home. See 0012.06 (Requirements for Caregivers Under 20).

For units with 18- and 19-year old caregivers without a high school diploma or GED, ask if the applicant wants to pursue a high school diploma or GED, or wants to pursue work. The applicant’s choice must be entered on the EMPS panel prior to cash approval to get correct results. If the applicant wants to pursue a high school diploma or GED, enter “SC” on the ES option field of the EMPS panel for the applicant. MAXIS will determine this applicant is eligible for MFIP. If the applicant states he/she does not want to pursue high school or GED and wants to pursue work, enter “EM” on the ES option field of the EMPS panel for the applicant. MAXIS will determine this applicant is eligible for DWP. Record the applicant’s choice in CASE/NOTEs. Counties using the DWP/MFIP Screening Questions (DHS-4026) as part of the application packet will have a documented answer to this question already available.

Explain the 60-month time limitation and that the unit may opt out of the cash portion of MFIP if a portion of the grant is not being vendor paid. See 0011.30 (60-Month Lifetime Limit), 0014.03.03.03 (Opting Out of MFIP Cash Portion).

Explain the Family Cap policy to applicants. See 0014.06.03 (Family Cap).

If a child was previously in another case with a relative prior to the parent applying for the child, attempt to determine the circumstances. Make a child protection referral for any case that has an MFIP caregiver whose parental rights were terminated. To determine whether a parent whose rights have been terminated may be a caregiver, see 0014.03.03 (Determining the Cash Assistance Unit).

WB:
No provisions.

DWP:
Follow MFIP, EXCEPT the 60-month time limit does NOT apply to DWP.

In addition:

● Conduct the interview within 5 working days of receipt of the application.

● Refer clients to Employment Services (ES) within 1 day of determining eligibility (this means from when you determine eligibility, not when you approve eligibility).

● The ES Provider MUST conduct the Employment Plan/interview within 10 days of referral.

● The ES Provider MUST notify the county agency of the ES plan approval within 1 day of signed plan.

● Issue DWP benefits within 1 day of being notified of the ES plan approval by the ES Provider.

● Include in the interview a discussion of goals, requirements, and services of the DWP.

● If child care is needed, obtain a child care application from the client before finishing the interview and forward the application to the appropriate child care assistance worker on the same day you received it. Make a referral to the appropriate Child Care
Resource and Referral (CCR&R) agency if the job seeker needs help in finding a child care provider. The contact numbers for the CCR&Rs can be found in the brochure “Do You Need Help Paying for Child Care?” (DHS-3551).

- Ensure that SNAP and health care are available to the client. If not already requested on the application, talk with the client about the availability of these benefits as well as others, such as Workers’ Compensation and Unemployment Insurance.

SNAP:
The interview may be with any responsible member(s) of the unit or their authorized representative. Clients must be informed of the interview options available: phone, face-to-face, or at a convenient location. Based on the interview option chosen, counties MUST accommodate the client’s choice.

You must offer adult members of a unit that includes children (of any age) in the home, or adults with parental control over children in the home, the right to designate the principal wage earner (PWE). See 0028.03.06 (Determining FS Principal Wage Earner).

Determine if the household is categorically eligible for SNAP. Ask the household if any member is receiving or authorized to receive Basic Sliding Fee Child Care (including At-Home Infant Child Care (AHIC) program), Transition Year Child Care, DWP, or has received Domestic Violence Information (DHS-3477). See 0013.06 (FS Categorical Eligibility/Ineligibility), 0029.36 (Domestic Violence Brochure Program).

If a client is not interviewed at the time the application is submitted, an interview must be scheduled. Document and track the date of the scheduled interview and the interview deadline date. Counties may use SPEC/MEMO to notify the applicant of the scheduled interview. See TEMP Manual TE02.05.15 (Notice of Missed Interview) for suggested text. The county must schedule all interviews as promptly as possible to insure eligible units receive an opportunity to provide any needed verifications and to participate within 30 days after the application is filed.

- If the applicant hand delivers the signed and dated Combined Application Form (DHS-5223), or Supplemental Nutrition Assistance Program Addendum to the Minnesota Health Care Programs Application (DHS-3417D) give the applicant written confirmation of the interview date, time and location OR the location and the interview deadline date.

- If the Combined Application Form (DHS-5223) or Supplemental Nutrition Assistance Program Addendum to the Minnesota Health Care Programs Application (DHS-3417D) is received in the mail, send written confirmation of the interview date, time and location OR the location and the interview deadline date.

If a client misses the initial interview, either an in-office interview, home visit or a phone interview, you must send a Notice of Missed Interview to the client informing him/her of the missed interview and the responsibility to reschedule another interview. The Notice of Missed Interview is available in SPEC/LETR. For more information see TEMP Manual TE02.05.15 (Notice of Missed Interview). A Notice of Missed Interview must be sent even if circumstances prevent a client from completing an interview late in the 30 day processing period. For example, a denial notice can be sent 1 day after the Notice of Missed Interview has been issued to the client if the missed interview was on the 30th day of the processing period.

Do not require units to report for a face-to-face interview during the certification period. See 0009.06.06 (Recertification Interview).

MSA, GA:
The interview may be with any responsible member of the unit or his/her authorized representative.

Inform applicants of the need to request health care programs on the Combined Application Form (DHS-5223) (CAF) if they want the county to determine eligibility for health care in the event that the application for cash is denied. See the Health Care Programs Manual for additional instructions.
GRH:
The interview may be with the applicant or his/her authorized representative.
Give the forms/handouts listed in this section to applicants at the interview or send them with the application packet if you are aware of the specific programs for which the applicants will apply.

The following are required to be included in the application packet:

- **Combined Application Form (CAF) (DHS-5223).**

- A cover letter including the following:
  - The county agency address, office hours, and phone number.
  - The importance of returning page number 1 of the CAF as soon as possible.
  - Information about the interview and returning the remainder of the CAF.

- **Program information brochure for cash, food and health care programs (DHS-2920).**

- **Domestic Violence Information (DHS-3477).** See **0029.36 (Domestic Violence Brochure Program).**

- **Notice About Income and Eligibility Verification System and Work Reporting System (DHS-2759).** See **0026.48 (Notices - IEVS).**

- Verification Request Forms:
  - **Verification Request Form - A (DHS-2919A).**
  - **Verification Request Form - B (DHS-2919B).**

  Indicate the time period for which you need the verification.

- **Do you have a disability? (DHS-4133).** Also see **0003.09.03 (Clients Rights - Civil Rights).**

The following may also be included in the application packet or handed out at the interview as appropriate:

- **Household Report Form (DHS-2120), Combined Six-Month Report (CSR) (DHS-5576), or Change Report Form (DHS-2402).** See **0007 (Reporting), 0007.12 (Agency Responsibilities for Client Reporting), 0007.15 (Unscheduled Reporting of Changes - Cash), 0007.15.03 (Unscheduled Reporting of Changes - FS).**

- **Authorization for Release of Information About Residence and Shelter Expenses (DHS-2952), if appropriate.** See **0010.18 (Mandatory Verifications).**

- **Application for Social Security number (SS-5), if needed.** See **0010.18.03 (Verifying Social Security Numbers), 0012.03 (Providing/Applying for an SSN).**

- **Notice of Privacy Practices (DHS-3979).** See **0003.09.06 (Client Rights - Data Privacy Practices).**
Give the following forms/handouts based on the programs applied for and the circumstances in the case. Check the cross-referenced sections for procedures for each form/handout listed.

**MFIP:**

- **Work Benefit Program Information (DHS-5837).**

  Give the following forms/handouts based on the programs applied for and the circumstances in the case. Check the cross-referenced sections for procedures for each form/handout listed.

**MFIP:**

- **Reporting Responsibilities for MFIP Households (DHS-2647).** See 0007.12 (Agency Responsibilities for Client Reporting).

  - In cases where there is at least 1 non-custodial parent:

    - **Understanding Child Support - A Handbook for Parents (DHS-3393).**

    - **Referral to Support and Collections (DHS-3163B).** (This is in addition to the Combined Application Form, for EACH non-custodial parent). See 0012.21.03 (Support From Non-Custodial Parents).

    - **Cooperation with Child Support Enforcement (DHS-2338).** See 0012.21.06 (Child Support Good Cause Exemptions).

      **NOTE:** This does not apply to a married parent who is out of the home on military duty when there is no breakdown in the marital relationship.

  - **Notice of Requirement to Attend MFIP Overview (DHS-2929).** See 0028.09 (ES Overview/FSET Orientation).

- If there is a custodial parent under 20, the **Notice of Requirement to Attend School (DHS-2961)** and **Graduate to Independence - MFIP Teen Parents Informational Brochure (DHS-2887).** If there is a custodial parent under age 18, the **MFIP for Minor Caregivers (DHS-3238) brochure.** See 0012.06 (Requirements for Caregivers Under 20), 0028.06.03 (Who Must Participate in Empl. Services/FSET), 0028.12 (Education Requirements).

- **Family Violence Referral (DHS-3323) and Domestic Violence Information (DHS-3477).**

- **Important Information about the MFIP Family CAP (DHS-4198).**

- If a non-parental caregiver applies, **MFIP Child Only Assistance (DHS-5561)**

**WB:**

No provisions.

**DWP:**

Follow MFIP, EXCEPT do not give the **Notice of Requirement to Attend MFIP Overview (DHS-2929)** to the applicants. Instead, give the applicant the **Minnesota’s Diversionary Work Program-DWP (DHS-4034).**
SNAP:

- **Supplemental Nutrition Assistance Program Reporting Responsibilities (DHS-2625).** See 0007.12 (Agency Responsibilities for Client Reporting).

- If you know there is student income, the **Financial Aid Information Form (DHS-2646).** See 0010.18.30 (Verifying Student Income and Expenses).

- For all applicants, the **Facts on Voluntarily Quitting Your Job If You Are on the Supplemental Nutrition Assistance Program (SNAP) (DHS-2707).** See 0028.30.09 (Refusing or Terminating Employment).

MSA:

- **SSI Interim Assistance Agreements (DHS-1795).**

- **Interim Assistance Agreement (DHS-1795A), do not use for SSI.** See 0012.12 (Applying for Other Benefits), 0012.12.03 (Interim Assistance Agreements).

GA:

- If you know there is student income, the **Financial Aid Information Form (DHS-2646).** See 0010.18.30 (Verifying Student Income and Expenses)

- **SSI Interim Assistance Agreements (DHS-1795), Interim Assistance Agreement (DHS-1795A) (Do not use for SSI), if appropriate.** See 0012.12 (Applying for Other Benefits), 0012.12.03 (Interim Assistance Agreements).

GRH:

For participants who are aged, blind, or disabled and over 18, follow MSA. For all other participants, follow GA.
All assistance programs require you to process applications as soon as possible, and within a certain number of days from the date of application. Day 1 of the count starts with the 1st day following the date of application. See 0005.12.09 (Date of Application). See program provisions listed below for application processing timetables.

Processing standards are the maximum time you have to determine eligibility. Do NOT treat this time as a waiting period for eligibility.

Determine eligibility as soon as the necessary information is available. Send a notice approving, pending, or denying eligibility. See 0010 (Verification), 0026 (Notices).

The processing standards for Emergency General Assistance, DWP and expedited SNAP applications differ from standard applications. See 0004.06 (Emergencies - 1st Month Processing), 0005.12.09 (Date of Application).

Within the processing period:

- Review the application for completeness.

- Schedule and conduct the interview. See 0005.12.12 (Application Interviews).

- Verify mandatory and inconsistent items. See 0010.18 (Mandatory Verifications), 0010.21 (Verification Due Dates).

- Determine eligibility.

- Send a notice. See 0026 (Notices).

See 0005.12.15.03 (Delays in Processing Applications) for what to do when you cannot determine eligibility within the time frames listed below because clients do not provide information, for delays not caused by clients, and when not to delay processing.

See 0022.03.03 (Ineligibility in a Prospective Month - Cash), 0022.03.04 (Ineligibility in a Prospective Month - FS) for provisions relating to cases that are ineligible in a prospective month.

MFIP:
Determine eligibility no later than 30 days following the date of the application. Clients must be eligible for assistance on the date you approve the case.

To meet the 30-day requirement, you may want to conduct interviews for minor caregivers on an accelerated schedule due to the time that social service evaluations might require. See 0004.01 (Emergencies - Program Provisions), 0012.06 (Requirements for Caregivers Under 20).

WB:
No provisions. See 0005.10 (Minnesota Transition Application Form (MTAF)).

DWP:
Below are various steps and time lines in processing a DWP application:

- Conduct the initial face to face interview to determine DWP eligibility within 5 working days of receiving the application. Although you must conduct an interview within 5 working days, the participant still has 30 days before the application expires. If an applicant does not show up for an appointment within the 5 days, attempt to reschedule the appointment. If more than 30 days have lapsed since the date of application, deny the application, giving proper notice.
● Determine the need for child care at the interview and complete a child care application before the interview ends. Forward the child care application to the child care worker the day that it is completed.

● Within 1 working day of determining that the applicant meets the DWP eligibility criteria, refer the participant to ES. Trigger the referral based on county policy. Some counties may choose to make the referral pending receipt of final verifications, others may choose to wait until all verifications are in. Prompt referral to ES is critical because applicants cannot receive DWP benefits until eligibility is determined and an initial EP has been developed and signed.

The participant’s referral to ES must be in writing and must contain:

- Notification that, as part of the application process, applicants are required to develop and sign an Employment Plan or the DWP application will be denied.

- The name and phone number of the ES provider.

- The immediate availability of supportive services, including, but not limited to, child care, transportation, and other work-related aid.

- The rights, responsibilities, and obligations of participants in the program, including, but not limited to, their rights under the Americans with Disabilities Act (ADA), the grounds for good cause, the consequences of refusing or failing to participate fully with program requirements, and the appeal process. Also see 0003.09.03 (Client Rights - Civil Rights).

The Job Counselor will meet with the DWP participant within 10 working days of the county referral to develop and sign an initial EP. The Job Counselor must notify the county within 1 working day of the date the EP was signed.

Authorize DWP benefits through MAXIS to the participant within 1 working day of being notified by the ES provider that the initial EP has been developed and signed.

Use the following forms:

- **Diversionary Work Program Referral to Employment Services (DHS-4161).**

- **Client Responsibilities and Rights (DHS-4163).**

- **Do you have a disability? (DHS-4133).**

**NOTE:** There are no DWP orientation requirements. A county may opt to provide an orientation for its DWP participants.

**MAXIS Process**

Do not deny the application before the 30 day application processing period has expired, unless the case has been determined ineligible (for example for excess income). MAXIS will not automatically deny applications pending past 30 days. You must deny the application at the appropriate time.
SNAP:
Determine eligibility and issue benefits or a denial notice no later than 30 days following the date of the application. If you cannot
determine eligibility within 30 days, send a notice of processing delay, determine who caused the delay, and allow an additional 30
days to complete the application processing. See 0005.12.15.03 (Delays in Processing Applications), 0005.12.15.06 (Determining
Who Caused the Delay), 0024 (Payments).

EXCEPTIONS

● If the unit failed to attend the initially scheduled interview, an attempt has been made to inform the unit of their responsibility to
schedule a second interview, and the client has made no subsequent contact with the agency to express interest in pursuing
the application, deny the application on the 30th day.

See TEMP Manual TE02.05.15 (Notice of Missed Interview). Also, document the contact in CASE/NOTEs.

● If you conduct the interview and request all necessary verifications on the same day the client submits the application and you
provided assistance in obtaining verification but the unit fails to provide the requested verification, deny the application on the
30th day.

MAXIS Process

Do not deny the application before the 30 day application processing period has expired, unless the case has been determined
ineligible (for example for excess income). MAXIS will not automatically deny applications pending past 30 days. You must deny
the application at the appropriate time.

MSA, GRH:
Determine eligibility and issue benefits or a denial notice for disabled people no more than 60 days after the date of application.

Determine eligibility and issue benefits or a denial notice for all other people no later than 30 days following the date of the
application. See 0024 (Payments).

GA:
Determine eligibility no later than 30 days following the date of the application. Clients must be eligible for assistance on the date
you approve the case.
Clients on scheduled monthly reporting must submit a complete Household Report Form (HRF) (DHS-2120). See 0007.03 (Monthly Reporting - Cash), 0007.03.01 (Monthly Reporting - Uncle Harry FS), 0007.12.06 (Incomplete HRF/CSR).

Determine if an HRF is complete when a client submits it. Review the HRF for thoroughness of the answers and for mandatory verifications. See 0010.18 (Mandatory Verifications).

Consider an HRF complete when:

- The HRF is signed and dated on the last day of the report period or later. The same signature requirements for applications apply to the HRF. See 0005.12.06 (Who Must Sign Applications). AND
- All questions are answered unless otherwise instructed on the form. AND
- You have sufficient information to determine eligibility.

Clients on scheduled Six-Month Reporting must submit a complete Combined Six-Month Report (CSR) (DHS-5576), see 0007.03.02 (Six-Month Reporting – FS).

WB clients are required to complete a CSR and a Combined Six-Month Report Supplement for Cash Programs (DHS-5576A), see 0009.06.03 (Recertification Processing Standards).

Determine if a CSR is complete when a client submits it. Review the CSR for thoroughness of the answers and for mandatory verifications. See 0010.18 (Mandatory Verifications).

Consider a CSR complete when:

- The CSR is signed and dated. NOTE: For MFIP, the Combined Six-Month Report (CSR) (DHS-5576) and Combined Six-Month Report Supplement for Cash Programs (DHS-5576A) is signed and dated on the last day of the report period or later. The same signature requirements for applications apply to the CSR. See 0005.12.06 (Who Must Sign Applications). AND
- All questions are answered unless otherwise instructed on the form. AND
- You have sufficient information to determine eligibility. See 0010.18 (Mandatory Verifications).

Counties may use the Earned Income/Pay Period/Date Tracking Form (DHS-5006F) to help track a participant’s pay periods.

Counties may accept faxed HRFs, CSRs, and any supporting verifications. Original documents are not required.

Consider faxed HRFs and CSRs received on weekends, holidays, or after hours to be received on the 1st working day after receipt of the HRF or CSR. If the fax machine is located outside the human services agency, the county will need to address data privacy issues for applicants. The client is responsible for verifying the county received the fax.
Clients must report changes that affect their eligibility. For some programs, they must report changes in addition to their scheduled report. Clients do not have to report changes in assistance benefits. See 0007.03 (Monthly Reporting - Cash), 0007.03.01 (Monthly Reporting - Uncle Harry FS).

Clients may report unscheduled changes in person, by telephone, or by mail. They may use the Change Report Form (DHS-2402) to report changes for any program.

**MFIP:**
Applicants must report changes immediately while their application is pending.

Participants must report changes by the earliest of these dates:

- 10 days after the change occur.
- At recertification.
- 8 calendar days after the end of their monthly reporting period.

Participants who report a change before submitting a Household Report Form (DHS-2120) (HRF), must also report the change on the HRF.

Changes which participants must report within 10 days include:

- An adult or child in the unit starts or terminates a job, works more or fewer hours, or gets a raise.
- A unit member starts or stops a business, or the business undergoes a major change.
- Initial receipt of unearned income.
- A recurring change in unearned income.
- A non-recurring change of more than $30 in unearned income.
- Receipt of a lump sum.
- An increase in assets which may cause the unit to exceed asset limits. See 0015.75 (Excess Assets – Participants).
- A change in United States Citizenship and Immigration Service (USCIS) status.
- A change in household composition, including births, returns to and departures from the home of unit members and financially responsible people, a unit member temporarily absent from the home, or a change in the custody of a minor child. See 0008.06.06 (Adding a Person to the Unit - Cash), 0008.06.09 (Removing a Person from the Unit), 0008.06.15 (Removing or Recalculating Income).
• A pregnancy terminated before birth when there are no other minor children in the assistance unit (pregnant woman case). Case note that the pregnancy was terminated and close the case due to no minor child in the home. It is not necessary to verify the termination of the pregnancy. See 0014.06.03 (Family Cap).

• A change in a non-custodial parent’s address, visitation schedule or any other information the Child Support Agency can use to identify, locate or determine contribution amounts from non-custodial parents. See 0012.21 (Responsible Relatives Not in the Home), 0012.21.03 (Support from Non-Custodial Parents).

• Marriage, legal separation, or divorce of an assistance unit member. Require verification of a marriage before adding the spouse (step-parent) to the assistance unit. Verification of divorce is needed to determine distribution of marital assets or parenting time when joint custody has been awarded.

• Death of an assistance unit member or other person whose income is counted. See 0016 (Income From People Not in The Unit). Require verification only if case information is inconsistent. See 0010.15 (Verification – Inconsistent information).

• A change in address or living quarters of the unit. Require verification if the move affects state residency, requires the use of the Shared Household Standard or any other factor resulting from the move which could affect eligibility or the amount of assistance. See 0020.09 (MFIP/DWP Assistance Standards).

• New rent subsidy, or a change in a rent subsidy.

• The sale, purchase, or other transfer of property. See 0015.12.06 (Repayment Agreements on Real Property), 0015.27 (Excluded Assets – Income), 0015.69 (Asset Transfers), 0015.75 (Excess Assets – Participants).

• Transfer of property, if it is done to establish or maintain eligibility for assistance. See 0015.69.06 (Improper Asset Transfers), 0015.75 (Excess Assets – Participants).

• A change in school attendance of a parent under age 20 or of an employed child.

• A change in the physical or mental status of a member of a unit, if the physical or mental status is the basis for reducing the hourly participation requirements or the type of activities included in the member’s employment plan.

• Filing a lawsuit, a Worker’s Compensation claim, or a monetary claim against a third party.

• Drug felony conviction. See 0011.27.03 (Drug Felons).

• Information affecting a shared household EXCEPTION. See 0020.09 (MFIP/DWP Assistance Standards).

The above changes must be reported, but only require verification when the change affects MFIP eligibility or the amount of the assistance payment. See 0010.18.01 (Mandatory Verifications – Cash Assistance).

To determine if an overpayment occurred when changes were not reported timely, see 0008.06.01 (Implementing Changes -
WB:
All clients MUST report the following changes by the 10th of the month following the month in which the change occurred:

- The household moves out of the state.

- The household gross income increases above 200% of the FPG for their family size. See 0016.18.01 (200 Percent of Federal Poverty Guidelines).

DWP:
Changes DWP applicants MUST report immediately while their application is pending, and changes DWP participants must report within 10 days after they occur include:

- Household size.

- Shelter expenses.

- Utility Expenses.

- Decrease in income.

- Initial employment.

- Initial receipt of unearned income.

- A recurring change in unearned income.

- A non-recurring change of more than $30 in unearned income.

- Receipt of a lump sum.

- An increase in assets which may cause the unit to exceed asset limits.

- A change in employment status.

- A change in unit composition, including births, returns to and departures from the home of unit members and financially responsible people, or a change in the custody of a minor child.

- Marriage or divorce of a unit member.
- Death of a unit member or other person whose income is counted. See 0016 (Income From People Not in The Unit).

- A change in address or living quarters of the unit.

- The sale, purchase, or other transfer of property.

- A change in school attendance of a custodial parent or of an employed child.

- A change in the physical or mental status of a disabled member of a unit.

- Filing a lawsuit, a Worker's Compensation claim, or a monetary claim against a third party.

- Information affecting a shared household EXCEPTION. See 0020.09 (MFIP/DWP Assistance Standards).

**SNAP:**
No provisions. See 0007.15.03 (Unscheduled Reporting of Changes - FS).

**MSA:**
All clients MUST report changes which affect eligibility by the earliest of these dates:

- 10 days after the changes occur.

- At recertification.

- 8 calendar days after the end of the HRF reporting period.

If the client reports the change before submitting the HRF, the client must also report the change on the HRF.

Clients receiving SSI do not have to report a change in income or assets to the county agency; they must report the change to the Social Security Administration.

**GA:**
All units must report changes which affect eligibility by the earliest of these dates:

- 10 days after the changes occur.

- At recertification.

- 8 calendar days after the end of the reporting period.
If the unit reports the change before they submit the HRF, they must also report the change on the HRF.

All clients MUST report changes which affect eligibility by the earliest of these dates:

- Initial employment.
- Initial receipt of unearned income.
- A recurring change of more than $50 per month of net earned or unearned income.
- Receipt of a lump sum.
- An increase in assets which may cause the unit to exceed asset limits.
- A change in the physical or mental status of an incapacitated adult if the issue is the basis of eligibility or the basis of exemption from an employment services program.
- A change in employment status.
- A change in unit composition, including births, returns to and moves from the home of unit members and financially responsible people, or a change in the custody of a dependent child.
- Marriage or divorce of a unit member.
- Death of a parent.
- A change in address or living quarters of the unit.
- The sale, purchase or other transfer of property.
- Units must report within 10 days a change in school attendance of a member of an assistance unit over 15 years of age.

Depending on the change and when the unit reports it, an overpayment may occur for 1 or more months. See 0008.06 (Implementing Changes - General Provisions), 0008.06.01 (Implementing Changes - Program Provisions), 0025.03 (Determining Incorrect Payment Amounts).

**GRH:**
For clients who are aged, blind or disabled, follow MSA.
For clients whose eligibility is GA-related, follow GA.
Follow these procedures for removing income in certain situations. Also see 0022.03 (How and When to Use Prospective Budgeting), 0022.06 (How and When to Use Retrospective Budgeting), 0022.06.03 (When Not to Budget Income in Retro. Cases), 0022.09 (When to Switch Budget Cycles - Cash), 0022.09.03 (When to Switch Budget Cycles - FS).

If the changes in income result in potential eligibility for other benefits, see 0012.12 (Applying for Other Benefits).

Different provisions may apply to receipt of lump sums. See 0022.15 (Counting Lump Sums as Income).

MFIP:
It may be possible to supplement a unit's grant if the unit reports a significant change in income. A significant change is when the unit's gross earned and/or unearned income for the payment month declines by 40% or more from the gross earned and/or unearned income budgeted in the budget month. Do not consider significant change as restored benefits.

If the unit reports that it expects income to decline, act right away. The unit must verify the income will decrease or end before you issue the supplement. Do not wait until the end of the month to verify the exact amount of the decrease. See TEMP Manual TE19.156 (QTIP #156 - MFIP Stop Work Procedures). For information on verifying changes in income, see Chapter 10 (Verification).

The unit may only receive a supplement for a change it reports in the current month or for the month before. Issue a supplement no more than 7 days after the unit verifies the change. Do not issue a supplement for a grant you have not yet issued.

Budget adjustments that result from significant changes are limited to 2 in a 12 month period, regardless of the reason for the change. Count back 12 months from the month the client is requesting the change to determine eligibility for significant change.

If the unit reports (and verifies) a decrease in actual or expected income, follow these procedures to determine the supplement to issue.

1. Calculate the unit's gross income, including deemed income, for the month. See 0016 (Income From People Not in the Unit), 0017 (Determining Gross Income).

2. Subtract the figure in Step 1 from the gross income, including deemed income, from the budget month.

3. Multiply the gross income from the budget month by 0.40.

4. If the amount in Step 2 is less than the amount in Step 3, there is no significant change. If the amount in Step 2 is equal to or greater than the amount in Step 3, go to Step 5.

5. Recalculate the current month's grant using the client's reported income.

6. Subtract the amount of the grant you issued from the amount in Step 5. Issue the difference as a supplement.

Significant change does not apply in any of these situations:

- In the payment month corresponding to a budget month in which the unit receives a lump sum.

- When a unit member is on strike.
In the payment month corresponding to the budget month in which the unit gets an extra paycheck.

For self-employment income. See 0017.15.33.03 (Self-Employment, Convert Inc. to Monthly Amt) for information on "major change" which applies to self-employment income.

See TEMP Manual TE02.13.11 (Significant Change) for MAXIS instructions.

WB, DWP:
For recalculating income, see 0022.12 (How to Calc. Benefit Level - MFIP/WB/DWP/GA).

SNAP, GA:
Stop counting the income of a participant beginning with the payment month the person is removed from the assistance unit.

Stop counting the income of an ineligible household member whose income was considered, beginning with the payment month following the month it is reported that person left the household.

For information on reporting requirements, see 0007 (Reporting).

See TEMP Manual TE02.13.11 (Significant Change) for MAXIS instructions.

MSA:
Stop counting the income of a formerly financially responsible person for the 1st month after the person loses financial responsibility.

GRH:
Stop counting the income of a participant beginning with the month after the income stopped.
Also see 0017.15.15 (Income of Minor Child/Caregiver Under 20).

MFIP:
When minor children turn 18, they must meet the school requirement in order to continue receiving assistance. See MINOR CHILD in 0002.41 (Glossary: Medically Necessary...), 0012.06 (Requirements for Caregivers Under 20), 0028.12 (Education Requirements).

The requirement that a minor caregiver live with certain adults applies ONLY through the month of the minor caregiver's 18th birthday. There may be other social service requirements and Employment Services requirements for the minor caregiver until his/her 20th birthday.

When a participant turns 20, the school attendance requirement no longer applies. See 0028.12 (Education Requirements). Other Employment Services requirements may apply. See 0028.06.03 (Who Must Participate in Empl. Services/FSET).

WB:
When the youngest child turns 6 years a single caregiver must be employed at least 130 hours per month.

When minor children turn 18, they must meet the school requirement. See MINOR CHILD in 0002.41 (Glossary: Medically Necessary...).

DWP:
When minor children turn 18, they must meet the school requirement in order to continue receiving assistance. In addition, see 0008.06.24 (DWP Conversion or Referral to MFIP) when a DWP participant turns 60 years old. Also see 0028.06.02 (Universal Participation Provisions), 0028.15 (Employment Plan (EP)) for the child under 12-week exception.

SNAP:
Budget the earned income of an elementary, secondary, or GED student who turns 18 starting with the 1st budget month in which the student is 18 for the full month. Prospectively or retrospectively budget the income, depending on which cycle the unit is in. See 0007 (Reporting), 0022 (Budgeting and Benefit Determination).

Due to the American Recovery And Reinvestment Act (ARRA) and the statewide ABAWD waiver, ABAWDs will NOT be subject to the 3-month out of 36-month time limit. The 3-month time limit will not be applied to SNAP cases from January 1, 2009 through September 30, 2013. Begin applying the 3 months in a 36-month limit of eligibility once a non-exempt able-bodied adult is 18 for the full month. Stop applying this limit the month he/she turns 50. See 0011.24 (Able-Bodied Adults).

Allow elderly income disregards and expenses to people who turn 60 as of the budget month they turn 60. Prospectively or retrospectively budget the income, depending on which cycle the unit is on. See 0018.12 (Medical Deductions), 0018.15 (Shelter Deductions), 0022 (Budgeting and Benefit Determination).

Apply other eligibility factors prospectively as of the month the client turns 60. See 0011.18 (Students), 0014.03 (Determining the Assistance Unit), 0014.03.06 (Determining the Food Support Unit), 0015.03 (Asset Limits), 0022.03 (How and When to Use Prospective Budgeting), 0028.06.10 (Who Is Exempt From FSET).

MSA, GA:
No provisions.

GRH:
When a non-disabled client turns 65 years old, change the budgeting method in the month the client turns 65 from GA-related other adult to the SSI-related aged method.
A single interview must cover all programs for which the unit is requesting certification or recertification.

The interview may be with 1 or more adults in the unit or the unit’s authorized representative. See 0005.06 (Authorized Representatives). If there are no adults in the unit, the interview may be with the primary contact person. See 0005.12.12 (Application Interviews). Units may bring any person they choose to the interview.

MFIP:
Conduct a face-to-face interview at least once every 12 months. The contents of the interview are the same as for application interviews. See 0005.12.12 (Application Interviews).

Under certain circumstances counties may waive an in-office interview, but alternative arrangements for a face-to-face interview must be made. For participants who are working, counties may waive the face-to-face requirement at recertification and conduct a phone interview. See 0005.12.10 (Waiving In-Office Interviews).

At each annual recertification, provide the brochure MFIP for Minor Caregivers (DHS-3238) to a unit containing a minor caregiver and child. Re-evaluate and discuss with the caregiver, the living arrangement requirements, exemptions, and procedures. See 0012.06 (Requirements for Caregivers Under 20).

Provide the Important Information About MFIP Family Cap (DHS-4198) flyer to families at each recertification. See 0014.06.03 (Family Cap).

Determine if the caregiver meets eligibility for Family Stabilization Services (FSS). Review FSS criteria with the caregiver.

Provide the Family Violence Referral (DHS-3323) to families at each recertification. See 0009.06 (Recertification Process).

Provide Reporting Responsibilities for MFIP Households (DHS-2647) to participants at each recertification. Explain the significant change policy. See 0008.06.15 (Removing or Recalculating Income).

WB, MSA, GA, GRH:
An interview is not required for this program. If the client requests or is receiving another program for which an interview is required, follow the general provisions above.

DWP:
No provisions.

SNAP:
Conduct an interview for all recertifications. There is NO requirement that the interview must be held in the office. If an in-office interview is not done, the county must arrange for a phone interview or a face-to-face interview at a location mutually agreed upon by the county and the client. The contents of the interview are the same as for application interviews.

When the client misses a recertification interview, either an in-office interview, a home visit, or a phone interview, send a SPEC/LETR to the client informing him/her of the missed interview and the responsibility to reschedule another interview. A sample SPEC/LETR notice is available in TEMP Manual TE02.05.15 (Notice of Missed Interview).

Offer an adult parent with children (of any age) in the home or an adult unit member who has parental control over children in the home the right to change the principal wage earner. For the description of principal wage earner, see 0028.03.06 (Determining FS Principal Wage Earer).
Clients have the primary responsibility to verify information. When you need non-public information for proof, clients must get documents themselves or give you written permission to contact 3rd parties to verify their statements.

To use a collateral contact for proof, the client must help identify a contact. If a suitable collateral contact cannot verify or refuses to verify the facts, the client must help find another contact. A contact’s refusal to cooperate is not the client’s refusal to cooperate. See 0010.09 (Sources of Verification, Collateral Contacts).

Consent from a client to contact a 3rd party must include the name of the specific contact person and the specific information you need. A written consent may cover more than 1 3rd-party source, but must name each source individually. You may use the Authorization for Release of Information About Assets (DHS-2243) and the General Authorization For Release of Information (DHS-2243A) form.

If a client refuses to help or deliberately fails to cooperate to verify an eligibility factor, deny or terminate benefits. If the unverified eligibility factor affects only the client (such as immigration status), deny or end the client’s eligibility. If the unverified factor affects the entire unit (such as income), deny or close the case.

**MFIP, DWP:**

When proof is not available in the situations below, accept a signed personal statement from the client attesting to the correctness of the information:

- A claim of family violence if used as a basis to qualify for the family violence waiver.

- Information needed to establish an exception from the Shared Household Standard budgeting requirement (to prove that a person is unrelated).

- Relationship of minor child to caregiver.

  **EXCEPTION:** DO NOT accept a signed statement from the caregiver as proof of paternity. Refer the father to the county support office to establish paternity.

- Citizenship status from a noncitizen who reports to be, or is identified as, a victim of severe forms of trafficking in persons, if the noncitizen reports that the noncitizen’s immigration documents are being held by an individual or group of individuals against the noncitizen's will. The noncitizen must follow up with the Office of Refugee Resettlement (ORR) to pursue certification. If verification that certification is being pursued is not received within 30 days, close the MFIP case and pursue overpayments. If the ORR documents certifying the noncitizen's status as a victim of severe forms of trafficking in persons, or the reason for the delay in processing, are not received within 90 days, close the MFIP case and pursue overpayments.

- Other documentation unavailable for reasons beyond the control of the client when reasonable attempts have been made to obtain the documents requested.

**NOTE:** DO NOT use signed personal statements from the client in any other circumstances.

**WB:**

Follow MFIP, EXCEPT the family violence waiver and Shared Household Standard provisions do not apply to WB.

**SNAP, MSA, GA, GRH:**

When a client cooperates but you still cannot find an adequate source of proof, work with the client to find the best available information. Get a signed statement from the client attesting to the correctness of the information. Do not deny benefits because you cannot get proof if the client has made all reasonable efforts.
Use documents, when available, to verify a client's statement. This includes documents from public agencies, documents the client has, or any written confirmation of a client's statements from a source outside the unit. If you need a specific document and the client does not have money to get it, your agency must pay for the cost.

Place the original or a copy of the document in the case file if possible. Return original copies of documents, such as, birth certificates and marriage licenses, to the client. Keep original copies of DHS forms or other statements the client or someone else completes in the case file.

When photocopying savings bonds or other negotiable items, you must alter the size of the items by reducing or enlarging. It is illegal to photocopy savings bonds without altering the size.

If it is not possible to get an original or a copy of the document, describe the document in the case notes. Include:

- The nature or title of the document.
- The source.
- The date the document was completed or signed.
- Identifying numbers or codes.
- The content.
- Other pertinent information about the document.

NOTE: If an applicant provides a birth certificate issued by Puerto Rico as a verification, contact the Local Agency Support Policy Center through PolicyQuest.

MFIP, WB, DWP:
Written records or documents are required to verify the familial relationship of a minor child to the child's parental or non-parental caregiver. Verification must establish the relationship of the minor child to the parent and, if necessary, the parent to the non-parental caregiver. Verification is not limited to birth certificates

Consecutively numbered I-94 cards do not prove relationship of a caregiver to a child. Accept a signed statement when written records establishing relationship do not exist in the former country, or written records exist but attempts to obtain them have not been successful. Contact the Policy Center with questions about whether an INS form other than the I-94 can establish relationship of a caregiver to a child.

SNAP MSA, GA, GRH:
Follow general provisions.
See 0010.18 (Mandatory Verifications) for mandatory verifications that apply to all programs.

See 0010.18.02 (Mandatory Verifications - FS) for additional mandatory verification provisions that apply to SNAP.

See provisions below for ADDITIONAL mandatory verification provisions that apply to each specific cash program.

**MFIP:**

See 0010.03 (Verification – Cooperation and Consent) for circumstances when a signed personal statement from the client is acceptable verification.

**VERIFY THE FOLLOWING AT INITIAL APPLICATION:**

- Costs of child care when applying the initial eligibility test. See 0018.09 (Dependent Care Deduction).

- Stop work, if necessary to verify income in the month of application.

- The number of hours worked each month.

- Checking and savings accounts.

- Savings certificates, stocks, bonds, retirement accounts, trusts.

- Source and purpose of deposits and withdrawals from business accounts.

- Presence of a minor child in the home, if questionable.

- Identity of adults.

- Age, if related to eligibility or benefit level.

  - Social Security number, unless the unit member qualifies as a non-citizen who is a victim of battery and/or cruelty. See 0011.03.21 (Non-Citizens - Victims of Battery/Cruelty). Do not require a Social Security card. See 0010.18.03 (Verifying Social Security Numbers). Do not require undocumented persons to provide a Social Security number.

- Child and spousal support payments to people outside the household, to be allowed as a deduction.

- School attendance, if related to eligibility.

- Burial accounts.

- Real property not used as a home. See 0015.12.06 (Repayment Agreements on Real Property).
● Vehicles. See 0015.39 (Excluded Assets - Vehicles).

● Relationship of caregivers to the child. See 0005.12.12 (Application Interviews), 0010.03 (Verification Cooperation and Consent), 0010.06 (Sources of Verification - Documents), 0014.03.03 (Determining the Cash Assistance Unit).

● Pregnancy, if related to eligibility. See 0013.03.03 (Pregnant Woman Basis – MFIP/WB/DWP).

● State residence. See 0011.06 (State Residence), 0011.06.09 (State Residence – 30-Day Requirement). For applicants with a Safe At Home Identification Card, see 0029.29 (Safe At Home Program).

● The number of months the unit received TANF funds in another state only if the applicant checks "yes" on the application to receipt of assistance in another state. See 0011.30 (60-Month Lifetime Limit), 0013.05 (DWP Bases of Eligibility).

● Application for other maintenance benefits. See 0012.12 (Applying for Other Benefits).

● Disability or illness, if needed to determine eligibility for Family Stabilization Services (FSS) or 60-month extension. See 0011.33 (MFIP Hardship Extensions). For information on FSS, see the Employment Services Manual.

● Family violence if used as a basis to qualify for a family violence waiver. See 0005.12.09 (Family Violence Provisions/Referrals), 0011.30 (60-Month Lifetime Limit), 0010.18.33 (Verifying Family Violence).

● Shelter costs, as required for vendor payments. See SHELTER COSTS in 0002.61 (Glossary: SELF...), 0024.09 (Protective and Vendor Payments).

● The amount of a housing subsidy and exceptions to counting the subsidy. See 0017.15.99 (Housing Subsidy).

● Information needed to establish an EXCEPTION to the shared household standard. See 0020.09 (MFIP/DWP Assistance Standards).

● Living arrangement of a minor caregiver. See 0012.06 (Requirements for Caregivers Under 20).

● Sponsor income and assets. See 0015.48 (Whose Assets to Consider), 0016 (Income From People Not in the Unit).

Counties must verify immigration status for ANY person reported on the Combined Application Form (CAF) who is NOT a United States citizen and for whom the applicant is requesting benefits. DO NOT request verification of immigration status for people listed on the application who are NOT applying for assistance. DO NOT verify citizenship when the applicant reports on the CAF that they are a United States citizen.

See Chapter 11 (Technical Eligibility), TE02.05.98 (IMIG Status and Cards With Expiration Dates), the Guide to Non-citizen Eligibility for Cash and Food Support when a document presented to verify immigration status has expired.
If the applicant cannot provide proof of immigration status for a MANDATORY unit member, you must:

- Offer to help obtain the verification.
- Obtain a signed release of information from the client.
- Continue the application process excluding the mandatory unit member. See 0011.03.27.03 (Protocols for Reporting Undocumented People), 0014.03.03 (Determining the Cash Assistance Unit).

See TE02.05.98 (IMIG Status and Cards With Expiration Dates) when a document presented to verify immigration status has expired.

If the applicant does not want you to contact the U.S. Citizenship and Immigration Services (USCIS) for proof of citizenship for an OPTIONAL unit member and indicates that he/she is here unlawfully:

- Determine eligibility for the remaining unit members. No further verification of immigration status would be requested.
- Do not report this optional unit member to DHS because it is not known that he or she is in the United States unlawfully. See 0011.03.27.03 (Protocols for Reporting Undocumented People).

If the client has given you permission to contact the U.S. Citizenship and Immigration Services (USCIS), see 0011.03.27.03 (Protocols for Reporting Undocumented People).

**VERIFY THE FOLLOWING AT RECERTIFICATION:**

- Income, unless excluded.
- Self-employment expenses used as a deduction. See 0010.18.09 (Verifying Self-Employment Income/Expenses).
- Source and purpose of deposits and withdrawals from business accounts.
- Presence of a minor child in the home, if questionable.
- Inconsistent information. See 0010.15 (Verification - Inconsistent Information).
- Information needed to establish an EXCEPTION to the shared HOUSEHOLD standard. See 0020.09 (MFIP/DWP Assistance Standards).
- Assets when the value is within $200 of the asset limit.
- Whether a caregiver is eligible for Family Stabilization Services (FSS). For information on FSS, see the Employment Services Manual.
VERIFY THE FOLLOWING CHANGES WHEN REPORTED:

See 0007.15 ( Unscheduled Reporting of Changes – Cash) for changes participants are required to report within 10 days.

- Unit member whose earnings or hours are counted starts a job. See 0007.12 (Agency Responsibilities for Client Reporting).

- Unit member whose earnings or hours are counted terminates a job. See 0008.15 (Removing or Recalculating Income).

- Unit member whose earnings or hours are counted starts or stops a business, or the business undergoes a major change. See 0010.09 (Verifying Self-Employment Income/Expenses); 0017.33.03 (Self-Employment, Convert Inc. to Monthly Amt).

- Unit member whose income is counted reports initial receipt of unearned income or a lump sum. See 0022 (Budgeting and Benefit Determination).

- Birth and relationship of newborn to father when he is in the home. See 0008.12.09 (Converting a Pregnant Woman Case), 0010.03 (Verification, Cooperation and Consent), 0010.06 (Sources of Verification - Documents).

- Returns to the home of unit members and financially responsible people. See 0008.06.06 (Adding a Person to the Unit – Cash); 0008.06.12 (Adding a Person’s Income).

- Temporary absences of unit members from the home. See 0014.09 (Assistance Units – Temporary Absence).

- A change in the custody of a minor child or a change in visitation schedule. See 0014.12 (Units for People With Multiple Residences).

- Full-time school attendance and anticipated graduation date of 18 year old minor children in the assistance unit.

- Half-time school attendance of an employed minor child in the assistance unit and caregivers under age 20 to determine exclusion of earnings.

- School attendance for parents under age 20 who are required to attend school as part of an Employment Services Plan. See 0028.12 (Education Requirements).

- Illness or disability if needed to determine eligibility for a hardship extension or to change to FSS. See 0011.33 (MFIP Hardship Extensions).

- Family violence at the time it is claimed. See 0010.33 (Verifying Family Violence).

- A change in United States Citizenship and Immigration Service (USCIS) status. See the Guide to Non-Citizen Eligibility for Cash and Food Support (DHS-4864).
● Application for a benefit a participant may be eligible for. Counties can use Notice to Apply for Other Maintenance Benefits (DHS-2116) to notify participant of this requirement. See 0012.12 (Applying for Other Benefits).

WB:
VERIFY THE FOLLOWING AT RECERTIFICATION:

● Income, unless excluded.

● Self-employment.

● Assets, when the value is within $200 of the asset limits.

● Hours of employment.

● Date of employment termination and date last paid.

● Presence of a minor child in the home and the age of the child, if questionable.

● Verify all inconsistent information.

DWP:
See 0010.03 (Verification – Cooperation and Consent) for circumstances when a signed personal statement from the client is acceptable verification.

Follow MFIP. In addition, verify:

● Family maintenance needs before the expense can be allowed in the DWP grant calculation, see FAMILY MAINTENANCE NEEDS in 0002.23 (Glossary: Fair Hearing...), AND

● Receipt of DWP or MFIP within the last 12 months. See 0013.05 (DWP Bases of Eligibility), AND

● Receipt of TANF-funded assistance months, used to determine DWP eligibility. See 0013.05 (DWP Bases of Eligibility).

SNAP:
See 0010.18.02 (Mandatory Verifications - FS).

MSA:
For SSI recipients, verify the client's receipt of SSI and the Federal Benefit Rate used to determine the client's SSI benefits.

For non-SSI recipients, verify:

● Assets.
● Social Security number of all people applying for assistance. See 0010.18.03 (Verifying Social Security Numbers).

● Basis of eligibility (age, blindness, or disability). See 0010.18.05 (Verifying Disability/Incapacity - Cash).

GA:
Verify:

● Assets.

● Identity of each person applying for assistance.

● Age, if required to determine eligibility.

● State residence. See 0011.06 (State Residence), 0029.29 (Safe At Home Program).

● GA eligibility basis. See 0013.15 (GA Bases of Eligibility).

● Basis of claim for exemption from SNAP E&T participation (GA category).

● Date and reason of employment termination, and date last paid. Verify at the point of employment termination for participants, and for any employment terminated within 90 days of application for applicants.

● Social Security number. See 0010.18.03 (Verifying Social Security Numbers).

GRH:
Follow MSA for aged, blind, and disabled participants. Follow GA for all other adults.
Attending school may affect a person's eligibility.

**MFIP:**
An 18-year old minor child may continue to be eligible until age 19, if he/she is:

- A full-time student in a secondary school. For the definition of FULL-TIME STUDENT, see 0002.27 (Glossary: FSET...) OR
- Pursuing a full-time secondary level course, vocational or technical training designed to prepare students for gainful employment.

See MINOR CHILD in 0002.41 (Glossary: Medically Necessary...).

Custodial parents under 20 may be required to attend secondary school to be eligible. See 0012.06 (Requirements for Caregivers Under 20), 0028.12 (Education Requirements).

**WB:**
Follow MFIP, EXCEPT that custodial parents under 20 must be working the required number of hours. See 0013.04 (WB Bases of Eligibility).

**DWP:**
Follow MFIP, except that custodial parents under 20 with an education option in their Employment Plan are not eligible for DWP and should be considered for MFIP eligibility, unless part of a 2-parent family.

**SNAP:**
Students must meet at least 1 of the following criteria:

- Under age 18 or age 50 or over.

- Physically or mentally unable to work.

- Attending a school that is not an institution of higher education, or attending an institution of higher education less than half time. Refer to the Guide to Determine Institution of Higher Education Status for the Food Support Program.

- Employed and paid for at least 20 hours per week, or self-employed for a minimum of 20 hours per week and paid in cash at the equivalent of at least 20 times the federal minimum hourly wage. This includes on-the-job training and paid internships or apprenticeships.

- Participating in a state- or federally-financed work study program. This exemption begins the date the person is approved for work study or the beginning of the school year, whichever is later, and continues over the period the work study is intended to cover, unless the student rejects or refuses a work study assignment.

- Responsible for the physical care of a dependent household member under the age of 6.

- Responsible for the physical care of a dependent household member from the ages of 6 through 11 when adequate child care is not available.
• A single parent attending an institution of higher education full-time with responsibility for a child under age 12 without regard to availability of child care.

• Assigned to an institution of higher education through a program under the Workforce Investment Act (WIA), Trade Adjustment Assistance (TAA) or Trade Readjustment Assistance (TRA), or Supplemental Nutrition Assistance Program Employment & Training (SNAP E&T).

• Participating in an on-the-job training program in which the person is involved in productive labor, is paid by an employer while learning job skills, and the employer is reimbursed for the wages. If the participant is involved solely in classroom training for a month, that month does not count as on-the-job training.

All other students are ineligible for SNAP.

**MSA, GRH:**
Student status does not affect eligibility.

**GA:**
Being a student does not make a person ineligible for GA. The following people are required to attend school to get or maintain eligibility:

• Displaced homemakers. See 0013.15.33 (GA Basis - Displaced Homemakers).

• High school students over age 18 whose primary language is not English. See 0013.15.48 (GA Basis - English Not Primary Language).
Receipt of other assistance affects eligibility for all programs.

**MFIP:**

**PERSONS WHO ARE NOT ELIGIBLE FOR MFIP:**

- A person who receives adoption assistance payments, SSI, or MSA is not eligible for MFIP in the same month.

- A person whose needs have been provided for in another state or from a tribal TANF program, in whole or in part by county, state, or federal dollars during a month, is not eligible to receive MFIP for that month. See 0029.06.24.03 (Tribal TANF-Mille Lacs Band of Ojibwe).

- A child placed in Minnesota under the Interstate Compact on the Placement of Children (ICPC) is not eligible for MFIP. See INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN in 0002.33 (Glossary: Independent...).

- A unit member is ineligible for the food portion of MFIP for any month in which SNAP benefits have been issued. Remove the food portion of the MFIP grant for any person who has already received SNAP benefits. See 0014.06 (Who Must Be Excluded From Assistance Unit), 0020.09 (MFIP/DWP Assistance Standards).

- A caregiver cannot receive an MFIP grant for his/her own child(ren) and also receive a separate MFIP grant for a relative child.

**PERSONS WHO MAY BE ELIGIBLE FOR MFIP:**

- Residents of a GRH facility may receive MFIP (cash and food portion) as long as the GRH setting allows the parent and children to reside there together.

- Residents of licensed treatment facilities are not eligible unless the following criteria are met:
  - A minor child resides in the facility with the parent OR the resident is pregnant.
  - All other eligibility factors are met.
  - The facility is funded by Rule 24 or a managed care plan.

Facilities in Minnesota which are licensed by Rule 31 and funded by Rule 24 allow a parent receiving treatment services to have a dependent child(ren) reside with the parent in the facility. Rule 25 is an assessment rule, not a funding rule. See Rule 24 and Rule 31 in 0002.59 (Glossary: RSDI...).

Facilities licensed by Rule 31 and funded by Rule 24 include but are not limited to:

- Journey Home, in Benton County.

- Pathway House, Inc., in Olmsted County. Also see 0006.18.03 (Excluded Time - Entering), 0006.18.06 (Excluded Time - Leaving), 0011.06.03 (State Residence - Excluded Time), 0011.06.06 (State Residence - Interstate Placements).

- A child placed in Minnesota under the Interstate Compact for Juveniles (ICJ) may be eligible for MFIP if they meet MFIP eligibility requirements. See INTERSTATE COMPACT FOR JUVENILES in 0002.33 (Glossary: Independent...).
• A person who receives foster care is not eligible for MFIP in the same month, EXCEPT that an applicant whose needs were met through foster care for the 1st part of an application month is eligible to receive MFIP for the remaining part of the month in which the applicant returns home. Consider foster care payments as prorated payments rather than a duplication of MFIP assistance. See 0008.06.06 (Adding a Person to the Unit - Cash).

• A person from 1 MFIP unit who moves in with another MFIP unit cannot be part of the 2nd unit until the 1st full month after the month they join the 2nd unit. See TEMP Manual TE02.10.78 (Duplicate Assistance on MFIP/DWP).

• On Indian reservations where both food portion and the Food Distribution Program (formerly called commodities distribution) are available, units may choose which program to participate in. The Uncle Harry unit and MFIP unit must make the same choice. Units certified to get commodities on the 1st day of the month may not get the food portion that month. The 1st month the unit is eligible is the month after the month of termination from the Food Distribution Program.

• A person from a unit receiving SNAP only (no cash assistance) who moves in with an MFIP unit may be added to the unit the 1st day of the month the person enters the household. The person would not be eligible for the food portion due to duplicate assistance for the month added. See 0008.06.06 (Adding a Person to the Unit - Cash).

For information on the receipt of assistance during a foster care trial home visit, see 0029.06.12 (Foster Care).

WB:
A family cannot receive MFIP or DWP in the same month WB is received. For more information, see 0014.03.03 (Determining the Cash Assistance Unit).

DWP:
A person who receives on-going monthly adoption assistance payments, SSI, or MSA is not eligible for DWP in the same month.

A person whose needs have been provided for in another state, in whole or in part by county, state, or federal dollars during a month, is not eligible to receive DWP for that month.

A person who receives foster care is not eligible for DWP in the same month, EXCEPT that an applicant whose needs were met through foster care for the 1st part of an application month is eligible to receive DWP for the remaining part of the month in which the applicant returns home. Consider foster care payments as prorated payments rather than a duplication of DWP assistance. See 0008.06.06 (Adding a Person to the Unit - Cash).

A child placed in Minnesota under the Interstate Compact on the Placement of Children (ICPC) is not eligible for DWP. See INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN in 0002.33 (Glossary: Independent…).

A child placed in Minnesota under the Interstate Compact for Juveniles (ICJ) may be eligible for DWP if they meet DWP eligibility requirements. See INTERSTATE COMPACT FOR JUVENILES in 0002.33 (Glossary: Independent…).

A person from 1 DWP unit who moves in with another DWP unit cannot be part of the 2nd unit until the 1st full month after the month they join the 2nd unit.

SNAP:
People cannot participate as a member of more than 1 SNAP unit or in more than 1 county in any month. People living in battered women's shelters may receive SNAP twice in a month if the certified unit that included them contains the person who abused them. The shelter residents may receive an additional allotment as a separate unit only once a month.
Indian reservations may have both SNAP and the Food Distribution Program on Indian Reservations (FDPIR) available. SNAP units may choose which program to participate in. Units certified to get FDPIR cannot also get SNAP in the same month they received FDPIR. The 1st month units are eligible to receive SNAP is the month after the month of termination from FDPIR. SNAP units who receive $0 benefits may participate in the FDPIR program. See 0029.07.15 (Food Distribution Program-Indian Reservation).

Other food distribution programs are the Mothers and Children (MAC) program and the Nutrition Assistance Program for Seniors (NAPS). Both of these programs are part of the Commodity Supplemental Food Program, but are not the same as FDPIR. People who participate in MAC or NAPS may also get SNAP. See 0029.07.12 (Commodity Supplemental Food Program).

When a unit applies in Minnesota, and another state has issued SNAP for that month, but the unit says it did not get the SNAP benefits issued by the other state:

- If no members of the unit remain in the other state, and the case is NOT EXPEDITED, check with the other state to see when and if the SNAP case has been closed.
  
  If the case IS EXPEDITED, try to confirm non-receipt with the other state, but do not delay issuing SNAP pending receipt of information. Issue SNAP based on the unit's written statement that they did not get their benefits in the other state, and that they understand the penalty for fraud.

  If you find out later that a client actually did get SNAP in more than 1 state or county, the state or county which issued SNAP later must set up a claim. See 0025 (Benefit Adjustments and Recovery).

- If some of the previous unit members remain in the other state, DO NOT issue SNAP to the members who moved to Minnesota. People now in the unit who were not in the unit in the other state may be eligible.

When confirmation is received that the SNAP has been closed in the previous state, SNAP may be approved in Minnesota, if all other eligibility factors have been met. For a list of other states’ SNAP contacts, see the National Directory of Contacts.

**MSA:**

People may not receive MSA from more than 1 county in a month.

Payments issued to a battered women's shelter do not affect the eligibility or grant amount of an MSA applicant or participant. See 0020.18 (GA Assistance Standards).

**GA:**

People are not eligible for GA if they are eligible for a federally-funded program. This includes people receiving SSI, receiving or eligible for MFIP, or receiving EA for current maintenance needs. This prohibition applies only if the federal program is currently funded so the people, if eligible, can receive benefits from it.

**GRH:**

People may not receive GRH from more than 1 county in a month.
MFIP:
Federal rules limit public assistance eligibility for caregivers to 60 months in their lifetime. Minnesota began counting months toward the 60-month lifetime limit 7-1-97 for receipt of Family GA and Transitional AFDC.

The 60-month limit is per caregiver receiving MFIP, and the months do not have to be consecutive. Count or exclude months as noted below. The counted and exempt months include months in which a caregiver received TANF benefits from another state, even if before 7-1-97 (states may have chosen earlier start dates and shorter limits for their TANF programs).

Count months for MFIP cases with a caregiver who has a fraud disqualification beginning on or after 10-1-07.

NOTE: The same banking of months and exception policies that apply to MFIP caregivers also apply to disqualified caregivers. For example, months do not count for either an MFIP caregiver or a disqualified caregiver who is age 60 or older.

The following are EXCEPTIONS to counting a month toward the 60-month time limit. If a caregiver meets 1 of the exceptions, that month does NOT COUNT toward the 60-month limit.

- Months in which the caregiver participated in the MFIP Field Trials, with a random assignment code on the STAT/MEMB panel of E1, E2, R1, C1, or C2.

- Living on reservations with a "not employed" rate of at least 50% when the grant is issued. See TEMP Manual TE02.05.74 (60-Month MFIP Limit & Indian Reservations) for a list of these reservations.


- Caregivers age 60 or older who have not already exceeded the 60-month time limit. Stop the clock the 1st of the month following the month the participant turns 60. Participants who are age 60 or older will not receive the 60-month warning notice referenced below, unless there is a 2nd MFIP caregiver in the household who is not exempt from the 60-month time limit.

- Minor caregivers complying with an education plan. See 0012.06 (Requirements for Caregivers Under 20), 0028.12 (Education Requirements).

- Custodial parents age 18 or 19 who are cooperating with education requirements of their Employment Plan. See 0012.06 (Requirements for Caregivers Under 20), 0028.12 (Education Requirements).

- Emancipated minors who are cooperating with education requirements of their Employment Plan. See 0012.06 (Requirements for Caregivers Under 20), 0028.12 (Education Requirements).

- Any month the unit chooses to opt out of the cash portion of the MFIP grant. See 0014.03.03.03 (Opting Out of MFIP Cash Portion).

- Any month the unit receives ONLY the food portion of the grant. This includes if the unit is sanctioned and receives only the food portion. However, see below regarding months that include a vendor payment or a recoupment.

- Any month the unit receives a grant for minor children only. This includes any month caregivers are ineligible or disqualified.
Any month the unit would have received only the FOOD portion of the grant (prior to recoupment).

**DO COUNT** months toward the 60-month limit in these situations, unless exempt above:

- Minnesota state-funded months for caregivers who received Family GA.
- Minnesota state-funded months for certain non-citizens who are ineligible for TANF-funded assistance. See 0011.03.03 (Non-Citizens - MFIP/WB/DWP Cash).
- Minnesota state-funded months for participants receiving Family Stabilization Services (FSS).
- Minnesota state-funded months for 2-parent households.
- Months of assistance the client received from a Tribal TANF program, whether received in Minnesota or another state.
- If there is a vendor payment or recoupment that reduces the CASH portion of the grant to $0.
- The months following the month the 19-year old caregiver turns 20.
- The months following the month the caregiver under 20 obtains a secondary school diploma or GED.
- Months when 18- and 19-year old caregivers do NOT have an education component in their EP.
- Months when minor caregivers are sanctioned for non-cooperation with educational requirements.
- Months a person receives MFIP cash assistance and later is determined to be ineligible. That period of time is considered to have been months of assistance.
- Months a caregiver is disqualified from MFIP due to an intentional program violation (IPV). This applies only to caregivers disqualified effective 10-1-07 or later. See TEMP Manual TE02.08.169 (MFIP IPV Fraud Disqualification) for information on how to process these cases.

Use the STAT/TIME panel in MAXIS to record the history of a caregiver’s receipt of assistance toward the 60-month limit. With the exception of caregivers disqualified due to IPV, this tracking triggers MAXIS to mail person-specific notices regarding the limits. The 1st notice is sent to participants in the 48th month of cash assistance. Subsequent notices are sent between the 10th and the 15th of each month after that, telling participants the number of cash assistance months they have left. See TEMP Manual TE02.08.169 (MFIP IPV Fraud Disqualification), TE13.022 (STAT/TIME), TE15.06 (MFIP Time Limit Notice). Also see TE15.04 (State Contacts - TANF Months/FS) for other states’ TANF effective dates, time limits, and instructions for specific states.
When clients move to or from Minnesota:

- When a client moves to another state, the other state will call to confirm the number of months of assistance received toward the 60-month limit. Provide only the number of TANF-funded months a client has used, unless the other state inquires about state-funded assistance.

- When a client moves to Minnesota from another state, count only the TANF-funded months on assistance toward the 60-month limit. Do NOT count months when the unit received benefits only from a state-funded assistance program.

Certain people who have reached their 60-month lifetime limit may be eligible for an EXTENSION OF MFIP under a hardship extension category. See 0011.33 (MFIP Hardship Extensions).

During the last 12 months of MFIP there are specific requirements for determining whether a participant is eligible for an extension. See 0011.30.03 (MFIP Transition Period), 0011.30.06 (180 to 60 Days Before MFIP Closes).

When MFIP is closed at the end of 60 months, you must determine if the family is eligible for other types of assistance, including health care and SNAP. See 0005.09.06 (When Not to Require Completion of a CAF), 0008.06.01 (Implementing Changes - Program Provisions), and the Health Care Programs Manual. Workers also should provide information on how to apply for child care assistance.

Also see 0028.30.04 (Post 60-Month Empl. Services Sanctions).

**WB, SNAP, MSA, GA, GRH:**
No provisions.

**DWP:**
The receipt of DWP does not count toward the 60-month time limit, BUT families are NOT eligible for DWP if a caregiver has reached the 60-month time limit.
Procedural eligibility covers mandatory requirements other than income 0011 (Technical Eligibility), 0015 (Assets), 0017 (Determining Gross Income), 0018 (Determining Net Income).

Some programs require Social Security numbers. See 0012.03 (Providing/Applying for an SSN).

Some minor parents have special obligations. See 0012.06 (Requirements for Caregivers Under 20).

Some clients must cooperate with Employment Services programs. See 0028 (Employment Services).

Clients must pursue other forms of benefits and payments. See 0012.12 (Applying for Other Benefits), 0012.27 (Cooperating to Get Tort Liability Payments).

Disability determinations have various purposes. See 0012.15 (Incapacity and Disability Determinations).

Clients must cooperate in getting and providing information on monetary support. See 0012.18 (Assigning Rights to Support), 0012.21 (Responsible Relatives Not in the Home).

Failure to follow requirements in this section will affect eligibility, benefit amount, or benefit payment method.
MFIP:
There are special educational and social service requirements for caregivers under age 20 who are birth or adoptive parents of a
minor child in the home (custodial parents). In addition, there are special living arrangement requirements for minor caregivers or
pregnant women under age 18.

EDUCATIONAL AND SOCIAL SERVICES REQUIREMENTS

Unless exempt, caregivers under age 18 without a high school diploma or GED must attend school. See 0028.12 (Education
Requirements).

Counties must allow 18- and 19-year old parents who do not have a high school diploma or its equivalent to choose an
Employment Plan (EP) with an education option.

An education option means the EP includes education requirements (high school or its equivalent). The 60-month clock STOPS
for 18- and 19 year old parents who choose this option. Plans that include both secondary school attendance and work fall under
this option, see 0017.15.15 (Income of Minor Child/Caregiver Under 20).

Without an education option means the EP includes activities under the regular Employment Services track. The 60-month clock
DOES NOT stop for 18- and 19 year old parents who choose this option, see 0017.15.15 (Income of Minor Child/Caregiver Under
20).

County and Employment Services staff working with 18- and 19-year old parents should explain the new options and make
specific efforts to inform those who are in sanction for not attending school that this may be a way to come into compliance.

Refer minor caregivers under age 18 to social services within 30 days of approving MFIP, or to the agency with whom your county
has contracted to provide minor caregiver services. The minor caregiver must cooperate in developing and participating in an
educational progress assessment and an Employment Plan (EP). See 0028.06.03 (Who Must Participate in Empl.
Services/FSET), 0028.12 (Education Requirements), 0028.15 (Employment Plan (EP)).

Emancipated minor parents do not have the option to choose between education and employment. If they DO NOT have a high
school diploma or GED they are subject to education requirements. If they HAVE a diploma or GED, they are subject to the
regular employment services track. For the definition of emancipated minor, see 0002.19 (Glossary: Early...).

Follow the sanction procedure in 0028.30 (Sanctions for Failure to Comply - Cash) for minor caregivers and 18- and 19 year old
caregivers who fail to cooperate with education or social service requirements.

LIVING ARRANGEMENT REQUIREMENTS

Inform minor caregivers or pregnant women under age 18 of living arrangement requirements both orally and in writing. Use the
brochure MFIP For Minor Caregivers (DHS-3238). Advise them of the possible exemptions.

Minor caregivers or pregnant women under age 18 are required to live with a parent, legal guardian, other appropriate adult
relative or other caregiver, or in an adult-supervised supportive living arrangement in order to receive MFIP.

NOTE: The living arrangement requirements DO NOT apply to emancipated minors.

When 2 unmarried minor caregivers live together with their minor child:

- At least 1 minor caregiver must meet the living arrangement requirement in order for the minor child along with the minor
caregiver to receive MFIP. The minor caregiver who does not meet the living arrangement requirement is not eligible for MFIP
but may be eligible for Uncle Harry Food Support.

If neither minor caregiver meets the living arrangement requirement, there is no MFIP eligibility for the unit.
- If BOTH minor caregivers meet the living arrangement requirement, they are both eligible along with the child to receive MFIP. In addition, they must establish paternity by completing the Recognition of Parentage (ROP) or by adjudication.

- When the 2 minor caregivers live with 1 of the caregiver’s parent(s), the minor caregiver who is not related to the parental household is not eligible for MFIP, unless the county has approved this living arrangement. If the county does not approve the living arrangement, the unrelated minor caregiver is not eligible for MFIP but may get Uncle Harry Food Support.

Also see 0014.03.03 (Determining the Cash Assistance Unit).

If a minor caregiver or pregnant woman under age 18 claims that 1 of the exemptions listed below applies to him/her, assist the minor in obtaining the necessary verifications. Minor caregivers who meet 1 of the following criteria are exempt from the living arrangement requirements:

- The minor caregiver has no living parent, other appropriate adult relative, or legal guardian whose whereabouts are known.

- No living parent, other appropriate adult relative, or legal guardian of the minor parent allows the minor parent to live in his/her home. If a minor parent claims this exemption, refer the case to social services for an evaluation. Use the Referral of Minor Parent to Social Services (DHS-2882).

- The minor caregiver has lived apart from his/her own parent or legal guardian for a period of at least 1 year before either the birth of the minor child or the minor parent's application for MFIP.

- The physical or emotional health or safety of the minor caregiver or minor child would be jeopardized if the minor caregiver and minor child resided in the same residence with the minor caregiver's parent(s), other appropriate adult relative, or legal guardian. If a minor caregiver claims this exemption, use the DHS-2882 to refer the case to Child Protection Services for an evaluation. A new referral is not necessary if one has been made within the last 6 months, unless there has been a significant change in circumstances which justifies a new referral and determination.

- An adult-supervised supportive living arrangement is not available for the minor caregiver and the minor child in the county in which the minor caregiver currently resides. If such an arrangement becomes available within the county, the minor caregiver and child must reside in that arrangement.

If a minor caregiver is not living with a parent or legal guardian due to meeting an exemption in the 1st, 2nd, or 4th bullet above, the minor caregiver must reside, when possible, in an adult-supervised supportive living arrangement. Social services will help the minor caregiver (in consultation with the family of the minor caregiver, when appropriate) locate an appropriate adult supervised supportive living arrangement.

When a minor caregiver and minor child live with the minor caregiver's parent, another adult relative, a legal guardian or legal custodian, or in an adult-supervised supportive living arrangement, MFIP must be paid, when possible, in the form of a protective payment on behalf of the minor caregiver and minor child. See 0024.09 (Protective and Vendor Payments).

Re-evaluate the living arrangement at recertification and when there is a change in living arrangement or household composition. The living arrangement requirement applies ONLY through the month of the minor parent's 18th birthday.

**WB, SNAP, MSA, GA, GRH:**

No provisions.
DWP:
Caregivers 18 or 19 years of age WITHOUT a high school diploma or its equivalent who choose to have an Employment Plan WITHOUT an education option, follow MFIP. If only 1 parent in a 2-parent family meets these criteria, the family must participate in DWP. For more information on caregivers under 20, see 0013.05 (DWP Bases of Eligibility).
MFIP: For MFIP basis of eligibility, see 0013.03 (MFIP Bases of Eligibility).

Assistance units are eligible for state-funded MFIP cash portion if the unit includes:

- An eligible caregiver over age 60. These caregivers also meet Family Stabilization Services (FSS) eligibility. OR
- An eligible caregiver who is a victim of family violence. These caregivers also meet Family Stabilization Services (FSS) eligibility. OR
- An eligible minor caregiver without a high school diploma or GED and cooperating with an ES plan. OR
- An eligible 18- or 19-year old caregiver with no high school diploma or GED and who is cooperating with an ES plan that includes an education option. See 0012.06 (Requirements for Caregivers Under 20). An eligible 18- or 19-year old caregiver who is cooperating with an ES plan that includes a work option is eligible for federally-funded MFIP. OR
- Two eligible parents. To determine who should be included in the household, see 0014.03 (Determining the Assistance Unit), 0014.03.03 (Determining the Cash Assistance Unit), 0014.06 (Who Must Be Excluded From Assistance Unit).

OR

- Households which contain 2 or more caregivers, where either:
  - One caregiver is removed due to a post-60 month sanction or not meeting an extension category. (Fail the POST-60 REMOVAL person test on MFIP and are assigned a (J) membership code).
  - One or more caregivers are disqualified due to failing FRAUD, MINOR LIVING ARRANGEMENT or SSN COOPERATION (assigned an (F) membership code on MFIP).

OR

- Households who are receiving Family Stabilization Services. For the definition of Family Stabilization, see 0002.23 (Glossary: Fair Hearing...).

Also, certain non-citizens may be eligible for state-funded MFIP. See 0011.03 (Citizenship and Immigration Status).

WB, SNAP, MSA, GA, GRH:

No provisions.

DWP:

Eligible caregivers who qualify for Family Stabilization Services meet the unlikely to benefit criteria and should be converted to MFIP. See 0008.06.24 (DWP Conversion or Referral to MFIP). Also see 0002.23 (Glossary: Fair Hearing...) for the definition of Family Stabilization Services.
People who apply for a program and are not eligible may be eligible for other assistance as a separate assistance unit. See 0014.03 (Determining the Assistance Unit).

Also see 0014.06 (Who Must Be Excluded From Assistance Unit) for people who must be excluded from the unit because they are not eligible or are disqualified due to non-cooperation with a program procedure.

**MFIP:**

Some people MUST be in the same assistance unit when they live together. These people are “Mandatory Unit Members”. To determine who meets the definition of family, see 0013.03 (MFIP Bases of Eligibility).

Mandatory members of the unit are:

- A child who meets the definition of a minor child and who has a parental caregiver(s). See MINOR CHILD in 0002.41 (Glossary: Medically Necessary...).

- The minor child’s minor siblings, minor half-siblings, and minor step-sibling(s), whether birth or adopted.

  **NOTE:** There must be a relationship from the caregiver to the minor child for that child to be eligible for MFIP even if the child is a sibling or half sibling to the other children in the household.

- The minor child’s birth, step-, or adoptive parent(s). If there is no parent in the minor child’s home, see below for who may be optional caregivers.

- A pregnant woman.

- The spouse of a pregnant woman.

- A pregnant minor with no other children, who receives assistance with her parents, must remain as part of her parent’s unit until after the birth of her child.

- When the parent who normally resides with the family is living and working away from the home (or the family) and there is no marital or relationship breakdown, consider that parent a mandatory unit member. When a parent does not live in Minnesota, he/she is considered an ineligible mandatory unit member because the parent is not physically present in Minnesota. Count total income and assets of all unit members, including the members away from the family, when determining the unit’s eligibility and benefit level. See 0015.48 (Whose Assets to Consider), 0016 (Income From People not in the Unit). This is not considered temporary absence.

  Do **NOT** include the parent who is away from the home on active military duty as a member of the assistance unit, but count any income and assets the person on active duty makes available to the family. See 0015.48 (Whose Assets to Consider), 0017.06 (Excluded Income), 0017.12.03 (Unearned Income), 0017.15.93 (Military Income).

Some people may choose to be in the assistance unit when they live with mandatory members of the unit. These people are “Optional Unit Members”. Optional members are:

- A non-parental eligible caregiver and the spouse of the non-parental eligible caregiver, if there is not a natural or adoptive parent or stepparent in the minor child’s home. If an optional caregiver chooses to be in the unit, that person’s spouse must also be in the unit. Optional caregivers who choose not to be in the unit may be eligible to receive SNAP as a separate unit. See 0022.24 (Uncle Harry Food Support Benefits).
Any of the following adults who live with the child and give the child care and support may be an optional caregiver:

- Grandparent, great-grandparent, great-great-grandparent, or great-great-great-grandparent.
- Sister or brother.
- Half-sister or half-brother.
- Step-sister or step-brother.
- Uncle, great-uncle, or great-great-uncle, or great-great-great-uncle.
- Aunt, great-aunt, or great-great-aunt, or great-great-great-aunt.
- First cousin or first cousin once removed.
- Niece or nephew.
- Legal custodian or legal guardian. See LEGAL CUSTODIAN and LEGAL GUARDIAN in 0002.37 (Glossary: Learning...).
- A spouse or former spouse of any of the above even after the marriage ends by death or divorce.

**NOTE:** This may include individuals whose parental rights have been terminated but are now caregivers for their former children as long as they meet any category of MFIP caregiver as listed in the sub-bullets above.

- Other minor children who are not mandatory members, such as nieces, nephews, cousins, etc.

- A relative foster care provider who is receiving federal, state, or local foster care payments and who meets the definition of an MFIP caregiver is eligible even if the only minor child living in the home is receiving foster care maintenance payments. If the provider is living with a spouse, the spouse must also be included in the provider’s unit. See 0020.09 (MFIP/DWP Assistance Standards).

- A caregiver receiving MFIP with his/her own child(ren) may leave MFIP with his/her own children and begin receiving WB. The caregiver may continue to receive an MFIP child only grant for the relative child.

A minor caregiver and his or her children must be a separate assistance unit. See 0012.06 (Requirements for Caregivers Under 20). When the parents of the minor caregiver also have other minor children, the parents and the other minor children are a separate unit.

Adult caregivers of a minor caregiver are also eligible to be a separate assistance unit from the minor caregiver and the minor caregiver’s child when:
● The adult caregiver or caregivers have no other minor children in the household.
   AND
● The minor caregiver and the minor caregiver’s child are living with the adult caregiver or caregivers.
   AND
● The minor caregiver and the minor caregiver’s child receive MFIP or WB, or would be eligible to receive MFIP, if they were not receiving SSI benefits.

For information on shared households, see 0020.09 (MFIP/DWP Assistance Standards).

Units may choose to "opt out" of the cash portion of the MFIP grant. See 0014.03.03.03 (Opting Out of MFIP Cash Portion).

MFIP and SNAP unit composition rules are different. Some households will have people who are part of the SNAP unit but are not part of the MFIP unit.

● Follow the rules in 0011 (Technical Eligibility) and 0014.06 (Who Must Be Excluded From Assistance Unit) to identify members of the MFIP unit.

● Follow the rules in 0014.03.06 (Determining the Food Support Unit) and 0014.06 (Who Must Be Excluded From Assistance Unit) to identify members of the SNAP unit.

Any person who would be a member of a SNAP unit but is not a member of the MFIP unit (as opposed to being disqualified or ineligible) may receive SNAP benefits if they are otherwise eligible (commonly referred to as "Uncle Harry" cases). See 0022.24 (Uncle Harry Food Support Benefits).

WB:
Some people MUST be in the same assistance unit when they live together. These people are “Mandatory Unit Members”. To determine who meets the definition of family, see 0013.04 (WB Bases of Eligibility).

Mandatory members of the unit are:

● A child who meets the definition of a minor child and who has a parental caregiver(s). See MINOR CHILD in 0002.41 (Glossary: Medically Necessary...).

● The minor child’s minor siblings, minor half-siblings, and minor step-sibling(s), whether natural or adopted.
   
   NOTE: There must be a relationship from the caregiver to the minor child for that child to be eligible for WB even if the child is a sibling or half sibling to the other children in the household.

● The minor child’s natural, step-, or adoptive parent(s). If there is no parent in the minor child’s home, see below for who may be a non-parental eligible caregiver and the non-parental eligible caregiver’s spouse.

● A pregnant woman.

● The spouse of a pregnant woman.

● A pregnant minor with no other children, who receives assistance with her parents, must remain as part of her parent’s unit until after the birth of her child.
When the parent who normally resides with the family is living and working away from the home (or the family) and there is no marital or relationship breakdown, consider that parent a mandatory unit member. When a parent does not live in Minnesota, he/she is considered an ineligible mandatory unit member because the parent is not physically present in Minnesota. Count total income and assets of all unit members, including the members away from the family, when determining the unit’s eligibility. See 0015.48 (Whose Assets to Consider), 0016 (Income From People not in the Unit). This is not considered temporary absence.

Do NOT include the parent who is away from the home on active military duty as a member of the assistance unit, but count any income and assets the person on active duty makes available to the family. See 0015.48 (Whose Assets to Consider), 0017.06 (Excluded Income), 0017.12.03 (Unearned Income), 0017.15.93 (Military Income).

Any of the following adults who live with the child and give the child care and support may be a non-parental caregiver:

- Grandparent, great-grandparent, great-great-grandparent, or great-great-great-grandparent.
- Sister or brother.
- Half-sister or half-brother.
- Step-sister or step-brother.
- Uncle, great-uncle, or great-great-uncle, or great-great-great-uncle.
- Aunt, great-aunt, or great-great-aunt, or great-great-great-aunt.
- First cousin or first cousin once removed.
- Niece or nephew.
- Legal custodian or legal guardian. See LEGAL CUSTODIAN and LEGAL GUARDIAN in 0002.37 (Glossary: Learning...).
- A spouse or former spouse of any of the above even after the marriage ends by death or divorce.

NOTE: This may include individuals whose parental rights have been terminated but are now caregivers for their former children as long as they meet any category of WB caregiver as listed in the sub-bullets above.

A relative foster care provider who is receiving federal, state, or local foster care payments and who meets the definition of a WB caregiver is eligible even if the only minor child living in the home is receiving foster care maintenance payments. If the provider is living with a spouse, the spouse must also be included in the provider’s unit. See 0020.10 (WB Assistance Standard).

A minor caregiver and his or her children must be a separate assistance unit. See 0012.06 (Requirements for Caregivers Under...
20). When the parents of the minor caregiver also have other minor children, the parents and the other minor children are a separate unit.

Adult caregivers of a minor caregiver are also eligible to be a separate assistance unit from the minor caregiver and the minor caregiver’s child when:

- The adult caregiver or caregivers have no other minor children in the household.
- The minor caregiver and the minor caregiver’s child are living with the adult caregiver or caregivers.
- The minor caregiver and the minor caregiver’s child receive MFIP, or would be eligible to receive MFIP, if they were not receiving SSI benefits.

**DWP:**
For information on family units eligible for DWP, see 0013.05 (DWP Bases of Eligibility).

Do NOT include the parent who is away from the home on active military duty as a member of the assistance unit, but count any income and assets the person on active duty makes available to the family. See 0015.48 (Whose Assets to Consider), 0017.06 (Excluded Income), 0017.12.03 (Unearned Income), 0017.15.93 (Military Income). Also see TE02.10.90 (Military Families Receiving FS, MFIP or DWP).

When the parent who normally resides with the family is living and working away from the home (or the family) and there is no marital or relationship breakdown, consider that parent a mandatory unit member. When a parent does not live in Minnesota, he/she is considered an ineligible mandatory unit member because the parent is not physically present in Minnesota. Count total income and assets of all unit members, including the members away from the family, when determining the unit’s eligibility and benefit level. See 0015.48 (Whose Assets to Consider), 0016 (Income From People not in the Unit). This is not considered temporary absence.

**SNAP:**
See 0014.03.06 (Determining the Food Support Unit). Also see MFIP provisions above.

**MSA, GRH:**
Each participant is a separate assistance unit.

**GA:**
A married couple who have no minor children or living apart from any children are an assistance unit.

A person who is unmarried and has no minor children or living apart from any spouse or children is an assistance unit.
Some people must be excluded from the assistance unit because they are not eligible. See the program provisions below and any cross-referenced sections.

Some people are disqualified due to non-cooperation with a program procedure. See DISQUALIFIED PERSON in 0002.17 (Glossary: Displaced Homemaker...). Exclude people who are disqualified from a program from any assistance units for that program until the period of disqualification ends. Apply the disqualification either for a specified period of time or until the client complies with program requirements.

Non-citizens may or may not be eligible to be in the unit. See 0011.03 (Citizenship and Immigration Status).

A mandatory unit member who is disqualified cannot receive benefits, but the person's income must be deemed to the unit. See 0016 (Income From People Not in the Unit).

**MFIP, WB, DWP:**

Exclude the following people from all units:

- SSI or MSA participants.

- Children living with the unit and receiving local, state, or federal foster care.

- Children living with the unit and receiving adoption assistance payments.

- Children covered under the Interstate Compact on the Placement of Children (ICPC). See INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN in 0002.33 (Glossary: Independent...).

Also exclude the following people who are disqualified until the period of disqualification ends:

- People who fail to provide an SSN. See 0012.03 (Providing/Applying for an SSN).

- Parole violators. See 0011.27.06 (Parole Violators).

- Fleeing felons. See 0011.27.09 (Fleeing Felons).

- People convicted of fraud. See 0025.24 (Fraudulently Obtaining Public Assistance).

- People convicted of making a fraudulent statement regarding residence in order to receive duplicate assistance from 2 or more states. See 0011.27.12 (Residency Fraud Conviction).

- For MFIP only: people who do not cooperate with Quality Control. See 0003.06 (Client Responsibilities - Quality Control). These people are ineligible for the food portion of MFIP only. WB and DWP do not have a food portion.

See 0008.06.06 (Adding a Person to the Unit - Cash) to add a previously disqualified or ineligible unit member.
For information on shared households, see 0020.09 (MFIP/DWP Assistance Standards).

SNAP:
In addition, exclude the following people from any SNAP unit:

- Ineligible strikers. See 0011.15 (Strikers).
- Ineligible students. See 0011.18 (Students).
- Non-exempt able-bodied adults who have used up their time-limited eligibility. See 0011.24 (Able-Bodied Adults).
- People whose citizenship is questionable, pending verification. See 0010 (Verification).
- Parole violators. See 0011.27.06 (Parole Violators).
- Fleeing felons. 0011.27.09 (Fleeing Felons).
- People convicted of residency fraud. See 0011.27.12 (Residency Fraud Conviction).
- People convicted of a drug felony who fail random drug testing. See 0011.27.03.01 (Drug Felons - FS).

MSA:
No provisions.

GA:
In addition, exclude from all GA units:

- People eligible for or receiving non-IV-E foster care, IV-E foster care, MFIP, RCA, or adoption assistance.
- People under sanction from MFIP, SSI, or GA for non-compliance with a program requirement.
- People receiving SSI or MSA.
- Parents of adult applicants with whom the applicant resides.
- Drug felons. See 0011.27.03 (Drug Felons).
- Parole violators. See 0011.27.06 (Parole Violators).
WHO MUST BE EXCLUDED FROM ASSISTANCE UNIT

- Fleeing felons. 0011.27.09 (Fleeing Felons).

- People convicted of residency fraud. See 0011.27.12 (Residency Fraud Conviction).

GRH:
Each participant is an assistance unit; there are no other members in the unit.
The policy on how to deem assets of sponsors of immigrants depends on which affidavit of support was executed by the sponsor. There are 2 different affidavits of support (forms 134 and I-864). Each form has its own deeming requirements. The I-134 is not a legally binding document and deeming is not required; the I-864 is a legally binding document and deeming is required. If subject to deeming, obtain a copy of the Affidavit of Support from the immigrant to determine under which affidavit the immigrant entered the country and to determine the type of deeming requirements.

For sponsors who executed the I-134, see 0015.48 06 (Whose Assets to Consider – Sponsors W/I-134).

Count the assets of the sponsor and the sponsor’s spouse UNTIL the immigrant:

- Becomes a naturalized citizen.
  OR
- Earns or can be credited with 40 qualifying work quarters.
  OR
- Leaves the United States permanently.
  OR
- Dies.

Count the assets of both the sponsor and the sponsor’s spouse regardless of whether 1 or both of them signed the affidavit.

EXCEPTIONS TO THE SPONSOR DEEMING REQUIREMENT: Do not deem the sponsor’s assets if the sponsored immigrant:

- Provides a statement or documentation that the immigrant or his/her child(ren) have been battered or subjected to extreme cruelty by the immigrant’s spouse or parent and:
  - The immigrant is NOT living with the batterer.
    AND
  - The need resulting from the battery or cruelty has a substantial connection to the need for the assistance.

This EXCEPTION is limited to 12 months from the date the EXCEPTION is made. This 12 month deferment may be extended ONLY in the case of the sponsor being the batterer, and if there continues to be a need resulting from the battery and cruelty and the battery and cruelty is recognized by a court order (an order for protection) or by an U.S. Citizenship and Immigration Services (USCIS) determination.

- Is without food or shelter as a result of the sponsor’s failure to provide support. Consider this EXCEPTION when the sponsor is unable or failing to provide support or the immigrant is unable to locate the sponsor. To determine if the client is without food or shelter, consider all sources of help available (income plus cash, food, housing, or other help supplied by the sponsor or other people).

This EXCEPTION is limited to 12 months from the date the EXCEPTION is made however additional 12-month periods may be approved.

The immigrant must explain why the sponsor is not providing assistance to the immigrant as required under form I-864. Help the client to obtain a collateral statement or documentation to support the allegations.

If the sponsored immigrant meets the exception of the sponsor deeming requirement due to the sponsor's failure to provide support and is approved for Federal Cash or Federal SNAP benefits under the indigent exemption, the US General Attorney must be notified of the determination. DHS is responsible for reporting this information. County agencies should report the name of the sponsor, sponsored immigrant(s) involved and case number to

DHS, Quality Enhancement Section
P.O. Box 64245 St. Paul
Minnesota 55164-09245.
County agencies may, under section 213A (b)(2) of the Immigration and Nationality Act, sue sponsors in federal or state court to recover the unreimbursed costs of means tested benefits, including the costs of collection and legal fees.

Deeming of assets provisions do not apply to:

- Refugees.
- People granted asylum.
- LPRs who were refugees or asylees.
- People paroled for a period of 1 year.
- Cuban/Haitian Entrants.

**MFIP, WB, DWP, MSA, GA, GRH:**
Deem ALL of the assets of the sponsor and his or her spouse as available to the sponsored immigrant if the immigrant's entrance into the United States was based on an Affidavit of Support (form I-864) executed by the sponsor.

**SNAP:**
To determine whether a unit is categorically eligible or non-categorically eligible, see 0013.06 (FS Categorical Eligibility/Ineligibility).

All assets are excluded for categorically and non-categorically eligible SNAP units. For categorically and non-categorically eligible SNAP units who are sponsored with an I-864, the assets of the sponsor and the sponsor's spouse are not counted.

Count the actual amount of assistance the sponsor provides for indigent immigrants. See INDIGENT IMMIGRANT in 0002.33 (Glossary: Independent...).
To determine the equity value of a vehicle, first determine its fair market value (FMV). The FMV is the value listed in the current NADA Used Car Guide, Midwest Edition. Whether you must use the NADA trade-in or loan value differs by program. See specific program provisions below.

If the car is not listed, accept the client's statement of its value unless questionable. Request a written statement of a vehicle's FMV from a knowledgeable source if the client's statement is questionable, or the client disputes the listed FMV. Do not require a written statement if it will not affect the client's eligibility.

The equity value of a vehicle is the FMV minus any encumbrances.

For procedures on completing the asset panels in MAXIS, see TEMP Manual TE02.10.31 (Jointly Owned Assets).

See 0015.06 (Availability of Assets), 0015.09 (Excluded Assets for Self Support), 0015.39 (Excluded Assets - Vehicles).

**MFIP, WB, DWP:**
To determine the value of a vehicle, use the loan value listed in the current NADA Used Car Guide, Midwest edition.

If you ask the client for a written statement from a licensed motor vehicle dealer of what the dealer would pay for the vehicle, reimburse the client for the cost of getting the statement if it documents a lower value.

If the unit owns 1 vehicle, exclude the 1st $10,000 of the loan value, if the vehicle is not totally excluded under 0015.39 (Excluded Assets - Vehicles). Count any amount above $10,000 towards the unit's asset limit.

When the unit owns more than 1 vehicle, follow these steps:

1. Exclude $10,000 from the loan value of the vehicle with the highest loan value. Count any amount exceeding $10,000 toward the unit’s asset limit.

2. Determine the combined loan value amount of all other vehicles.

3. Exclude $7,500 from the amount in Step 2.

4. Count the remaining amount from Step 3 towards the asset limit.

When determining the value of a vehicle used to transport a disabled unit member, do not count the value of any special equipment.

**SNAP:**
SNAP has no asset test.

**MSA:**
For SSI recipients, no county action required.

For non-SSI recipients due to excess income, use the NADA trade-in value to determine the FMV and equity value of all non-excluded vehicles. Count the equity value of each non-excluded vehicle.

**GA:**
Use the NADA loan value to determine FMV.
When determining the value of a vehicle used to transport a disabled unit member, do not include the value of any special equipment.

A written statement of the vehicle's FMV must be from a car dealer licensed in Minnesota and must state the amount the dealer would pay for the vehicle. Reimburse the client for the cost of any statement the county agency requires.

For the car with the highest equity value, count only the equity value over $1,500 in the unit's net counted assets.

Include the full equity value of all other vehicles in the unit's net counted assets.

**GRH:**
Follow MSA for aged, blind, or disabled clients. Follow GA for all other adults.
See [0016.18](Income of Inel, Parent/Guard. of Minor Crgvr).

### MFIP, WB, DWP:

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### SNAP, MSA, GA, GRH:

No provisions.
The policy on how to deem income of sponsors of immigrants depends on what affidavit of support was executed by the sponsor. There are 2 different affidavits of support (forms I-134 and I-864). Each form has its own deeming requirements. The I-134 is not a legally binding document and deeming is not required; the I-864 is a legally binding document and deeming is required.

For sponsors who executed the I-134, follow the provisions outlined in 0016.21 (Income of Sponsors of Immigrants With I-134).

Count the income of the sponsor and the sponsor’s spouse UNTIL the immigrant:

- Becomes a naturalized citizen.
- OR
- Earns or can be credited with 40 qualifying work quarters.
- OR
- Leaves the United States permanently.
- OR
- Dies.

Count the income of both the sponsor and the sponsor's spouse regardless of whether 1 or both of them signed the affidavit.

There are several EXCEPTIONS to the sponsor deeming requirement. Do not deem the sponsor’s income if the sponsored immigrant:

- Provides a statement or documentation that the immigrant or his/her child(ren) have been battered or subjected to extreme cruelty by the immigrant’s spouse or parent and:
  - The immigrant is NOT living with the batterer.
  - AND
  - The need resulting from the battery or cruelty has a substantial connection to the need for the assistance.

This EXCEPTION is limited to 12 months from the date the EXCEPTION is made. This 12 month deferment may be extended ONLY in the case of the sponsor being the batterer, and if there continues to be a need resulting from the battery and cruelty and the battery and cruelty is recognized by a court order (an order for protection) or by an U.S. Citizenship and Immigration Services (USCIS) determination.

- Is without food or shelter as a result of the sponsor’s failure to provide support. Consider this EXCEPTION when the sponsor is unable or failing to provide support or the immigrant is unable to locate the sponsor. To determine if the client is without food or shelter, consider all sources of help available (income plus cash, food, housing, or other help supplied by the sponsor or other people). This EXCEPTION is generally limited to 12 months from the date the EXCEPTION is made; however, additional 12-month periods may be approved.

If the sponsored immigrant meets the exception of the sponsor deeming requirement due to the sponsor’s failure to provide support and is approved for Federal Cash or Federal SNAP benefits under the indigent exemption, the US General Attorney must be notified of the determination. DHS is responsible for reporting this information. County agencies should report the name of the sponsor, sponsored immigrant(s) involved and case number to:

DHS
FS Quality Assurance and Accountability Section
P.O. Box 64245
St. Paul, MN 55164-0245.

County agencies may, under section 213A (b)(2) of the Immigration and Nationality Act, sue sponsors in federal or state court to recover the unreimbursed costs of means tested benefits, including the costs of collection and legal fees.
Deeming of income provisions do not apply to:

- Refugees.
- People granted asylum.
- LPRs who were refugees or asylees.
- People paroled for a period of 1 year.
- Cuban/Haitian Entrants.

**MFIP, WB, DWP, MSA, GA, GRH:**

Deem ALL of the income of the sponsor and his/her spouse as available to the sponsored immigrant if the immigrant's entrance into the United States was based on an Affidavit of Support (form I-864) executed by the sponsor.

The immigrant must explain why the sponsor is not providing assistance to him/her as required under the form I-864. Help the client to obtain collateral statement or documentation to support the allegations.

**SNAP:**

All income and resources of an immigrant's sponsor and sponsor's spouse who have signed a legally binding affidavit of support are counted as belonging to the immigrant, even if not available.

Do not deem a sponsor's income if any 1 of the following exemptions are met:

- The sponsored immigrant in a SNAP unit does not meet immigration status. See **0011.03.09 (Non-Citizens - FS/MSA/GA/GRH)**.
- The sponsored immigrant is a child under the age of 18. See **0011.03.15 (Non-Citizens - LPR With Sponsors)**.
- The immigrant was in a category that did not require sponsorship as an entry condition, such as, but not limited to, a public interest parolee (PIP), refugee, asylee, or Cuban or Haitian entrant.
- The immigrant receives SNAP as a member of the sponsor's SNAP unit.
- The sponsor is an organization or group as opposed to an individual.
- When an immigrant claims that they have been unable to obtain food and housing, considering their own income, including any cash, food, housing or other assistance provided by other individuals, including the sponsor(s), the immigrant or their authorized representative must understand the purpose of being declared indigent. "Unable to obtain food and housing," means that the sum of all contributions, income, and in kind assistance provided by the sponsor and others does not exceed 130% of the federal poverty income guideline for the unit’s size. See INDIGENT IMMIGRANT in **0002.33 (Glossary: Independent...)**.

This indigent immigrant exemption must be explained to the immigrant and the immigrant must be given the right to refuse the determination of being declared an indigent immigrant. The immigrant must understand the impact of the refusal.

If the immigrant or their authorized representative refuses the indigent immigrant determination, the immigrant will not be determined to be indigent and the sponsor's income and resources will be deemed toward the immigrant's household according to the provisions below.
When a sponsored immigrant is determined by the county to be indigent, deem the actual amount the sponsor provides. Indigence may last up to 12 months and be renewed for additional 12-month periods.

Follow the procedure in the general provisions of this section to notify DHS of the indigent cases including the names of the sponsor and the sponsored immigrant involved.

If the sponsored immigrant is not indigent, then the sponsor deeming rules apply and verification of the sponsor’s total income and resources must be obtained. See 0010.18.18 (Verifying Sponsor Information).

To determine the amount of the deemed sponsor's income:

1. Determine the total gross income of the sponsor and sponsor's spouse. See 0017 (Determining Gross Income).

2. Deduct the following:
   - 20% of the gross earned income.
   - The gross monthly income limit for the sponsor's household size. Include the sponsor, sponsor's spouse, and people who could be claimed as legal dependents on the sponsor's tax return. See 0019.06 (Gross Income Limits).

3. Divide the remaining income by the number of immigrants sponsored. Count this amount available to each sponsored person for income eligibility tests and benefit calculations.

Cash contributions received from the sponsor must be verified.
MFIP:
Count up to $50 of the value of public housing, Housing and Urban Development (HUD) project-based properties, and Housing Choice Voucher (Section 8) rental subsidies provided through HUD, as unearned income toward the cash portion of the MFIP grant. Count the full amount of the subsidy if it is less than $50.

The provision of counting up to $50 of housing DOES NOT apply to the following types of housing:

- Bridges (funded by DHS and Minnesota Housing Finance Agency).
- Housing paid for by the HUD McKinney-Vento homeless funding streams including the Continuum of Care and Emergency Solutions grants.
- Housing funded by HUD programs that serve persons with AIDS (HOPWA); seniors (Section 202); and individuals with disabilities (Section 236, Section 811 and Mainstream Vouchers).
- Minnesota Housing Finance Agency funded rental properties to end long term homelessness (e.g. Ending Long-Term Homelessness Initiative Fund, Housing Trust Fund for Long-Term Homelessness, etc.).
- Minnesota Long-Term Homeless Supportive Services Fund (funded through DHS grants).
- Housing properties built with specific tax credits allowance for real estate developers.

EXEMPTIONS:
The policy also does not apply to an assistance unit which includes a participant who is:

- Age 60 or older.
  OR
- A caregiver who is suffering from an illness, injury, or incapacity that has been certified by a qualified professional when the illness, injury, or incapacity is expected to continue for more than 30 days and the condition severely limits the person’s ability to obtain or maintain suitable employment.

NOTE: Severely limits the person’s ability to obtain or maintain suitable employment means that a qualified professional has determined that the person’s condition prevents the person from working 20 hours or more per week.

OR
- A caregiver whose presence in the home is required due to the illness or incapacity of another member in the assistance unit, a relative in the household, or a foster child in the household when the illness/incapacity and the need for the participant’s presence in the home has been certified by a qualified professional and is expected to continue for more than 30 days. This includes participants who have family members in the home who meet the Special Medical Criteria or receive waivered services.
  OR
- A caregiver who is an SSI recipient. NOTE: Do NOT apply this exemption to families with a child on SSI.

Apply the following procedures for someone who lives in public housing, a HUD project-based property, or a Section 8 rental property:

- Deny applications when applicants do not provide verification of the amount of the subsidy.
Close cases of participants who fail to provide verification of the rent subsidy amount:

- At the time of the Recertification.
  OR
- When there is a change in the amount of the subsidy.
  OR
- When the participant moves to a property that provides a subsidy to the MFIP unit.

For MAXIS procedures or information on how to properly complete the STAT/SHEL panel, see TEMP Manual TE02.08.159 (Housing Subsidy).

WB, DWP, SNAP, MSA, GA, GRH
No provisions.
MFIP, WB, MSA, GA, GRH:
No provisions.

DWP:
Allow actual verified utility expenses and the flat rate of $35 for telephone service, if applicable, in determining the amount of the grant. See 0022.12 (How to Calc. Benefit Level - MFIP/WB/DWP/GA).

SNAP:
The utility costs a unit is responsible for are part of the shelter deduction. All SNAP units that incur utility costs are allowed 1 or more of the mandatory standard utility allowances. Allow the applicable standard utility allowance.

Never prorate a Utility Allowance.

ALLOW THE SINGLE UTILITY STANDARD OF $450 ONLY FOR UNITS:

- That incur expenses for heating and/or cooling.
- That incur only an excess heating or cooling expense.
- That are a separate SNAP unit who shares heating/cooling expenses (no proration).
- That are on the Low Income Home Energy Assistance Program (LIHEAP), regardless of whether they incur expenses for heating and/or cooling.
- With an ineligible person (no proration).

The single utility standard includes heating, cooling, electricity, water, sewer, garbage, and phone.

FOR UNITS BILLED FOR NEITHER HEATING NOR COOLING:

- Allow the electric standard of $138 per month for units billed for electricity.
- Allow the phone standard of $37 per month for units billed for phone service. Do not allow actual phone expenses.

  NOTE: The phone standard can be allowed for cell phone expenses when the unit is billed monthly or buys a pre-paid card with a certain dollar value or number of minutes, AND the cell phone is their only phone.

- If the unit incurs both electric and phone costs, both deductions may be used.

Do NOT allow a standard utility deduction when an ineligible student is responsible to pay and is the one paying the utility expense.

Do not allow a deduction when expenses are reimbursed by a source outside the unit, EXCEPT do allow a deduction for expenses reimbursed by the Low Income Home Energy Assistance Program or payments vendored from the client's funds.

A unit incurs a heating expense ONLY if it must pay for the actual fuel used for its primary source of heat. A unit incurs a cooling expense ONLY if it must pay electrical costs for operating an air conditioning system or room air conditioner and there is a reasonable expectation the unit will use air conditioning.
Households that receive HUD utility reimbursements and Farmers Home Administration (FMHA) Rental Assistance Program utility reimbursements may not claim the standard utility deduction unless they incur or are expected to incur heating or cooling costs exceeding the excluded HUD utility reimbursement amount in any month of the certification period. See 0017.15.81 (Utility Payments).
### MFIP:

#### FAMILY WAGE LEVEL

<table>
<thead>
<tr>
<th># Eligible People</th>
<th>Full Standard</th>
<th>Cash Portion</th>
<th>Food Portion</th>
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</thead>
<tbody>
<tr>
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<td>10</td>
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</table>

Each add’l person | $196          | $178         | $125         |

Use the Family Wage Level (FWL) standard only for units with earned income. See 0022.12 (How to Calc. Benefit Level - MFIP/WB/DWP/GA).

For families with a child subject to the family cap, apply the FWL for the household size including that child. To determine the Transitional Standard to apply, add the cash portion for the household size not including the child to the food portion for the household size including the child. See 0014.06.03 (Family Cap).

Some state and federal programs do not count the food portion as income. Examples of these programs include housing subsidy programs, low income energy assistance program, and Supplemental Security Income when determining interim assistance amount.

#### SHARED HOUSEHOLD STANDARD

<table>
<thead>
<tr>
<th># Eligible People</th>
<th>Full Standard</th>
<th>Cash Portion</th>
<th>Food Portion</th>
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<td>$932</td>
<td>$1,275</td>
</tr>
</tbody>
</table>

Each add’l person | $173          | $48          | $125         |

**NOTE:** Assistance standards for a household of more than 10 are calculated by MAXIS.

See SHARED HOUSEHOLD in 0002.61 (Glossary: Self...).

The Shared Household Standard does NOT apply if:

- The MFIP member is a victim of family violence.
- OR
- The non-MFIP member meets the eligible caregiver requirement.
Use the Shared Household Standard unless unrelated household members meet at least 1 of the following EXCEPTIONS:

- **Receiving Public Assistance:**
  - Minnesota Family Investment Program (MFIP).
  - WB.
  - General Assistance (GA).
  - Emergency General Assistance (EGA).
  - Minnesota Supplemental Aid (MSA).
  - Minnesota Food Assistance Program (MFAP).
  - Refugee Cash Assistance (RCA).
  - Supplemental Nutrition Assistance Program (SNAP).
  - Medical Assistance (MA) and all programs under MA (for example: QMB, SLMB, etc).
  - MinnesotaCare.
  - Supplemental Security Income (SSI).
  - Adoption Assistance.
  - Relative Custody Assistance.
  - Foster Care.

- **ROOMER, BOARDER, OR A PERSON TO WHOM ROOM OR BOARD IS PAID:**
  For this to apply, the unit must meet the definition of ROOMER/BOARDER (see 0002.07 (Glossary: Benefit...), 0002.57 (Glossary: Relative...), not simply share living expenses. If the MFIP unit is receiving roomer/boarder income, consider the income as self-employment. See 0017.15.33.27 (Self-Employment Income From Roomer/Boarder).

- **MINOR CHILD:**
  See MINOR CHILD in 0002.41 (Glossary: Medically Necessary...).
MINOR CAREGIVER:
This includes minor caregivers living with parents or in an approved supervised living arrangement, if applicable. See MINOR CAREGIVER in 0002.41 (Glossary: Medically Necessary...), 0012.06 (Requirements for Caregivers Under 20).

CAREGIVER OF A CHILD NOT IN THE MFIP ASSISTANCE UNIT:
This refers to the relationship of an unrelated person in the household to a child that is not considered part of the MFIP assistance unit. For a list of eligible caregivers, see 0014.03.03 (Determining the Cash Assistance Unit).

PROVIDING CHILD CARE TO A CHILD IN MFIP ASSISTANCE UNIT:
This refers to the unrelated person providing care for a child who is part of the MFIP assistance unit.

For detailed information on how to calculate the food portion benefit for children born into an assistance unit that has received MFIP for 10 months or more, see 0014.06.03 (Family Cap).

WB, SNAP, MSA, GA, GRH:
No provisions.

DWP:
Follow the CASH portion of the MFIP Transitional or Shared Household Standard, whichever is appropriate. The maximum monthly benefit amount available under DWP is the difference between the unit's needs and the unit's countable income, not to exceed the cash portion of the MFIP standard of need.
Protective and vendor payments are alternatives to issuing benefits directly to clients.

Protective payments give a client’s assistance benefits to a payee other than the client. The payee is responsible to pay for the client’s needs up to the amount of the benefit.

Vendor payments are cash assistance benefits paid directly to a provider of goods or services.

Protective and vendor payments may be mandatory or optional.

The county agency may not act as vendor of a client’s grant.

You may use the Mandatory Vendor Form - Request for Information (DHS-3365) to request shelter or utility expense information from clients. This is not a required form. Clients can provide this information in other ways if they choose.

**MFIP:**
Use alternative payment methods for the cash portion of MFIP in the following situations:

- Issue to a vendor when you find this is the most effective way to resolve an emergency.
- Issue to a vendor or protective payee when clients have a pattern of money mismanagement. The county agency director or director’s designee must approve a proposal for protective or vendor payments for money mismanagement. The county agency must provide training on managing money. Document the need for and the method of payment. If the need for protective payee or vendor payments will last beyond 2 years, ask the court to appoint a legal representative.
- Issue to a vendor or protective payee if the client completes the Request for Voluntary Vendor Payment (DHS-2984) form.
- Issue MFIP as a vendor payment out of the cash portion of assistance for shelter and utilities for units with a member who was convicted of a drug felony or failed a random drug test within 10 years from the date of application or recertification. If the vendor’s refusal to accept partial payment is due to a legality or company policy, do not vendor pay the shelter cost (for example, real estate taxes). Vendor pay the shelter cost if the vendor’s refusal to accept partial payment is based on an agreement made between the vendor and client. If there is an amount left over, issue it directly to the unit. See 0011.27.03 (Drug Felons).
- When possible, issue MFIP to a protective payee when a minor caregiver and minor child live with the minor caregiver’s parent, other adult relative, legal guardian or legal custodian, or in an adult-supervised supportive living arrangement. See 0012.06 (Requirements for Caregivers Under 20).
- Issue voluntary vendor payments only for shelter and utilities.
- Issue up to the cash portion of MFIP to a vendor for shelter and, at county option, utilities if the unit is subject to the 2nd through 6th month of any Employment Services, orientation, or child support sanction. Continue to vendor pay the shelter (and utilities, if applicable) for 6 months after the month in which the participant(s) return to compliance.

If the vendor’s refusal to accept partial payment is due to a legality or company policy, do not vendor pay the shelter cost (for example, real estate taxes). Vendor pay the shelter cost if the vendor’s refusal to accept partial payment is based on an agreement made between the vendor and client.

See 0028.30 (Sanctions for Failure to Comply - Cash).
Inform clients whose grants are vendor paid how fluctuating grants due to changes in earned or unearned income will affect the amount of their vendor payments.

When the information needed to pay the vendor(s) is not on file, send a 10-day notice of adverse action, proposing to terminate assistance unless you receive ALL of the following items before the effective date of the notice:

- The amount of the shelter and/or utilities.
- The date when shelter is due.
- The name and address of the landlord/caretaker/mortgage holder and/or utility company.

Do not terminate assistance if the participant provides information about and completes a release to contact the vendor. Do not terminate assistance if the participant verifies he or she does not incur shelter and/or utilities.

To determine the amount to vendor pay for utilities, choose 1 of the following methods:

- The average of the actual monthly cost of utilities for the family for the prior 12 months (if the family has maintained their current residence for 12 months or more).
- The amount of the monthly budget plan set by the local utility company for the family’s current residence.
- The estimated monthly utility costs (in consultation with the client) for the dwelling in which the family currently resides.

For the food portion of MFIP, follow the SNAP provisions of 0024.09.01 (Protective and Vendor Payments - FS/MSA/GA/GRH).

Document and review the need for the method of payment at least annually.

**WB:**  
Follow MFIP EXCEPT references to the food portion and money mismanagement do NOT apply.

**DWP:**  
Follow MFIP for protective payee and vending partial payment provisions. Vendor pay all family maintenance needs (housing and utilities) up to the amount of the DWP grant for the entire period of DWP eligibility when possible. Do not vendor pay the minimum cash benefit amount of $10. At county option, you may also vendor pay the standard phone amount of $35.00.

A unit with high shelter expenses may not be getting additional cash benefits (for example, personal needs) because the entire amount of the DWP benefits is paid out in a vendor payment for the family’s shelter needs. For units receiving personal needs allowance payments, issue the personal needs allowance payments via Electronic Benefit Transfer (EBT).

For more information, see 0022.12 (How to Calc. Benefit Level - MFIP/WB/DWP/GA), 0020.09 (MFIP/DWP Assistance Standards) and 0024.04.03.03 (Benefit Delivery Methods--Program Provisions).

**SNAP, MSA, GA, GRH:**  
See 0024.09.01 (Protective and Vendor Payments - FS/MSA/GA/GRH).
The court may order that all or part of an overpayment is exempt from recovery. The county must follow the court order. See 0025.12.03.06 (Bankruptcy), 0025.24.03 (Recovering Fraudulently Obtained Assistance).

MFIP, WB, DWP:
Establish a claim but do not pursue recovery on non-fraud overpayments on closed cases which total $35 or less. Note overpayments of $35 or less in the case record. If the client begins to receive assistance again, start recoupment.

SNAP:
The following overpayments are exempt from recovery; do not establish a claim for overpayments due to:

- The county agency's failure to certify a unit in a correct project area.
- The county agency's failure to verify a unit signed the application.
- The county agency's failure to verify a unit completed a current work registration form.
- The unit's failure to report a change because it was not required to report the change. See 0007 (Reporting).
- A categorically eligible unit later being found ineligible for cash assistance or SSI due to excess assets.

Establish a claim, even though the following overpayments are exempt from recovery when:

- The total overpayment is less than $35 and the unit no longer receives SNAP.
- The county agency has documentation which shows that the unit cannot be located. See 0025.12.03.03 (Suspending or Terminating Recovery).

Do not pursue recovery on compromised portions of an overpayment. See 0025.12.03.09 (Claim Compromise & Termination).

MSA, GRH:
Do not pursue recovery from a personal needs allowance.

- If an overpayment occurs while a client is in a facility, establish the claim but do not pursue recovery action until the client leaves the facility. When the client leaves the facility, begin to recover the overpayment the 1st month you can give a 10-day notice.

- If you are recovering an overpayment and the client enters a facility, stop recovery action until the client leaves the facility:
  - If the client enters a facility on the 1st of the month, stop recovery action the month the client enters the facility.
  - If the client enters a facility after the 1st of the month, stop recovery action the month after the month the client entered the facility.
When the client leaves the facility, resume recovery action the 1st month you can give a 10-day notice.

**GA:**
Do not pursue recovery from non-participants on an overpayment balance that totals less than $35, unless it is the result of a fraud conviction. Note overpayments of $35 or less in the case record. If the client begins to receive assistance again, start recoupment.

Do not pursue recovery from a personal needs allowance.

- If an overpayment occurs while a client is in a facility, establish the claim but do not pursue recovery action until the client leaves the facility. When the client leaves the facility, begin to recover the overpayment the 1st month you can give a 10-day notice.

- If you are recovering an overpayment and the client later enters a facility, stop recovery action until the client leaves the facility:
  - If the client enters the facility on the 1st of the month, stop recovery action the month the client enters the facility.
  - If the client enters the facility after the 1st of the month, stop recovery action the month following the month the client entered the facility.

When the client leaves the facility, resume recovery action the 1st month you can give a 10-day notice.
MFIP, WB, DWP, MSA, GA, GRH:
See 0025.12.03 (Overpayments Exempt From Recovery), 0025.12.03.09 (Claim Compromise & Termination).

SNAP:
You cannot suspend a claim. But you may stop sending demand letters after a period of inactivity, if:

- Recoupment is not currently available.
  AND
- The client is not making direct repayment.
  AND
- The county agency determines the demand letters are no longer cost effective.

The county agency sets its own policy on cost effectiveness. Counties may also reinstate system-generated demand letters if the client's circumstances change.

Terminate non-fraud claims only when the client dies.
Compromising a claim consists of accepting a partial payment as full satisfaction of a claim on the condition that the payment is received promptly. Separate policies apply to claims depending on when initial notification is received on the claim.

NEW CLAIMS

This policy applies to all claims for which the initial notification of overpayment occurred on or after December 1, 2002. The text of all MAXIS overpayment notices issued on or after December 1, 2002 has been modified to include language that advises each debtor of:

- The right to have their claim compromised.
- The conditions that must be met to have their claim compromised.

The time limit for a debtor to make the compromise payment is 90 days from the initial notification of the claim to the household. If the initial overpayment notice is sent by first class mail, the 90 day period begins with the date the notice is issued. If the initial notice is returned to the local agency by the postal service, the right to an overpayment notice and compromise is renewed. If the initial overpayment notice is sent by certified mail and accepted by the household, the 90 day period begins with the date a household member signs for receipt of the notice.

The right to compromise does not apply when the initial notification of an overpayment occurs in conjunction with a criminal or civil court proceeding. This includes the occasion of securing a confession of judgment which also happens to be the initial notification of overpayment. None of these methods of establishing a claim, in fact, requires a MAXIS overpayment notice. If a MAXIS overpayment notice precedes any of these other actions and a timely compromise payment is received, the local agency is bound by the compromise. Consequently, a local agency that pursues criminal action would not be able to seek monetary restitution for the full amount of a previously compromised claim. This does not, however, prevent a local agency from charging the full amount of a compromised claim or from requesting additional fines, penalties, interest or non-monetary restitution in the sentencing phase of the criminal proceeding.

Claims are subject to compromise if voluntary payment is received within the 90-day time limit and either of the following conditions applies:

- Claims for excess assets may be compromised if the amount of the overpayment is greater than the amount that assets exceeded program limits. A compromise payment can be made for the amount of excess assets. If the value of excess assets changed during the period of an overpayment, the acceptable compromise payment is based upon the maximum amount assets were over program limits.  
  OR
- Claims for any basis may be compromised by 25% if the remaining 75% is repaid. A claim for excess assets can be compromised under this provision if this method establishes a smaller payment than the prior provision.

Compromise amounts must be in the form of direct voluntary payment by a debtor. Recovery received by tax offset, recoupment, restored benefits or canceled EBT benefits cannot be applied toward a compromise.

PREVIOUS CLAIMS

This policy applies to claims that provided the initial notice of overpayment prior to December 1, 2002. Compromise of these claims may be done upon inquiry of the debtor to the local agency. A local agency representative may offer a compromise proposal subject to the following limitations:

- The compromise is based upon the account of the debtor rather than an individual claim. This account includes all existing claims for which the debtor is responsible except new claims identified in Part A, fraud claims resulting from criminal conviction or pre-trial diversion and claims that have already been referred to the Minnesota Collection Enterprise (MCE) or the Treasury Offset Program (TOP).
NOTE: In March, 2004 MCE changed its name to Collection Division of the Department of Revenue. The codes and process for debt referral will continue to be referred to as MCE on MAXIS.

- At least 50% of the total amount owed on the claims in the account has been repaid prior to the compromise proposal.

- The debtor repays 50% of the remaining balance within 90 days of the compromise proposal.

All forms of recovery can be credited in determining whether a debtor meets the 50% payment requirement.

CLAIM TERMINATION POLICY

A claim may be terminated and the claim balance adjusted to 0 when there is no realistic prospect for future recovery. This practice differs from a write off which is an accounting mechanism to remove a claim as an accounts receivable asset even though the claim is retained against the possibility of future recovery. All terminated claims are automatically written off, but claims that are written off are not necessarily terminated.

Terminate claims when:

- The only responsible debtor for a claim has died and no future recovery actions are available.
  OR
- The only responsible debtor for a claim has had that debt discharged by federal bankruptcy court in a Chapter 7 or Chapter 13 proceeding.
  OR
- A claim is the sole responsibility of a debtor who resides in a Long Term Care Facility, there is no prognosis for a return to residential living in the community and there is no estate to repay the claim or there are existing commitments to repay higher priority obligations.
  OR
- Initial notification on a claim occurred at least 10 years previous, there has been no recovery on any of the claims in the debtor’s MAXIS account in the preceding 6 years, criminal restitution is no longer required by district court, there is no docketed judgment and the debt is not certified for Revenue Recapture or the federal Treasury Offset Program (TOP).
Each county agency must provide employment services or contract for employment services with outside providers. County agency administrators must ensure that Employment Services Providers (ESPs) follow employment services program requirements. The county agency is ultimately responsible for the operation of employment services programs and clients’ participation in them.

County agency procedures and interactions with ESPs may vary depending on how the county sets up its employment services program. Follow your county’s procedures.

**MFIP:**
Counties must provide ALL required components of MFIP-ES. See 0028.03 (Employment Services/FSET Required Components).

Unless the county has a workforce center or claims financial hardship, each county must offer caregivers a choice of 2 ESPs. The providers, including counties, DO NOT need to be certified by the Commissioner of the Department of Employment and Economic Development (DEED).

Counties and providers may employ whatever combination of skilled staff is necessary to provide these services.

Financial workers in all counties must:

- Determine who must participate in MFIP-ES. See 0028.06.03 (Who Must Participate in Empl. Services/FSET).

- Refer mandatory caregivers to the MFIP ESP. See 0028.06.03 (Who Must Participate in Empl. Services/FSET). For information about the referral process, see MFIP Employment Services Manual 5.9 (Referring Participants to ES/Choice of Providers). TEMP Manual TE10.26 (Workforce One), TE10.26.01 (Additional Workforce One Information), TE10.34 (Manual Referral Option For WF1).

- Report changes to the job counselor. See 0028.03.09 (Reporting Changes to Job Counselor).

- Enter and update MFIP-ES information on the MAXIS STAT/EMPS panel.

- Refer caregivers to the child care office and report certain changes to child care staff. See 0029.30 (Child Care Assistance).

- Sanction participants when the job counselor decides that they have failed, without good cause, to comply with MFIP-ES requirements. See 0028.18 (Good Cause for Non-Compliance--MFIP/DWP), 0028.30 (Sanctions for Failure to Comply - Cash).

**WB, MSA, GA, GRH:**
No provisions.

**DWP:**
Within 1 working day of determining that the applicant is eligible for DWP, but before benefits are issued to or on behalf of the family unit, refer all caregivers to Employment Services. The referral to DWP Employment Services must be in writing and must contain the following information:

- Notification that, as part of the application process, applicants are required to develop an Employment Plan or the DWP application will be denied.

AND
● The Employment Services Provider’s name and phone number.
   AND
● The immediate availability of supportive services, including, but not limited to, child care, transportation, and other work-related aid.
   AND
● The rights, responsibilities, and obligations of participants in the program, including, but not limited to, the grounds for good cause, the right to equal access under ADA provisions, the consequences of refusing or failing to participate fully with program requirements, and the appeal process.
   AND
● Employment Plans may not be written for longer than 4 months.

MAXIS/WORKFORCE ONE PROCESS:

Referral to Employment Services will not occur automatically. The worker must trigger the referral based on county policy. A case-level panel called WORK exists in MAXIS to transmit electronic referrals to Employment Services. When MAXIS creates pending eligibility results for DWP, a DAIL message will be created to inform the financial worker (FW) to refer a DWP participant to Employment Services. From the WORK panel, the FW will select an ES provider to refer the job seeker to. The WORK panel also allows the FW to indicate the date of an appointment with Employment Services as well as a place for worker comments. In 2-parent households, both parents will be referred to Employment Services from the same, case level WORK panel.

MAXIS functionality allows a FW to refer a job seeker to Employment Services before all required verifications have been received. Counties should establish a county-wide policy to address these “early DWP referrals”. If a county approves “early DWP referrals”, the FW can navigate to the WORK panel directly rather than waiting for the DAIL message. If the case has not been referred and the participant has not developed and signed an Employment Plan, the case can not be opened.

SNAP:
See 0028.03.01 (County Agency FSET Responsibilities).
Participation requirements for orientation and employment services differ. For information on participation requirements for ES Overview orientation, see 0028.09 (ES Overview/FSET Orientation), 0028.09.06 (Exemptions From ES Overview/FSET Orientation).

For information on general participation requirements and when people become mandatory participants for employment services, see 0028.06 (Participation Requirements).

**MFIP:**
In the first 60 months of MFIP eligibility all caregivers are required to participate in Employment Services (ES). Some caregivers will have a different level of participation which is dependent upon their circumstances. The only possible exceptions to ES participation requirements are good cause or if the caregiver has a child under 12 months or under 6 weeks (depending on the age of the parent and the option used to develop the EP). See 0028.18 (Good Cause For Non-Compliance--MFIP/ DWP), 0028.06.02 (Universal Participation Provisions). For information about ES requirements for extended cases, see 0011.33 (MFIP Hardship Extensions).

**FAMILIES WITH A MINOR PARENT CAREGIVER**

Caregivers under age 18 must receive an assessment of educational progress and develop an Employment Plan concurrent with receipt of MFIP assistance. Refer the minor caregiver to the county social worker or the agency with whom your county has contracted to provide minor caregiver services.

**FAMILIES HEADED BY AN 18- OR 19-YEAR OLD PARENT WITHOUT A HIGH SCHOOL DIPLOMA OR GED**

Counties must allow 18- and 19-year old teen parents who do not have a high school diploma or its equivalent to choose an EP with either an education option or a work option.

The work option means the EP includes activities under the regular employment services track. The 60-month clock DOES NOT stop for teen parents who choose this option. Under this option earned income DOES count for teens who choose the employment option.

The education option means that the EP includes education requirements (high school or its equivalent). The 60-month clock STOPS for teen parents who choose this option. Plans that include both secondary school attendance and work fall under this option. Under this option income IS NOT counted toward the MFIP grant.

County and Employment Services staff working with 18- and 19-year old parents must explain the option and make specific efforts to inform those who are in sanction for not attending school that there is a way to come into compliance.

Caregivers 18 and 19 years old who choose employment will be federally funded.

Also see 0012.06 (Requirements for Caregivers Under 20).

As soon as eligibility is determined, refer caregivers who must participate to MFIP-ES. Use the Employment Services Referral (DHS-3166). **NOTE:** Applicants who received DWP in the last 30 days must be referred to ES within 10 days of the date they are determined eligible for MFIP.

Sanction the unit when a caregiver refuses to participate in mandatory employment services. See 0028.18.03 (Suitable/Unsuitable Work), 0028.30 (Sanctions for Failure to Comply - Cash), 0028.30.03 (Pre 60-Month Type/Length of ES Sanctions), 0028.30.04 (Post 60-Month Empl. Services Sanctions).

**WB, MSA, GA, GRH:**

No provisions.
DWP:
Within 1 working day of determination that the applicant is eligible for DWP, but before benefits are issued to or on behalf of the family unit, refer all caregivers to Employment Services. All eligible caregivers who do not meet the exemption criteria are required to participate in Employment Services. The referral to the DWP Employment Services must be in writing and must contain the following information:

- Notification that, as part of the application process, applicants are required to develop an Employment Plan or the DWP application will be denied.

- The name and phone number of the Employment Services Provider.

- The immediate availability of supportive services, including, but not limited to, child care, transportation, and other work-related aid.

- The rights, responsibilities, and obligations of participants in the program, including, but not limited to, the grounds for good cause, the consequences of refusing or failing to participate fully with program requirements, and the appeal process.

As soon as possible, but no later than 10 working days of being notified that a participant is financially eligible for DWP, the Employment Services Provider must provide the participant with an opportunity to meet to develop an initial Employment Plan. The Employment Services Provider must notify the county within 1 working day that the initial Employment Plan has been developed and signed by the participant and the job counselor. The county must issue DWP benefits within 1 working day after receiving notice that the Employment Plan has been signed.

Participation in DWP Employment Services fulfills the requirements for SNAP E&T participation. Once DWP ends, participants may be subject to SNAP E&T requirements.

SNAP:
For information about who is exempt from SNAP E&T services, see 0028.06.10 (Who Is Exempt From FSET). For information on SNAP Work Registration, see 0028.06.12 (Who Is Exempt From FS Work Registration).

Each non-exempt or non-deferred ABAWD in a non-PA SNAP unit must participate in SNAP E&T. The client must participate each month the unit is eligible for SNAP.
MFIP:
Caregivers under the age of 18 without a high school diploma or GED must attend school unless exempt.

The caregiver must be enrolled in a secondary school and meeting the school's attendance requirements.

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.

Consider a caregiver to be attending school when he or she is enrolled but the school is not in regular session (for example, during holidays and summer breaks).

At the intake interview, give caregivers under age 20 the Graduate to Independence/MFIP Teen Parent Informational Brochure (DHS-2887) and the Notice of Requirement to Attend School (DHS-2961).

For an 18- or 19-year old caregiver with an on-line diploma from a program other than one approved by the MN Dept. of Education, explain the MFIP policy and place the teen in the “work option”. See 0012.06 (Requirements for Caregivers Under 20).

Counties must allow 18- and 19-year old teen parents who do not have a high school diploma or its equivalent to choose an Employment Plan (EP) with either an education option or a work option. See 0028.06.03 (Who Must Participate in Empl. Services/FSET), 0028.15 (Employment Plan).

The following are EXEMPTIONS from the school attendance requirement:

● Transportation services needed to attend school are not available.

● Appropriate child care services are not available.

● The caregiver is ill or disabled seriously enough to prevent school attendance.

● The caregiver is needed in the home because of the professionally certified illness or disability of another member of the assistance unit, a relative or who is a foster child in the household.

● The caregiver is the parent of a child who is younger than 6 weeks old.

When you deny an exemption, send a SPEC/LETR of exemption denial to the caregiver.

If a caregiver who is not exempt from school requirements fails to attend school, without good cause, impose a sanction. See 0028.18 (Good Cause for Non-Compliance--MFIP/DWP), 0028.30 (Sanctions for Failure to Comply - Cash).

Social Services will notify you if they determine that education is inappropriate for a custodial parent under age 18. Do not impose any other school attendance requirements unless Social Services notifies you to do so.

Caregivers who are required to attend school must meet enrollment and attendance requirements. Verify enrollment and attendance information at least monthly. Have the client sign the Request for Verification of School Attendance/Progress (DHS-2883) or a county version of the form that contains the same information and send it to the school. Do not sanction the parent if the school fails to cooperate.

Caregivers must meet enrollment and attendance requirements at the time of verification. If the school verification shows that a client is not enrolled or attending school, or appears to be facing barriers to completing education, notify the person responsible for case management and reassess the client's school attendance requirement.
WB, MSA, GRH:
No provisions.

DWP:
Generally follow MFIP. Also see 0013.05 (DWP Bases of Eligibility).

SNAP:
BASIC EDUCATION/GED PARTICIPATION

When participants enter the program, the Employment Services Provider (ESP) must assess the participants to determine if the participants can find a job with the skills they possess. If the lack of basic education is a barrier to obtaining suitable employment, the ESP may include basic education or GED course work in the EDP. Examples of when to include basic education or GED course work in an EDP include:

- GED course work or basic education is considered the best path to employment.

- Low skill levels make it difficult to complete job applications; interfere with the ability to get, keep, or advance on the job; or block movement toward self-sufficiency.

- The participant is very close (1 to 3 months) to completing a GED at the time of the individualized assessment.

Prior to including basic education in an EDP, the ESP should consider:

- The participant’s interest and motivation to be in school.

- The participant's history of participation and progress in similar educational activities.

- Whether there is a reasonable expectation that the participant will make sufficient improvement in a short time to noticeably increase his/her marketability.

- Any intellectual impairments or learning disabilities which may indicate the need for more specialized services.

The ESP should approve basic education in blocks of 3 months or less to allow for a review of progress prior to continuation of the activity.

POST-SECONDARY TRAINING/EDUCATION

Post-secondary training and education activities may be included in an EDP and are generally limited to 1 year. A 2nd year may be approved in limited circumstances. In order for a post-secondary education program to be approved, the participant or the provider must document that:

- The goals in the participant's EDP can only be met with the post-secondary training.
There is a market for full-time employees with the proposed training where the participant will (or is willing to) reside upon completion of the program.

The average wage level for employees with this training is significantly greater than the participant can earn without this training.

The participant can meet the requirements for admission into the program.

There is a reasonable expectation that the participant will complete the training program based on such factors as the participant’s current assessment; previous education, training, and work history; current motivation; and changes in previous circumstances.

The ESP must ensure that the participant is making satisfactory progress in the program. Satisfactory progress must be defined in the participant's EDP. The ESP may accept or modify the definition of satisfactory progress used by the educational institution where the participant is enrolled.

GA:
No provisions. However, some people are required to attend school to get or maintain GA eligibility. See 0011.18 (Students).
MFIP:
An Employment Plan (EP) is a social contract between the county/ES provider and each participant. The purpose of these plans is to identify for each participant the most direct path to unsubsidized employment and any subsequent steps that support long-term economic stability.

All MFIP participants:

- Are mandatory ES participants.
- Must develop an EP, unless they:
  - Have a child under 12 months.
  - Have any remaining months of the child under 12 months ES exemption.
  - Choose to use any remaining months of the child under 12 months ES exemption.
- Must comply with the EP if an EP is developed.

Employment Plans are based on information gathered during the assessment process and throughout participation in the program. Development of a basic EP should begin during the 1st meeting with a job counselor, or shortly thereafter. The EP is a living document that should be reviewed at least every 3 months and revised whenever necessary.

Failure on the part of a participant to develop or comply with hourly requirements in a plan may result in a sanction. See Employment Services Manual Appendix H (FSS Sanction Guidance).

Failure to sign an Employment Plan is considered failure to develop an EP and should result in a sanction. If the participant qualifies under Family Stabilization Services pre-sanction provisions apply.

All EPs must be reviewed at least every 3 months to determine whether activities and hourly requirements should be revised. Reviews may be scheduled more often if circumstances change.

Sanction participants if they fail to develop or follow the terms of the Employment Plan. See 0028.30 (Sanctions for Failure to Comply - Cash).

There are special provisions for victims of family violence and self-employed participants. See below.

VICTIMS OF FAMILY VIOLENCE

- Victims of family violence who want to claim a Family Violence Waiver and be exempt from the 60-month time limit must develop and comply with an EP. The EP is developed with the assistance and collaboration of the participant, a person trained in domestic violence and a job counselor. MFIP child care is available for all activities included in an approved EP. See 0005.12.12.09 (Family Violence Provisions/Referrals). See PERSON TRAINED IN DOMESTIC VIOLENCE in 0002.49 (Glossary: Permanent...).

- Victims of family violence who have or are in the process of developing an EP cannot be required to attend an overview done in a group setting. The job counselor must discuss the information normally presented in the ES Overview at the time the EP is developed, unless the client previously attended an Overview. See 0028.09 (ES Overview/FSET Orientation). If you combine the Financial Orientation and ES Overview, do not sanction the participant for failing to attend the regular ES Overview components of the meeting.

- The job counselor has final approval of an EP or any revisions to the plan. If the job counselor does not approve activities in
the plan, the county must provide written reason why the activities are not approved and document how the denial of these activities does not interfere with the safety of the client or children.

- If the client fails to cooperate with the EP the 60-month time limit exemption ends and the client must be invited in to develop a new Employment Plan. See 0028.30 (Sanctions for Failure to Comply - Cash).

SELF-EMPLOYMENT

Self-employment activities may be included in an Employment Plan (EP) contingent on the development of a business plan.

All participants should be encouraged to look for employment that will lead to their self sufficiency. Participants with an approved EP that includes self-employment must meet the participation requirements. Only the hours the participant earns the federal minimum wage count toward the participation requirements. The number of self-employment hours is determined by dividing the net self-employment income by the federal minimum wage. When the number of self-employment hours is less than the number of hours required for the participant to be included in the numerator, the participant’s EP should be revised to include additional countable activities, such as job search, paid employment, or unpaid work experience.

WB, MSA, GA, GRH:
No provisions.

DWP:
Follow MFIP. Before issuing DWP benefits to a family unit, the caregiver or caregivers must, in conjunction with a job counselor, develop and sign an EP. Also, activities in EPs must not cover a period of more than 4 months. The purpose of the EP is to identify the most direct path to unsubsidized employment for each participant within the 4-month DWP period. The EP must clearly outline the commitments on the part of both the county/Employment Services provider and the participant.

The activities in the EP must focus on obtaining the necessary evaluation, medical assessment and/or documentation if a DWP participant believes he/she may meet 1 of the DWP unlikely to benefit categories. The job counselor or county must assist the DWP participant in gathering this information.

DEVELOPING AN EP AS PART OF THE DWP APPLICATION PROCESS

A DWP applicant must meet with an employment counselor to develop and sign an initial EP before issuing any DWP benefits to or on behalf of the family. The employment counselor and applicant have 10 working days from the date he/she is referred to Employment Services to develop and sign the initial EP. The ES provider has 1 working day to notify the county that the job seeker’s initial EP was signed. Once notified, the county has 1 working day to issue the DWP benefits. DWP benefits cannot be issued until the initial EP is signed.

When the EP is not signed within 30 days of the application date, the ES provider must notify the county. The applicant must submit a new application for DWP benefits and the time lines will start over. If the initial EP was not developed and signed within 30 days of the original application due to county or Employment Services agency error, issue DWP benefits based on the original application date. The requirement that the participant signs the EP before benefits are issued still applies to these situations. In most cases, the EP should include 35 hours of work or work-related activities per week. If fewer hours are included in the EP, the reasons for reducing the hours should be noted.

A more limited initial EP can be developed to meet the 10-day requirement provided that a date at which the EP will be revised is included. Because DWP is limited to 4 months, the initial EP should be revised as soon as possible.

SPECIAL CONSIDERATIONS FOR 2-PARENT FAMILIES
In 2-parent families where only 1 caregiver meets a DWP exclusion category and the other caregiver does NOT meet a DWP exclusion category, BOTH parents must participate in DWP. However, the EP for the caregiver who would otherwise be excluded will be developed taking into account the participant’s special circumstances. This includes a caregiver in a 2-parent family who is:

- A minor who has not graduated from HS/GED, see 0012.06 (Requirements for Caregivers Under 20).
- An 18- or 19-year old who has not graduated from HS/GED, and has chosen the education option, see 0012.06 (Requirements for Caregivers Under 20).

**CHILD UNDER 12 MONTHS, REGARDLESS IF CHILD’S NEEDS ARE INCLUDED IN THE GRANT**

- A 1-parent family (with no other DWP exclusion reason) that includes a child under 12 months is not eligible for DWP, unless the parent previously used all of the 12-month lifetime ES exemption limit. Take a Combined Application - Addendum (DHS-5223C) for the newborn and move the case to MFIP. If the determination is made more than 30 days after the DWP application date, have the participant complete an MFIP Transition Application Form (DHS-5223E) as part of the process. Terminate DWP allowing for proper notice.

  Once the MFIP case is opened, the caregiver is required to choose within 10 days whether to use the child under 12 months exemption or use it at a later date.

- A 2-parent household that includes a child under 12 months with no other DWP exclusions MUST participate in DWP. In a 2-parent family only 1 parent in any 1 month is eligible for the ES exemption if the unit has not already used the 12 month lifetime limit.

**SNAP:**

For SNAP E&T participant Employment Plan requirements, see SNAP E&T Manual 5.12 (Employment Plan (EP)).
MFIP, DWP:
Good cause reasons for caregivers under age 20 differ from those of other participants. Caregivers under the age of 20 who do not have a high school diploma or its equivalent may claim the following good cause reasons for not attending school:

- Transportation services or appropriate child care services needed to enable the participant to attend school are not available.

- The participant is ill or disabled seriously enough to prevent attendance at school.

- The participant is needed in the home because of the illness or disability of a member of the assistance unit, or a relative or foster child in the household. This includes a participant with a child under 6 weeks of age.

- The job counselor determines that no appropriate educational option is available for the participant who is age 18 or 19. In this case, the job counselor and participant will need to develop an Employment Plan. Allow 18- and 19-year old caregivers who do not have a high school diploma or its equivalent to choose an Employment Plan (EP) with either an education option or a work option. See 0012.06 (Requirements for Caregivers Under 20).

- The county social services agency determines that school attendance is not appropriate for a participant who is under age 18. In this case, social services should assist the minor participant to develop an appropriate plan.

WB, SNAP, MSA, GA, GRH:
No provisions.
**MFIP, DWP:**
The county agency or Employment Services Provider (ESP) must offer a conciliation conference to clients who fail to comply with MFIP Employment Services (MFIP-ES) requirements. Also offer this opportunity to a minor caregiver to resolve issues of non-compliance with education requirements. See 0012.06 (Requirements for Caregivers Under 20).

The client must request the conference within 10 calendar days from the date you mail or hand deliver the MFIP Notice of Intent to Sanction (DHS-3175) to the client. Requests for conciliation conference may be made in writing, by telephone, or in person.

If the client requests the conciliation conference within 10 calendar days from the date you mail or hand deliver the notice to the client, hold the conference within 5 calendar days of the request.

If the client fails to request a conciliation conference within the 10-day time period or the conference fails to resolve the problem, the job counselor will send a Status Update form asking you to send the client a notice of adverse action. See 0028.30 (Sanctions for Failure to Comply - Cash).

**WB, SNAP, MSA, GA, GRH:**
No provisions.
MFIP:
Send an MFIP Notice of Intent to Sanction (DHS-3175) to a minor caregiver who is out of compliance with MFIP Employment Services (MFIP-ES) or education requirements. See 0012.06 (Requirements for Caregivers Under 20), 0028.12 (Education Requirements). MFIP-ES staff usually send the Notice of Intent to Sanction. However, in the case of a minor caregiver whose plan to attend school is developed by a social worker, your agency must decide who will send the Notice and make the determination of compliance or non-compliance. If the caregiver takes no action within the required time frame (at least 10 days from the mailing of the notice), the designated county person will notify you of the lack of action via the DWP/MFIP Status Update Form (DHS-3165). At that time, send a Notice of Adverse Action (NOAA) or apply the appropriate sanction if a NOAA is not required.

The Notice of Intent to Sanction does the following:

- Specifies requirements not complied with.

- Informs that a sanction will be imposed unless action is taken within the specified time frame (at least 10 days from the mailing of the notice of intent).

- Informs that good cause reasons for not complying should be reported to the job counselor.

- Provides information about the option to request a conciliation conference and a fair hearing.

- States that continuing non-compliance could result in additional sanctions including case closure.

A caregiver has at least 10 calendar days from the mailing of the notice to come into compliance or request a conciliation conference. A caregiver may request a fair hearing upon receipt of the Notice of Intent to Sanction without exercising the conciliation option. If no action is taken within the specified time frame (at least 10 days), you will receive a Status Update form. You must then send a MAXIS Notice of Adverse Action when required.

When a minor caregiver who is not involved with a job counselor requests a conciliation conference, the social worker who developed the education plan may conduct the conference. See CONCILIATION CONFERENCE in 0002.13 (Glossary: Conciliation...). If you receive a timely request, the conference must be conducted within 5 days of the request. A supervisor or designee must review the outcome of the conference. If conciliation resolves the non-compliance, withdraw the sanction notice. The Status Update form is used to notify you to impose or postpone a sanction or that the sanction is cured.

WB, SNAP, MSA, GA, GRH:
No provisions.

DWP:
Follow MFIP. Notify the caregiver that non-cooperation results in disqualification.
UNDERPAYMENTS

Correct any underpayment discovered for a current benefit month within 7 calendar days following the discovery. Issue corrective payments for the current month without deducting any overpayments.

Apply restored benefits for a past month to existing RCA claims/overpayments and issue any remaining benefits to the current participant.

DO NOT establish an underpayment for prospectively budgeted units for any month for which you based the assistance issued on the best information available at the time, you applied correctly policy, and there was no client error.

OVERPAYMENTS

When you find a payment was incorrect, reconstruct each budget month and corresponding payment month using the policies and procedures that were in effect for the payment month. The overpayment is the difference between the benefit amount the client actually received and the benefit amount the client should have received. Overpayments, once computed, are set up as claims to initiate recovery from the client.

DO NOT establish an overpayment for prospectively budgeted units for any month for which you based the assistance issued on the best information available at the time, you applied correctly policy, and there was no client error.

If the client refuses to provide information to establish the amount of the overpayment and if no information is available to estimate a claim amount, assign an overpayment for the full amount of RCA issued for the period in question.

Notify the client of the right to provide proof to establish a smaller overpayment. Close the case if it is not possible to establish current eligibility.

For purposes of allowing the earned income disregard, a report is timely when the client or authorized representative reports income within 60 days from the month in which the income was received.

RCA CLAIMS

Overpayments are set up as claims to initiate recovery from the client. Recoupment is not automated at this time. Pursue recovery via voluntary repayment or civil recovery. Follow MFIP policy in 0025.21.06 (Civil Recovery).

RCA claims are subject to compromise. See 0025.12.03.09 (Claim Compromise & Termination).

In the VOLAG-administered program, the VOLAG Eligibility Coordinators determine the amount of the overpayment and enter the RCA claim. In the county-administered program the county financial workers will follow their county’s current procedures regarding entering and maintaining claims.

Judgment of Law (JOL) is not supported by statute for RCA overpayments. Do not send the Notice of Overpayment letter to the client using certified mail.

Recover all RCA overpayments, except for non-fraud overpayments on a closed case of $35 or less.

Discontinue all recovery actions against a participant who files Chapter 7 or Chapter 13 bankruptcy action and sends a notification of creditors to the agency.