



801-3 TANF Extended Benefit Policy/Procedure

Bulletin TB-61	<p>DATE: February 2, 2011</p> <p>TO: All TANF Cash Assistance Policy Manual Holders All WoRC Guidelines Manual Holders</p> <p>FROM: Del Bock, TANF Program Manager</p> <p>SUBJECT: Bulletin TB-61</p> <p>TANF Manual: Place this bulletin at the beginning of TANF Manual Section 801-3 and at the beginning of WoRC Guidelines Section 4.4.</p> <p>=====</p> <p>SECTION: Time Limited Assistance</p> <p>SUBJECT: TANF Extended Benefit Policy/Procedure</p> <p>EFFECTIVE DATE: Upon Receipt</p> <p>INTRODUCTION: Currently to make a determination on an extended benefit application, the application is sent to Central Office for review. The Central Office committee makes the determination and informs the WoRC and OPA staff, who are affiliated with the case, of the decision.</p> <p>Due to the low number of extended benefit cases Central Office is designating a new committee, made up of OPA/WoRC staff, to make these determinations.</p> <p>NEW POLICY: Effective immediately Central Office will no longer make determinations on extended benefit applications; an extended benefit committee, made up of select individuals designated by the Public Assistance Bureau, will make the determination. If the case involves WoRC, the extended benefit committee must include at the minimum the OPA Supervisor or Designee, WoRC Supervisor, WoRC case manager and WoRC monitor.</p> <p>Instead of sending the application on for Central Office staff to review the OPA Supervisor or Designee must contact all members of the extended benefit committee and schedule a meeting or a conference call to review the application packet.</p> <p>The committee that has been formed in your area will review the materials provided and make a determination on the application packet based on the policy set forth in TANF 801-3. If the committee approves the application they would then</p>
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	<p>rely on the WoRC monitor to develop appropriate activities.</p> <p>If the case does not involve WoRC (e.g., referral to Tribal NEW), the extended benefit committee must include the OPA Supervisor or designee and the Tribal NEW case manager but must also include the WoRC Monitor for consistency.</p> <p>HCS – 177 Currently the HCS 177 asks the OPA Case Manager and the County Director/Designee to make a recommendation. To ensure that both WoRC and OPA are able to make a recommendation the WoRC case manager will complete the section titled OPA CaseManager. The Social Service Specialist/Designee will make their recommendation under the section titled County Director/Designee. Once the recommendations are completed, the form is provided to the extended benefit committee for review and approval/denial.</p> <p>The white copy of the form must be completed and retained by the WoRC Monitor. The yellow copy of the form must be retained in the OPA case file and the pink copy of the form will be retained in the WoRC case file.</p> <p>Changes to the form will be made the next time the form is up for reorder.</p> <p>The WoRC monitor will be responsible for entering a case note outlining the details of the extension approval/denial. If the application has been approved the activities must be included in the case note.</p> <p>OPA will retain a copy of all the documents submitted in the participant’s case file.</p> <p>ADDITIONAL INFORMATION: Approval or denial notices will be sent by the OPA as usual including any language that has been agreed upon by the extended benefit committee.</p> <p>UPDATED MANUAL MATERIAL WILL BE DISTRIBUTED AS SOON AS POSSIBLE, UNTIL THAT TIME, USE THIS BULLETIN AS A GUIDE. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT YOUR REGIONAL POLICY SPECIALISTS.</p>
Supersedes:	TANF 801-3 (01/01/09); TB-41 (03/24/08)
References:	ARM 37.78.102, .201 and .202; ARM 37.5.316 and .505;45 CFR 264.1(c)
Overview:	<p><u>GENERAL RULE</u>—Federal regulations allow states to extend TANF benefits to no more than 20% of the average annual statewide caseload for households that include an adult who has received 60 or more months of TANF cash assistance.</p> <p>Households will not automatically be evaluated for TANF cash assistance extended benefits. Neither OPA nor WoRC case managers should encourage or discourage households submitting an application. It will be incumbent upon each household to request consideration for and comply with the application/eligibility determination process. This request can be verbal.</p>
OTHER ASSISTANCE	Extended benefit households may, if otherwise eligible, qualify for:

AVAILABLE	<ol style="list-style-type: none"> 1. Supportive Service payments (704-1), 2. Block Grant Child Care (901-1)
BASIC REQUIREMENTS	<p>Montana will extend TANF cash assistance payments beyond REQUIREMENTS the Federal 60-month limit to households that meet all of the following:</p> <ol style="list-style-type: none"> 1. Apply for extended benefits; 2. Are otherwise eligible for TANF cash assistance; <p>NOTE: The HCS/CS-332 must be completed in the instance an individual is applying for TANF extended benefits and there has been a break in benefits. An individual who is currently receiving TANF cash assistance does not need to complete a new set of 332's as this requirement has already been met.</p> <ol style="list-style-type: none"> 3. At least one adult must be coded and 4. All individuals with an meet one of the following extension reason criteria: <ol style="list-style-type: none"> a. Physical/Mental Incapacity of Participant (PMI); b. Physical/Mental Incapacity of Participant resulting from Domestic Violence (PMD); c. Needed in Home - Physical/Mental Incapacity of Household Member requiring Caretaker (NIH); d. Domestic Violence (DMV); or e. Administrative Issuance (ADM). <p>Monthly benefits will be issued to eligible households according to TANF cash assistance benefit standards. In addition, these households are:</p> <ol style="list-style-type: none"> 1. Subject to all TANF cash assistance eligibility requirements; 2. Required to participate in activities from the date of application; and 3. Subject to all TANF reporting requirements.
EXTENSION CRITERIA DETAILED	<p>Physical/Mental Incapacity of Participant (PMI): Either a temporary or permanent mental or physical illness or incapacity that prevents the individual from working any type of job. The participant must provide proof of the illness or incapacity as follows:</p> <p>Provide verification they receive disability payments from SSDI also known as SSDIB</p> <p>Provide copies of what has already been given to the Social Security Administration for a pending application or appeal (including a copy of the application and medical verification submitted with the application); or</p> <p>Complete the "Illness/Incapacity Determination for Extended TANF Cash Assistance" (HCS-176) and provide medical verification such as the 209 "Request for Health/ Employability Evaluation of Extended Benefits" (HCS-209) completed by each medical provider.</p>

Physical/Mental Incapacity resulting from Domestic Violence (PMD): When an individual meets the above criterion for PMI and states the illness or incapacity is the result of domestic violence use the reason code PMD instead of PMI. All the above verification must still be provided.

Medical Verification PMD/PMI - Case managers must provide HCS-209 (“Request for Health/Employability Evaluation of Extended Benefits”) forms to all TANF applicants claiming PMI or PMD. Unsigned forms cannot be sent to medical providers. If the adults fail to sign the HCS-209 forms case notes must be documented stating the client chose not to use the forms and will provide other medical verification. If the client provided verification is incomplete or questionable, additional information can be a condition of eligibility.

Needed in Home - Physical/Mental Incapacity of Household Member (NIH): The individual is needed in the home full-time as the primary caretaker for a filing unit member or a person who would be a member of the filing unit if the person was eligible. The person needing care must have a temporary or permanent mental or physical illness or incapacity and no other care is available. The participant must provide proof (statement from a physician) of all the following:

1. The household member's illness or incapacity;
2. That the household member needs full-time care; and
3. The participant is the only person who can provide that full-time care.

NOTE: The HCS 205 may not be used as verification for extended benefit purposes.

Domestic Violence (DMV): The participant is attempting to resolve a current domestic violence situation. A participant may receive extended benefits due to current domestic violence in six-month blocks of time. To qualify for extended benefits using the domestic violence extension reason, the participant must provide the following application materials as proof:

1. HCS 175-Extended Benefit Application;
2. HCS 176-Illness/Incapacity Determination for Extended TANF Cash Assistance (recommended but not required)
3. HCS 326-Domestic Violence Screening Questionnaire
4. of the current domestic violence situation. This evidence can include written statements from other individuals (including but not limited to friends, neighbors, advocates, others), personal records of domestic violence, completed screening guide, police reports, medical records, statement from a service provider, etc.; and

	<p>5. that the individual has made contact with a domestic violence program, support group, advocate, women's shelter or the Montana Coalition Against Domestic and Sexual Violence (1-888-404-7794).</p> <p>Administrative Issuance (ADM): The Administrative Issuance code will be used to report those households which, due to special circumstances, were issued TANF benefits in Montana beyond 60 months. They will be included in the 20% exception group.</p>
SANCTIONS	Sanctions for non-compliance with WoRC end when the 60th month is used. Therefore, a household cannot have a penalty month or Ineligibility month for their 61st month. Non-compliance with required activities during an extended period results in case closure. Sanction policy in section 702-3 does not apply to extended benefit cases.
WHO MUST BE EVALUATED FOR AN EXTENSION	<p>All family members in the household must meet extension criteria before anyone in the home can receive extended TANF benefits.</p> <p>NOTE: Individuals who receive SSI do not need to meet extension.</p> <p>NOTE: If there was a minor child included in the assistance unit in the 60th month who was an optional assistance unit member (e.g. niece, etc.), the case cannot be switched to a child only grant after month 60 unless the adult has been approved for SSI.</p>
HSC-178 MANUAL EXTENSION NOTIFICATION	<p>In instances that an automatic letter cannot be sent or the case has been closed since the last time the letter was sent and the month of application is the 58th month or higher (e.g., the applicant has already received 60 months of assistance in another state), the Social Service Specialist will be required to notify the household using the HCS-178 (TANF Cash Assistance Extension Notification/Application Request).</p> <p>The HCS-178 (TANF Cash Assistance Extension Notification/Application Request) can also be used as a tool to notify any household, that has used 48 or more months of TANF, of Montana's extension policy. However, applications should not be made until they are in their 58th month</p> <p>(An HCS-250 is only required if the effective date of closure has passed.)</p>
EMPLOYABILITY PLAN-EXT. PENDING	Applicants for extended TANF cash assistance must be referred to WORC while the application is pending. Applicant activities are generally related to gathering needed verification to determine eligibility as well as work related activities. Compliance with the plan while the application is pending or a history of sanctions are not a consideration in extension approval or denial.
PROCESSING(HCS-175 TIME FRAMES (Calendar days)	<p>An application is valid for 30 days from the date the application (HCS-175 if open on TANF or HCS-250 if not open) is received in the within this 30-day time period. This time limitation serves to protect the applicant's right to receive benefits in a timely manner.</p> <p>If there is a delay in processing beyond 30 days due to the actions of a third party</p>

	that is beyond the control of the Social Service Specialist and/or the applicant/participant, the processing time frames may extend beyond 30 days, if approved by Central Office. All delays must be documented in case notes.
START DATE OF BENEFITS	The start date of benefits on the system is the first day of the 61st month for ongoing cases (HCS-175 only). For new applications (both HCS-250 and HCS-175 required) the start date is the date the front page of the HCS-250 is date stamped by OPA provided the “work eligible” adults enroll in WoRC within 3 working days of the referral, within 3 working days of the WoRC component start date or have good cause for failing to enroll within the allowable timeframes. See application processing TANF 103-5 for prorated benefits.
APPLICATION DATE	<p>An application date is only needed for new applicants or those that have been sent a closure notice due to time limits.</p> <p>The date of application is:</p> <ol style="list-style-type: none"> 1. The date the HCS-250 is received for new applicants or households that apply after the effective date of closure. 2. The date the HCS-175 is received for closed cases where the: <ol style="list-style-type: none"> a. effective date of closure has not passed, (see NOTE) or b. ten days to provide additional verification extend past the effective date of closure. <p>NOTE: When the extension application (HCS-175) is received before the effective date of closure, an application is registered. Even though a new HCS-250 is not required, the case cannot be reverted to open.</p> <p>All extended TANF applications must be sent to Central Office even if the county plans to deny for no verification or at client request. This is required for accurate statewide tracking.</p>
FAIR HEARING	<p>Extended benefit households may request a fair hearing for any adverse action. However, continued extended cash assistance cannot be allowed while the fair hearing is pending. This is because continued benefits are not allowed when the department granted the benefit for a particular period of time and the contested action is the department’s denial of an additional grant of benefits. TANF cash assistance is granted only for 60 months in a participant’s lifetime. Extended benefits time limits are also a matter of law.</p> <p>When a request for a Fair Hearing is received that is solely related to extension denial or closure due to not meeting an extension criteria, notify the TANF Program Officer in Central Office of the hearing request. Central Office will conduct the hearing with assistance from the local OPA and the WoRC program.</p>
EMPLOYABILITY PLAN	Applicants for extended TANF cash assistance must be referred to WoRC while the application is pending. Applicant activities are generally related to gathering needed verification to determine eligibility as well as work related activities. Compliance with the plan while the application is pending or a history of sanctions are not a consideration in extension approval or denial.

	<p>When approved for extended benefits the employability plan must be modified so most participation activities are directly related to the extension reason criterion for which they qualified.</p> <p>WoRC case managers must have contact with extension participants at least bi-weekly. However, weekly contact is generally needed to assist the household in participation. The frequency of the contacts should be on a case-by-case basis.</p>
PARTICIPATION/ NON- COMPLIANCE	<p>Extended benefit households are not subject to current sanction policy. Compliance with TANF participation activities is an eligibility requirement even if their only component code has been approved by Central Office to be EBI (see 701-3 Participation Components).</p> <p>When any member of the extended benefit household fails to comply with negotiated activities without good cause <u>AND the WoRC Case Manager is not able to re-engage the participant in activities</u>, the extended benefit case must be closed with 10-day notice. Even though a household cannot be sanctioned during an extension, they still have a right to the good cause process. (See section 702-2 and 1509-)</p> <p>They cannot receive continuation of extended TANF benefits while the fair hearing is pending. However, if the hearing is in their favor benefits will be reinstated.</p>
REAPPLICATION AFTER NON- COMPLIANCE CLOSURE	<p>When an extension applicant reapplies within three months of their extended TANF being closed for non-compliance with negotiated activities, they must verify they are in full compliance with past activities or comparable activities to address their barriers. For example, a case is approved based on mental health concerns but a treatment plan cannot be finalized without continued counseling and a psychological evaluation. The case is closed for failure to attend counseling and failure to appear for a psychological evaluation without good cause. When the household reapplies still claiming to be totally unemployable due to mental health status, the adult must currently be attending counseling and be in the process of completing a psychological evaluation before extended TANF could be approved.</p>
Date Revised	January 1, 2010