



**COMBINED MANUAL
DESCRIPTION OF CHANGES ATTACHMENT
REVISED SECTIONS – ISSUED 07/2021**

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

0005.09.12 (Application - Pending Cases) updates section throughout. It also adds program provisions.

0005.10 (Minnesota Transition Application Form (MTAF)) in MFIP, DWP adds and deletes language throughout for clarity.

0005.12.12 (Application Interviews) in general provisions in the 4th paragraph in the 1st and 2nd bullets deletes and adds language about forms required to be given and verbally reviewed with applicants. It also in SNAP adds 2 last paragraphs about forms that need to be verbally reviewed and provided to the applicant during the interview.

0005.12.12.01 (Forms/Handouts for Applicants) in SNAP adds a new 1st paragraph about forms that need to be verbally reviewed and provided to the applicant during the interview. It also in the now 2nd paragraph clarifies forms that need to be given to applicants but do not need to be verbally reviewed during the interview.

0007.12 (Agency Responsibilities for Client Reporting) in SNAP in the 1st paragraph adds that clients must be told what reporting type the unit will be and the reporting responsibilities for that type. It also adds appropriate cross-references.

0010.06 (Sources of Verification – Documents) in SNAP in the 2nd paragraph changes "household" to "unit".

0023.06 (Home Repairs) in MSA in the 2nd bullet adds "cooling" to systems eligible for home repair payments. It also adds a new last paragraph with a cross-reference to TEMP Manual TE02.08.035 (How to Issue Special Needs Payments).

0023.09 (Household Furnishings and Appliances) in MSA adds a new last paragraph with a cross-reference to TEMP Manual TE02.08.035 (How to Issue Special Needs Payments).

0023.12 (Special Diets) in general provisions deletes cross-reference to TEMP Manual TE02.08.035 (How to Issue Special Needs Payments) as issuance of Special Diets is automated in MAXIS.

0023.24 (MSA Housing Assistance) in MSA updates the MSA Housing Assistance allowance to \$397.

MFIP, DWP:

The [Minnesota Transition Application Form \(DHS-5223E\) \(PDF\)](#) (MTAF) is a program change request form completed by families moving from DWP to MFIP. For information on what forms to include in the packet, see [0005.12.12.01 \(Forms/Handouts for Applicants\)](#).

WHEN TO USE THE MTAF

Use an MTAF when a request for MFIP is made within 30 days of the end of the 4th month of DWP. When a participant does not request MFIP within 30 days of the DWP benefits being exhausted, a new application must be completed to receive MFIP.

For additional information on assistance requests, see [0005.03 \(Assistance Requests\)](#).

The date on the MTAF and the date eligibility begins may or may not coincide. See [0022.12.02 \(Beginning Date of Eligibility\)](#).

To determine when a Minnesota Transition Application Form (MTAF) may be used in place of a CAF Addendum, see [0008.06.06 \(Adding a Person to the Unit - Cash\)](#).

WHO MUST SIGN THE MTAF

The following people must sign the MTAF:

- All adult members of the unit or their authorized representative.
- The spouse of an assistance unit member, if the spouse lives with the applicant.
- The parents and stepparents of a minor child, if they live with the applicant.
- All minor caregivers.

MTAF PROCESSING

Do the following when processing an MTAF:

- Review the MTAF for completeness. A complete MTAF is signed and dated with all questions answered. No interview is needed.
- Determine eligibility no later than 30 days following the date the MTAF was filed. Clients must be eligible for assistance on the date you approve the case.
- Verify mandatory and inconsistent items. See [0010.18 \(Mandatory Verifications\)](#), [0010.21 \(Verification Due Dates\)](#). Do not require additional verification of information already in the case file unless the information is inaccurate or questionable.
- Send a notice. See [0026 \(Notices\)](#).

DELAYS IN PROCESSING THE MTAF

It may not be possible to determine eligibility within the time frames listed because clients fail or refuse to provide information. In these cases, deny assistance.

For processing delays not due to client failure or refusal to provide information, send clients written notice of the delay and its cause. The notice must also tell clients what they must do to complete the MTAF and that they must report any changes in circumstances since they filed the MTAF.

Send a notice of processing delay by the 30th day if the MTAf will take more than 30 days to process.

WITHDRAWING AN MTAf

People may withdraw the MTAf by using 1 of the following methods:

- Oral request.
OR
- Written statement.
OR
- Writing "withdrawn" on the MTAf and initialing it.

After approving the withdrawal, MAXIS sends a written notice to confirm the withdrawal.

REINSTATING A WITHDRAWN MTAf

Reinstate a withdrawn MTAf when:

- Requests to reinstate a withdrawn MTAf must be in writing. In addition, the county agency must receive the request within 10 days from the date you sent the withdrawal confirmation notice.
- Reinstate the MTAf to the date of the original MTAf when people meet the requirements.
- When people do not meet the requirements to reinstate an MTAf, they must file a CAF.

SNAP, MSA, GA, GRH:

No provisions.

Conduct an interview with applicants or their authorized representatives before determining eligibility. Some programs require a face-to-face interview.

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:

- Some forms are required to be given and verbally reviewed with applicants. See [0005.12.12.01 \(Forms/Handouts for Applicants\)](#) for more information.
- Review all information on the submitted application with the applicant. If a [Combined Application Form \(DHS-5223\) \(PDF\)](#) (CAF) is submitted, remove the attached forms from the CAF and give them to the applicant. Make sure the application is complete. See [0005.12.03 \(What is a Complete Application\)](#). Review each question on the submitted application even if the client has answered "No" to the question. For those submitting an [APPLYMN](#) application, use the [Combined Application Form \(DHS-5223\) \(PDF\)](#) as a guide to determine which questions to ask.
- 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, if necessary. See [0010 \(Verification\)](#).
- If an applicant indicates they are over income or assets on the Combined Application Form, follow the provisions in [0015.72 \(Excess Assets - Applicants\)](#), [0017 \(Determining Gross Income\)](#).

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 complete a new application and have another interview.

MFIP:

Conduct an interview before determining eligibility. The interview may be with any caregiver(s) of the unit or their authorized representative. If an applicant requests MFIP during the SNAP phone interview, a separate face-to-face or telepresence interview must be completed, unless they are eligible for a telephone interview. If a face-to-face interview is required for MFIP, continue the SNAP interview process and schedule the MFIP interview. Clients must be informed of their options.

The interview must be conducted, either:

- Face-to-face in the county office.
- Internet telepresence.
- At a location mutually agreed upon.
- Telephone interview, only if the client received MFIP or DWP in the past 12 months.

Refer people to the appropriate county person if they request help with family violence issues. See [0005.12.12.09 \(Family Violence Provisions/Referrals\)](#). Give the client the [Family Violence Referral \(DHS-3323\) \(PDF\)](#). 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 \(DHS-4026\) \(PDF\)](#) 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 \(Opting Out of MFIP Cash Portion\)](#).

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 \(Determining the Cash Assistance Unit\)](#).

Inform applicants EBT card cash benefits cannot be used or accessed in any liquor store, casino, gambling casino, gaming establishment, or retail establishment, which provides adult-oriented entertainment in which performers disrobe or perform in an unclothed state for entertainment.

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?" \(DHS-3551\) \(PDF\)](#).
- Ensure that SNAP is 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 agency must screen for expedited SNAP on the date of application. For applications screened as expedited, offer a same

day interview. See [0004.06 \(Emergencies – 1st Month Processing\)](#). For non-expedited applications, an interview may still be completed on the date of application.

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. Counties and tribes may use SPEC/MEMO to notify the applicant of the scheduled interview. See TEMP Manual TE02.05.15 (Notice of Interview/Missed Interview (NOMI)) for suggested text. The county or tribe must schedule all interviews as promptly as possible to ensure eligible units receive an opportunity to have 10 days to provide any needed verifications and to participate within 30 days after the application is filed. This means that the interview must be scheduled within 20 days from the application date in order to give the applicant 10 days to return any mandatory verifications.

If the application is:

- Delivered in person, give the applicant written confirmation of the interview date, time and location.
- Sent in the mail, by fax or placed in a drop box, and an interview is not completed with the applicant within 2 business days, send written confirmation of the interview date, time and location.
- Submitted through ApplyMN and an interview is not completed with the applicant within 2 business days, send written confirmation of the interview date, time and location.

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 and tribes MUST accommodate the client's choice. There is NO requirement that the interview must be held in the office. If an in-office interview is not done, the county or tribe must arrange for a phone interview or a face-to-face interview at a location mutually agreed upon by the county or tribe and the client.

A face-to-face home interview must be provided when a client requests and meets 1 of the following hardship conditions listed below:

- Illness.
- Transportation difficulties.
- Care of a unit member.
- Hardships due to living in a rural area.
- Prolonged severe weather.
- Work or training hours that prevent the client from participating in an in-office interview.
- Other conditions that prevent the client from participating in an in-office interview.

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 them 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 Interview/Missed Interview (NOMI)). 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 \(Recertification Interview\)](#).

During the interview certain forms need to be verbally reviewed and provided to the applicant. These forms are:

- The [Supplemental Nutrition Assistance Program reporting responsibilities \(DHS-2625\) \(PDF\)](#).
- The [Client responsibilities and rights \(DHS-4163\) \(PDF\)](#).

For more information on the additional forms that need to be provided to applicants, see [0005.12.12.01 \(Forms/Handouts for Applicants\)](#).

MSA, GA, GRH:

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. Do not require a face-to-face interview. The interview may be with any responsible member of the unit or his/her authorized representative.

Certain forms must be given to all applicants. Other forms are required based on the program(s) being applied for. If the program(s) being applied for is known, forms for those programs can be given in the application packet or at the interview, if one is required. If the interview is conducted over the phone, send the required forms by mail.

PAPER APPLICATION PACKETS

Counties and tribes must have paper application packets available to give or send to clients.

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

- [Combined Application Form \(CAF\) \(DHS-5223\) \(PDF\)](#). Attached to the CAF and the [Supplemental Nutrition Assistance Program \(SNAP\) Application for Seniors \(Individuals and couples age 60 and older\) \(DHS-5223F\) \(PDF\)](#) are the following:
 - [Notice of Privacy Practices \(DHS-3979\) \(PDF\)](#).
 - [Client Responsibilities and Rights \(DHS-4163\) \(PDF\)](#).
 - [Notice About Income and Eligibility Verification System and Work Reporting System \(DHS-2759\) \(PDF\)](#).
 - [Important Information \(DHS-3353\) \(PDF\)](#).
- 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, child care and health care programs \(DHS-2920\) \(PDF\)](#).
- [Domestic Violence Information \(DHS-3477\) \(PDF\)](#). See [0029.36 \(Domestic Violence Brochure\)](#).
- [Do you have a disability? \(DHS-4133\) \(PDF\)](#). 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 \(DHS-2120\) \(PDF\)](#).
- [Combined Six-Month Report \(CSR\) \(DHS-5576\) \(PDF\)](#).
- [Change Report Form \(DHS-2402\) \(PDF\)](#). See [0007 \(Reporting\)](#), [0007.12 \(Agency Responsibilities for Client Reporting\)](#), [0007.15 \(Unscheduled Reporting of Changes - Cash\)](#), [0007.15.03 \(Unscheduled Reporting of Changes - SNAP\)](#).
- [Authorization for Release of Information About Residence and Shelter Expenses \(DHS-2952\) \(PDF\)](#), 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 \(Providing/Applying for an SSN\)](#).

ELECTRONIC APPLICATION PACKETS VIA APPLYMN

Regardless of the program(s) being applied for, [ApplyMN](#) applicants have access to the following forms within ApplyMN.

- [Program information for cash, food, and child care programs \(DHS-2920\) \(PDF\)](#).

- [Do you have a disability? \(DHS-4133\) \(PDF\)](#).
- [Notice of Privacy Practices \(DHS-3979\) \(PDF\)](#).
- [General Assistance \(DHS-2062\) \(PDF\)](#).
- [Minnesota's Diversionary Work Program \(DHS-4034\) \(PDF\)](#).
- [Minnesota Family Investment Program \(DHS-3179\) \(PDF\)](#).
- [Minnesota Supplemental Aid \(DHS-1888\) \(PDF\)](#).
- [Supplemental Nutrition Assistance Program \(DHS-2814\) \(PDF\)](#).

ApplyMN applicants have access to required forms for the program(s) for which they applied. Applicants must check the box in front of each form attesting they have reviewed the materials before the ApplyMN application can be submitted:

- [Notice of Privacy Practices \(DHS-3979\) \(PDF\)](#).
- [Client Responsibilities and Rights \(DHS-4163\) \(PDF\)](#).
- Authorization for Sharing Information and Assignment of Benefits.
- [Notice About Income and Eligibility Verification System and Work Reporting System \(DHS-2759\) \(PDF\)](#).
- [Important Information \(DHS-3353\) \(PDF\)](#).
- Additional Important Information.
- Penalty Warnings.
- Employment Services Registration.
- [Domestic Violence Information \(DHS-3477\) \(PDF\)](#).
- [Do you have a disability? \(DHS-4133\) \(PDF\)](#).
- [How to Use Your Minnesota EBT Card \(DHS-3315A\) \(PDF\)](#).
- Civil Rights Notice.
- [Supplemental Nutrition Assistance Program reporting responsibilities \(DHS-2625\)](#).
- [Facts on Voluntarily Quitting Your Job If You Are on the Supplemental Nutrition Assistance Program \(SNAP\) \(DHS-2707\)](#).
- [Work Registration Notice \(DHS-7635\)](#).

ADDITIONAL PROGRAM SPECIFIC FORMS

Give the following forms/handouts based on the programs applied for and the circumstances of the case at the interview or send them out if the interview is conducted over the phone. Check the cross-referenced sections for procedures for each form/handout listed.

MFIP:

- [Reporting Responsibilities for MFIP Households \(DHS-2647\) \(PDF\)](#). 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 \(DHS-3393\) \(PDF\)](#).
 - [Referral to Support and Collections \(DHS-3163B\) \(PDF\)](#). (This is in addition to the Combined Application Form or ApplyMN application, for EACH non-custodial parent). See [0012.21.03 \(Support From Non-Custodial Parents\)](#).
 - [Cooperation with Child Support Enforcement \(DHS-2338\) \(PDF\)](#). 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 \(DHS-2929\) \(PDF\)](#). See [0028.09 \(ES Overview/SNAP E&T Orientation\)](#).
 - If there is a custodial parent under 20, the [Notice of Requirement to Attend School \(DHS-2961\) \(PDF\)](#) and [Graduate to Independence - MFIP Teen Parent Informational Brochure \(DHS-2887\) \(PDF\)](#). If there is a custodial parent under age 18, the [MFIP for Minor Caregivers \(DHS-3238\) \(PDF\)](#) brochure. See [0012.06 \(Requirements for Caregivers Under 20\)](#), [0028.06.03 \(Who Must Participate in Empl. Services/SNAP E&T\)](#), [0028.12 \(Education Requirements\)](#).
 - [Family Violence Referral \(DHS-3323\) \(PDF\)](#) and [Domestic Violence Information \(DHS-3477\) \(PDF\)](#).
 - If a non-parental caregiver applies, [MFIP Child Only Assistance \(DHS-5561\) \(PDF\)](#).
 - For all applicants, [How to Use Your Minnesota EBT Card \(DHS-3315A\) \(PDF\)](#).

DWP:

Follow MFIP, EXCEPT do not give the [Notice of Requirement to Attend MFIP Overview \(DHS-2929\) \(PDF\)](#) to the applicants. Instead, give the applicant the [Minnesota's Diversionary Work Program-DWP \(DHS-4034\) \(PDF\)](#).

SNAP:

For all applicants give and verbally review during the interview:

- The [Supplemental Nutrition Assistance Program reporting responsibilities \(DHS-2625\) \(PDF\)](#).
- The [Client responsibilities and rights \(DHS-4163\) \(PDF\)](#). See [0005.12.12 \(Application Interviews\)](#), [0007.12 \(Agency Responsibilities for Client Reporting\)](#) for more information.

Give the forms below to all applicants. These forms do not need to be verbally reviewed during the interview.

- [Facts on Voluntarily Quitting Your Job If You Are on the Supplemental Nutrition Assistance Program \(SNAP\) \(DHS-2707\) \(PDF\)](#). See [0028.30.09 \(Refusing or Terminating Employment\)](#).
- [How to Use Your Minnesota EBT Card \(DHS-3315A\) \(PDF\)](#).
- [Work registration notice \(DHS-7635\) \(PDF\)](#).

If there is student income, also give the [Financial Aid Information Form \(DHS-2646\) \(PDF\)](#). See [0010.18.30 \(Verifying Student Income and Expenses\)](#).

MSA, GA, GRH:

- [SSI Interim Assistance Authorization \(DHS-1795\) \(PDF\)](#) and/or [Interim Assistance Agreement \(DHS-1795A\) \(PDF\)](#), if appropriate. See [0012.12 \(Applying for Other Benefits\)](#), [0012.12.03 \(Interim Assistance Agreements\)](#).

MAXIS provides a [Household Report Form \(DHS-2120\) \(PDF\)](#) or a [Combined Six-Month Report \(CSR\) \(DHS-5576\) \(PDF\)](#) and a return envelope (DHS-824B) to clients subject to monthly or Six-Month reporting.

Require only 1 report form from clients who report for more than 1 program. One report form with signatures for 2 separate cash assistance cases who receive SNAP together covers both cash assistance cases and the SNAP case.

Assist people who need help to complete a report form.

Give the following to all clients subject to scheduled reporting at intake, recertification, or when they must begin scheduled reporting:

- An explanation of the purpose of scheduled reporting and prospective or retrospective budgeting.
- An explanation of how to complete and return the HRF/CSR.
- An explanation of the verifications they must submit with the report form and how to get those verifications.
- A toll-free telephone number to ask questions and get help to complete the report form. The county must accept collect calls if the county does not have a toll free phone number.

MFIP:

Give all units subject to scheduled reporting the [Reporting Responsibilities for MFIP Households \(DHS-2647\) \(PDF\)](#).

Counties may give the [Change Report Form \(DHS-2402\) \(PDF\)](#) to units. See [0007.15 \(Unscheduled Reporting of Changes - Cash\)](#).

DWP:

Counties may give the [Change Report Form \(DHS-2402\) \(PDF\)](#) to units. See [0007.15 \(Unscheduled Reporting of Changes - Cash\)](#).

SNAP:

It is required to give and review with clients the [Supplemental Nutrition Assistance Program Reporting Responsibilities \(DHS-2625\) \(PDF\)](#) at application and recertification. You must tell the client what reporting type the unit will be and the reporting responsibilities for that type. See [0005.12.12.01 \(Forms/Handouts for Applicants\)](#), [0007.03.01 \(Month Reporting - Uncle Harry FS\)](#), [0007.03.02 \(Six-Month Reporting\)](#), [0007.03.05 \(Change Reporting\)](#), [0009.06 \(Recertification Process\)](#).

Counties must act on all changes within 10 days of the date the change was reported, regardless of whether the unit was required to report the change during their certification period. The action taken depends on the change, which could include, but is not limited to, requesting verification and adjusting eligibility and/or benefits as needed. The timeline for when benefits are adjusted depends on the change and when verification is returned. See [0002.31 \(Glossary: Honoraria...\)](#), [0007.15.03 \(Unscheduled Reporting of Changes - SNAP\)](#), [0008.06.01 \(Implementing Changes - Program Provisions\)](#), [0026.12 \(Timing of Notices\)](#), [0026.12.03 \(10 Day Notice\)](#)

MSA, GA, GRH:

Counties may give the [Change Report Form \(DHS-2402\) \(PDF\)](#) to units who report monthly.

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. For electronic verification, see [0010 \(Verification\)](#).

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, 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.

The agency can use a signed personal statement as verification of ineligibility based on the income and/or assets an applicant reports on the Combined Application Form. Inform the applicant of the reason they are ineligible.

SNAP:

Follow general provisions.

Do not deny an application or close a case based solely on an unverified statement of the unit's income. If a unit states on the SNAP application or during the interview that its countable income exceeds the gross income limit, follow application processing standards, verification and notice requirements. See [0005.12.15 \(Application Processing Standards\)](#), [10 \(Verification\)](#), [0026 \(Notices\)](#).

MSA, GA, GRH:

Follow general provisions.

The agency can use a signed personal statement as verification of ineligibility based on the income and/or assets an applicant reports on the Combined Application Form. Inform the applicant the reason they are ineligible.

MFIP, DWP, SNAP, GA, GRH:

No provisions.

MSA:

Payments for home repairs have these conditions:

- The client must own and live in the home.
- The request must be to repair the roof, foundation, wiring, heating/cooling system (including chimney) or water and sewer system.
- The client must document the need for the repair.
- The payment must be reasonable when considering the condition of the home against alternate cost-effective housing.
- The county agency must verify the client does not have sufficient liquid assets (or assets that can be liquidated in time to help) to pay for the repair. Clients must apply available assets toward the cost of the repair with the county paying the difference.
- The county agency must determine if alternate resources are available for all or part of the repair cost.
- The client must provide at least 1 estimate of the repair cost. The county agency can require 2 additional estimates if it determines the 1st one is excessive. Pay the cost of estimates with special need funds.

There must be a written agreement between the county agency and the vendor when the agency pays the vendor directly. The vendor must complete the work before payment.

Also see TEMP Manual TE02.08.035 (How to Issue Special Needs Payments).

MFIP, DWP, SNAP, GA, GRH:

No provisions.

MSA:

Limit payment for an item to once in a 3-year period. The limit does not apply if the request is for repair or replacement due to damage, loss, normal wear and tear, or theft.

If the cost of an item exceeds the special need allowance, clients must verify they can pay the difference. Credit arrangements that allow immediate possession of an item satisfy this requirement; layaway agreements do not.

Covered items and maximum payment amounts are:

- Bed:
 - Complete twin size \$ 72
 - Complete full size \$116
 - Twin mattress or box spring \$ 27 each
 - Full mattress or box spring \$ 49 each
 - Frame, either size \$ 18
- Bedding (blanket, pillow and case, sheets) \$ 20
- Chest of drawers \$ 26
- Child's car seat \$ 35
- Clothes dryer \$ 93
- Cooking stove or range \$ 80
- Couch \$ 74
- Crib and mattress \$ 49
- High chair \$ 16
- Kitchen chair \$ 10
- Kitchen table \$ 24
- Lamp \$ 13
- Layette \$ 35
- Living room chair \$ 24
- Living room table \$ 10
- Refrigerator \$ 93
- Washing machine \$ 93

- Water heater \$186

Also see TEMP Manual TE02.08.035 (How to Issue Special Needs Payments).

MFIP, DWP, SNAP, GA, GRH:

No provisions.

MSA:

A special need allowance for a special diet may be paid to MSA clients who are not residents of a nursing home, regional treatment center, or group residential housing facility.

Add an amount for special diet requirements to the monthly assistance standard. See below for the amount to add for a specific diet.

A licensed physician, advanced practice registered nurse, or physician assistant must prescribe the special diet(s). Verify the need at each recertification or more often if warranted. Do not require a unit to verify actual food expenditures. Another funding source must not be available to pay the diet costs.

The eligible diets and amounts are:

• Anti-dumping diet	\$30.60
• Controlled protein diet (40-60 grams and requires special products)	\$204.00
• Controlled protein diet (less than 40 grams and requires special products)	\$255.00
• Gluten free diet	\$51.00
• High protein diet (minimum 80 grams/day)	\$51.00
• High residue diet	\$40.80
• Hypoglycemic diet	\$30.60
• Ketogenic diet	\$51.00
• Lactose free diet	\$51.00
• Low cholesterol diet	\$51.00
• Pregnancy and lactation diet	\$71.40

When a client requests a payment for more than 1 diet, use the following guidelines to determine payment:

- If the recommended diets overlap one another with respect to their dietary components, allow the amount indicated for the more costly of the diets.
- If there is no overlap in the recommended dietary components of the prescribed diets, allow the total for all the prescribed diets.
- If a doctor prescribed diets which are mutually exclusive, do NOT allow either until adequate clarification has been received from the doctor who prescribed both diets.

MFIP, DWP, SNAP, GA, GRH:

No provisions.

MSA:

MSA Housing Assistance is a recurring special need payment for clients whose housing costs exceed 40% of the unit's gross income. The amount of the MSA Housing Assistance allowance is \$397. This allowance amount is equal to half of the individual SSI federal benefit rate as of July 1st each year. See [0029.06.03 \(Supplemental Security Income Program\)](#). If the client is eligible for MSA Housing Assistance the "living alone" assistance standard is always applied, regardless of living situation. [0020.21 \(MSA Assistance Standards\)](#)

To be eligible for MSA Housing Assistance, an applicant must meet ALL the following requirements:

- Meet a basis of eligibility for MSA. See [0013.09 \(MSA Bases of Eligibility\)](#).
- Be under the age of 65. A client under the age of 65 who is receiving MSA Housing Assistance and turns age 65 can continue to receive the allowance until subsidized housing becomes available.
- Have total shelter costs that exceed 40% of the unit's gross income before application of this allowance. See SHELTER COSTS in [0002.61 \(Glossary: Self...\)](#). Use actual utility expenses whenever possible.

AND

- Meet 1 of these conditions:
 - Relocating to the community from an institution, intensive residential mental health treatment program, or GRH setting. See INSTITUTION in [0002.33 \(Glossary: Independent...\)](#).
 - OR
 - Eligible for MA personal care assistance (PCA) services.
 - OR
 - A recipient of MA waiver services living in his or her own home or rented or leased apartment.

NOTE: A client in an institution may already be eligible for MSA, but would not be eligible to receive the MSA Housing Assistance allowance until after the move from the institution. A client in an institution and not eligible for MSA may become eligible upon discharge.

An MSA client who receives rental assistance or lives in subsidized housing is not eligible for MSA Housing Assistance.

