

## 19.2 EMERGENCY ASSISTANCE

### A. INTRODUCTION

Emergency Assistance is used to assist individuals and families in meeting a financial crisis when they are without available resources. The program is designed to provide short-term emergency financial assistance with which eligible individuals and families may obtain certain items or services needed to eliminate an emergency or crisis. Those who are in need of and qualify for emergency financial assistance may already be participating in an economic or social service program.

Individuals and families who receive emergency financial assistance may also be in need of and be eligible to receive regular ongoing social services and/or medical or financial benefits from the Department.

As contained in the provisions under Title IV-A as established by Section 406(e) of the Social Security Act, federal matching funds are available to assist families with eligible children under the age of 21 who are destitute because they are without immediate resources to meet their needs.

### B. GENERAL ELIGIBILITY REQUIREMENTS

#### 1. Emergency Need Requirement

An applicant who meets the definition of being faced with an emergency need is one who:

- Is faced with an existing or imminent crisis of a nature that threatens the physical health, safety, and well-being of the applicant and his family, and
- Is without available resources with which he may immediately eliminate an existing crisis or prevent an imminent crisis.

When the applicant fails to meet either or both requirements indicated above, the application will be denied.

2. Time Limitation

Emergency financial assistance can be authorized once up to the maximum allowable payment for each item of need covered by the emergency assistance program to an eligible recipient for emergency situations during one period of thirty (30) consecutive days in any twelve consecutive months. Payments may be made to meet such needs which arose before this thirty day period or needs which may extend beyond the thirty day period. The first day of the thirty day period of eligibility begins with the date the Authorization for Payment (OFS-67) is approved for payment (the date entered below the space designated "approval" on the OFS-67 form) and ends twenty nine (29) days later.

The limitation of authorizing emergency financial assistance "once" as described above, does not mean that only one item of need may be authorized during one period of thirty (30) consecutive days in any twelve consecutive months. The applicant may request and be found eligible for more than one item of need provided that need is covered by the program. In addition, the applicant may return and make an additional application for another item(s) of need within the thirty (30) day period of eligibility and be found eligible provided he meets the program eligibility requirements. However, when the applicant reapplies during the thirty (30) day period of eligibility for the SAME item of need that he previously received the maximum allowable payment, the application must be denied.

**EXAMPLE:** An individual made application for Emergency Assistance on May 5, 1990, because he received a written notice from his landlord notifying him of an impending eviction June 1, 1990. His application was approved and

the OFS-67 was approved on May 10, 1990. Later, he returns on June 1, 1990 to request food and payment of a utility bill. Another application is taken, and the client is found eligible for payment of both items of need. Unless he is found eligible for emergency assistance based upon natural or man-made disaster, fire, or civil disorder, he will not be eligible to receive an additional authorization for emergency assistance until May 11, 1991.

THE ONLY EXCEPTION TO THIS RULE IS WHEN THE APPLICANT QUALIFIES FOR EMERGENCY ASSISTANCE BASED UPON NATURAL OR MAN-MADE DISASTERS, AND/OR FIRE.

The time limitation policy applies only to AUTHORIZATIONS for emergency assistance. For example, if an application is denied or withdrawn, this does not mean that the applicant cannot receive an authorization for emergency assistance via a second application within twelve months provided, of course, he meets the eligibility requirement. The local office will be responsible for developing and maintaining a control for all Emergency Assistance applications.

Authorizations for IV-A Homeless Benefits -

Emergency Assistance applicants on whose behalf IV-A Homeless benefits were authorized during the past twelve months do not meet the time limitations policy as it relates to Title IV-A funded Emergency Assistance benefits. Therefore, a IV-A eligible case can receive IV-A funded benefits from only one program (EA or Homeless) during one period of thirty consecutive days in any twelve consecutive months.

### 3. Citizenship

An applicant for Emergency Assistance does not have to be a resident of West Virginia. However, the applicant must be a United States Citizen, a national of the United States or an Eligible Alien (Qualified Alien) as shown in Chapter 18.4, Benefit Programs, Item B. Those who do NOT qualify for Emergency Assistance will be the following ineligible aliens:

- Illegal Entrants
- Visitors, Tourists, Students and Diplomats
- Aliens who status is questionable or unverified

4. AG's Subject to a Penalty

When the applicant is a member of an AG in which any Departmental program benefit was reduced, denied or closed because of a penalty for fraud, non-cooperation or failure to pursue potential resources, the applicant and members of that program's AG are ineligible to receive Emergency Assistance.

In making this determination , the following guidelines apply:

- The applicant and members of Emergency Assistance AG must have been an applicant or recipient of the Department's program that was reduced, denied or closed.
- The other Department program AG is in a penalty period at the time the application for Emergency Assistance is made.
- This policy applies to all other Department programs that apply penalties for non-cooperation, fraud or failure to pursue potential resources.

**NOTE:** The above stated guidelines include all WV WORKS sanctions.

When any of the situations described above exists, the AG is ineligible to receive Emergency Assistance until the penalty period ends or action is taken to pursue potential resources. This policy does not apply applicants who are denied because of failure to provide required information to establish eligibility.

In addition, this policy does not apply to persons who are excluded by law and are ineligible to receive benefits. Refer to Chapter 9 for specific information about individuals excluded by law. These individuals may apply in their own right for Emergency Assistance benefits.

5. Income

a. Income Policy

The Worker must determine availability of income to the applicant and any other member of the household who is a member of the AG. All countable income received by any member of the AG within the 30 day period of income consideration must be counted in determining eligibility for Emergency Assistance.

When considering countable income to determine eligibility for emergency assistance, the Worker must use the following guidelines:

- Only countable income shall be compared to the Monthly Allowable Income Schedule. (Refer to the schedule located in the Appendix).
- The total countable income of all members of the AG must be compared to the income schedule.
- Only countable income to be received by members of the AG beginning with date of application and ending 29 days later will be applied to the Monthly Allowable Income Schedule.
- Do not prorate income received prior to the 30 day period of income consideration as countable income.

- The Worker will use the current policy in making the decision whether to request verification of income. (Refer to Item D, Application Process, 2).

b. Determination of Countable Income

(1) Income Exclusions

The following sources of income will be excluded for determining eligibility for emergency assistance:

- All student loans, grants, scholarships, and college work study programs.
- Any payments made to volunteers under Title II, RSVP, Foster Grandparents, and others (and Title III SCORE and ACE) of the Domestic Volunteer Service Act of 1973.
- Payments under Alaskan Native Claims Settlement Act.
- Any payments received or funds held in trust for members of any Indian tribe under Public Laws: 98-64, 97-458, 98-123 and 98-124 referred to as "Indians Judgement Funds." Also, any funds from payment of relocation assistance to members of the Navajo and Hopi tribes under Public Law 93-531.
- Payments under Title I of the Domestic Volunteer Service Act of 1973 (VISTA, ACTION, University Year of Action, Urban Crime Prevention Program).
- Payments to volunteers in a program administrated through the U.S. ACTION Agency.
- Payments from Senior Companion Program funded under Title XX.
- The value of food coupons and commodities.

- The value of supplemental food program for women, infants and children (WIC) public Law 94-105.
- Value of National School Lunch Program, public law 90-302.
- Payment, allowances or reimbursements for transportation and attendant care costs Under Title VI of the Rehabilitation Act of 1973, Title II, Public Law 95-607.
- Payments from Community Service Employment Program (CSEP) as authorized under Title V of the Older Americans Act.
- Reimbursement for expenses incurred in connection with employment and training limited to mileage, tools and clothing.
- Reimbursement for medical expenses or for round trip transportation costs incurred to obtain medical treatment.
- Grants and loans from HUD Community Development Block Grant Funds made to individuals to rehabilitate their private residence.
- All JTPA payments except those considered as wages for on-the-job training.

(2) Income Deductions

The only income deductions permitted to determine countable income will apply only to those persons who are self-employed. After the Worker determines the amount of gross income to be received by the benefit group within the next 29 days after the date of application, twenty five percent will be deducted from the gross amount as the cost of doing business. The remainder will be countable income to be applied to the income chart. Self-employment will consist of persons who receive regular income from self-employment or in a service type business, persons involved

in seasonal self-employment, cash-crop farmers, and persons who care for other persons such as but not limited to personal care and adult family care.

(3) Total Countable Income of the Benefit Group

The total countable income of the entire benefit group must be counted regardless of the amount or type of income received within the thirty day period of income consideration:

**EXAMPLE:** An individual who made application on November 1 received a paycheck on October 31, and will receive a paycheck on December 1. These two paychecks are not considered as countable income. (Only income received beginning with November 1 through November 30 may be considered.)

Situations may occur when the countable income during the thirty day period of income consideration will exceed the maximum, but the applicant is in immediate need of Emergency Assistance because his paycheck(s) will not be received until several days after the date of application. In these situations, the benefit group will be found **INELIGIBLE** to receive Emergency Assistance. Workers must make every effort to see that these individuals receive assistance from community resources until they receive their income.

**EXAMPLE:** An individual makes application for Emergency Assistance on November 1. His countable income will exceed the maximum, but the income will not be received until November 15. His emergency will occur on November 10, but he will be found ineligible because his income exceeds the maximum.

The Worker should evaluate very closely the information obtained from the applicant. Applicants should be instructed to provide the income of each benefit group member. The Worker

must use care in determining the actual dates the income is to be received.



6. Assets

In determining eligibility for Emergency Assistance, the Worker must evaluate the availability of assets owned by members of the benefit group.

The following assets owned by members of the benefit group will be considered potentially available unless, as explained below, the assets cannot be used in time to eliminate or prevent the emergency:

- Cash.
- Savings and checking accounts.
- CD's and/or any other bank or savings and loan account.
- Stocks and bonds.
- Livestock (not being used to produce income consistent with its sale value nor house pets).
- Recreational vehicles and equipment.

**NOTE:** Recreational vehicles are defined as boats, gasoline-powered snowmobiles, etc., that may not fit the description of a "vehicle" yet may be converted to cash. Personal recreational equipment such as toys, fishing equipment, etc., will be excluded.

- Automobile(s) when there is more than one automobile owned per household.
- Cash surrender value of life insurance policies.
- Personal collections of value such as firearms, paintings, coin collections, etc.
- Non-homestead real property.

- Business equipment not being used to produce income consistent with its sale value.

The following assets owned by the benefit group members will not be considered potentially available toward eliminating or preventing the emergency:

- Homestead real property.
- Property which is producing income consistent with its sale value.
- Proceeds from sale of home or insurance received as a result of destroyed home when these proceeds are to be conserved for the purchase or rebuilding of a new home or for repairs to a partially destroyed home.
- Assets not readily available because of legal proceeding.
- Burial trust fund up to \$2,000 for each person in the benefit group.
- General household belongings such as furniture, appliances, clothing, etc.
- One automobile per household.

a. Determining the Availability of Assets

After the Worker has determined that the applicant or any other benefit group member owns countable assets, he must evaluate whether such assets can actually be used in time to eliminate or prevent the emergency.

In making this evaluation, the Worker must consider the type of asset(s) involved and whether it can be used to purchase the item of need(s) in time to eliminate or prevent the emergency.

(1) Liquid Assets

Assets such as but not limited to cash on hand, checking or savings accounts, CD's or any other

liquid instrument or account must be considered available as a resource and the applicant or members of the benefit group will be expected to use these assets toward the emergency. THE APPLICATION WILL BE DENIED IF MEMBERS OF THE BENEFIT GROUP REFUSE TO USE THIS RESOURCE.

Cash is defined as funds or money in the form of currency or any negotiable instrument that is in the possession of the applicant or any member of the benefit group at the time of application.

Income received prior to the date of application but not spent at the time of application would be considered cash. The Worker may request verification via receipts or verbal statements that such cash is unavailable (or available) for use as a resource.

**EXAMPLE:** A member of the benefit group receives a \$400 paycheck on the day before the application date. \$400 cannot be counted as income. However, the Worker can request the member to verify that none of the \$400 is available as a resource in the form of cash. If the Worker determines that cash is available, the member must use the amount toward the amount required to eliminate the emergency.

Cash must always be considered as an asset and is not to be confused with income. Although cash must always be used as a resource, the Worker is obligated to see that the benefit group is not faced with an additional emergency need as a result.

**EXAMPLE:** The applicant reports having \$75 cash at the time of application. He has requested payment of an overdue electric bill and submitted a termination notice in the amount of \$75. The worker must deny the application for the electric bill because the cash must be used as a resource. However, the Worker must determine that the benefit group is not faced with an additional emergency need during the thirty day period (beginning with the date of application) as a result of using the cash as a resource.

(2) Non-Liquid Assets

Assets such as recreational vehicles, non-income producing livestock, and business equipment usually must be sold and converted into cash to be used toward eliminating or preventing the emergency.

The Worker will consider the following guidelines in making the decision to request the applicant to convert a non-liquid asset into an available resource:

- Can the asset be converted into cash?
- If the benefit group makes a reasonable effort to pursue this action, will the resource be available in time to prevent an imminent emergency or immediately eliminate an existing emergency?

"Reasonable effort" is defined as the benefit group member actively attempting to convert his asset into an available resource in order to eliminate or prevent an imminent emergency. After giving careful consideration to the guidelines above, the Worker will then decide whether to request a conversion of the applicant's assets.

When the applicant or benefit group member is required to convert his assets to cash, he must receive a reasonable return or the fair market value rather than just the return needed to eliminate or prevent the emergency. If the applicant refuses to convert his assets into cash that the Worker feels in his best judgement and with supervisory consultation is available in time to eliminate the emergency, the application will be denied.

If the member of the benefit group agrees to convert the asset, yet fails in his attempt to do so, the Worker may request verification by asking the applicant to submit the name of the person(s) contacted. THE APPLICATION WILL BE DENIED IF THE MEMBER FAILS TO COOPERATE IN THE CONVERSION OF NON-LIQUID ASSETS.

#### 7. Available Community Resources

Meeting the emergency needs of individuals and families without resources is a responsibility for the community in which they reside. This includes all social welfare related agencies and certain individuals within the community.

##### a. Role of the Department

The Department will assume a major role in meeting the emergency needs of eligible applicants through emergency financial assistance funds and/or referral of the applicant to other agencies or individuals within the community that have available resources which can prevent or eliminate the emergency.

In some communities, arrangements have already been made for cooperative efforts between the Department and other community agencies in meeting emergency needs. Such arrangements are to be maintained and similar efforts established in other communities where they currently do not exist.

b. Worker Responsibilities

In evaluating the possibility of referring an applicant for emergency assistance to a community resource, the Worker must determine that the resource is available to the applicant and will eliminate or prevent the emergency. In some situations, the applicant, after being referred to a community resource, may be required to make application for benefits from the agency to which he was referred. However, the worker will consider the resource available until the applicant is refused or found ineligible to receive the benefits for which he applied.

Therefore, the Worker MUST follow-up with the applicant and/or the agency to determine if the benefits were actually received. If the agency or individual to which the applicant was referred cannot eliminate or prevent the emergency (even through a cooperative effort with the Department), the Worker will use Emergency Assistance funds provided all other eligibility factors were met. When referring an applicant to a community resource, therefore, the Worker cannot make a final decision on the application until it is determined that the applicant actually received or received on his behalf, the benefits and that the emergency has been eliminated or prevented.

In all situations after an application has been received and the Worker refers the applicant to a community resource, the Worker must provide the following written notification to the applicant: "You are being referred to (NAME OF AGENCY OR PERSON) to pursue potential assistance to alleviate any need you may have for emergency assistance. If you do not receive assistance or the amount of the assistance fails to eliminate your emergency, please contact (NAME OF COUNTY OFFICE) by (MONTH, DATE AND YEAR) for a decision on your application." The date entered on this notification must be within three days of the date of the application. The date of the application

will be counted as the first day. The Worker will attach a copy of this notification to the application form.

When the emergency need was met by community

resources, the Worker will deny the application.

c. Applicant Responsibilities

All applicants for emergency assistance must cooperate in a REASONABLE manner by accepting a referral to community resources in order to eliminate or prevent an emergency. FAILURE TO DO THIS WILL RESULT IN A DENIAL OF THE APPLICATION.

**EXCEPTION:** When the community resource is likely to be a church, friend, or relative of the applicant, permission must be obtained freely from the applicant before a Worker may contact to pursue this type of resource. The reason for this procedure is to give consideration for the applicant's feelings if his church, friends, or relatives were to become aware of his request for emergency assistance.

All applicants who are referred to a community resource but who do not receive the resource must contact the Worker by the due date on the referral notification form. FAILURE TO DO THIS WILL RESULT IN A DENIAL OF THE APPLICATION. All applicants who refuse to accept the source that is otherwise offered to them will be denied emergency assistance benefits.

Based on his knowledge of the applicant's capability, the Worker is required to make judgement on whether or not the applicant can follow through as it relates to his referral to community resources.

For example, a Worker should not refer an applicant to a community resource if he is unable because of illness, physical or mental handicap, lack of transportation, etc., to follow through on the referral. On the other hand, the applicant will be expected to take whatever action is necessary to

follow through on the referral process provided such action is within his capability to do so.

In making referrals to community resources, the Worker will assist the applicant by contacting the receiving agency to make an appointment if this is appropriate. In addition, the Worker will provide any other helpful instructions as appropriate. (Such as directions to the agency's location, information needed for the application process, person to be contacted, etc.)

ANY APPLICANT FOR EMERGENCY ASSISTANCE WHO IS CAPABLE YET REFUSES TO COOPERATE OR FOLLOW THROUGH IN A REASONABLE MANNER WHEN REFERRED TO AN AVAILABLE COMMUNITY RESOURCE WILL BE DENIED EMERGENCY ASSISTANCE.

8. Medicaid and Food Stamps

If there is an indication that the applicant may be eligible for Medicaid and/or Food Stamps, the Worker must explore this as a method to eliminate or prevent the applicant's emergency. TANF will not be used to eliminate or prevent the applicant's emergency.

If the applicant is found eligible for Medicaid or Food Stamps and he can obtain the benefits in time to prevent the emergency, the applicant will be expected to accept this as a resource instead of Emergency Assistance. If the applicant refuses to cooperate in this situation, his application for Emergency Assistance will be denied.

If the applicant is eligible for Medicaid and/or Food Stamps but cannot obtain this assistance in time to prevent the emergency, the Worker will complete the Emergency Assistance application and authorize payment if the applicant is found eligible.

9. Applicant's Acceptance of Social Services

Individuals who come to the Department requesting Emergency Assistance are often in need of ongoing social services. The mis-management of income, for example, is a major



reason that individuals and families are in need of Emergency Assistance. However, the client's refusal to accept ongoing social services will NOT be considered in determining the applicant's eligibility for Emergency Assistance.

For example, the Worker has determined a client is eligible to receive Emergency Assistance and that the client is in need of money management counseling. The client refuses to accept the referral. The Worker cannot refuse to authorize payment for Emergency Assistance.

10. Work Stoppage

All applicants for Emergency Assistance who are voluntarily or involuntarily participating in a work stoppage will be evaluated in the same manner as any other applicant. The fact that the individual is participating in a work stoppage will not be a consideration in determining eligibility for Emergency Assistance.

11. Specific Eligibility Requirements for Federally Matched Emergency Assistance (Title IV-A)

If a family or benefit group meets certain eligibility requirements, a percentage of the cost of emergency financial assistance they receive will be reimbursed to the Department by the Department of Health and Human Services.

Any family with children under the age of 21 or any individual child under 21, including migrant families and children, may be eligible for Federally matched assistance providing the child is living with a specified relative.

If the individual child is not currently living with a specified relative, he may still be eligible, providing he lived with a specified relative within six months prior to the month in which Emergency Assistance is requested. Families and children faced with emergency needs and eligible for Federal matching funds include:

- Families and children who are recipients of financial assistance.
- Families and children who are likely to become applicants for, or recipients of, financial assistance.

For example, those who are eligible for medical assistance only; those who would be eligible for financial assistance if the earnings exemption granted to recipients applied to them; those who are at or near the dependency level (e.g. living in public housing, receiving Food Stamps, etc.); or those who are likely, considering their current social, economical, and/or health conditions, to become recipients of financial assistance within five years.

Federal financial participation will be available for Emergency Assistance to or on behalf of families and children in the circumstances above PROVIDING:

- The child is without resources immediately available to meet his needs;
- The Emergency Assistance is necessary to avoid destitution of the child or to provide living arrangements for him in a home; and
- The child's destitution or need for living arrangements did not arise because he or the specified relative refused, without good cause, to accept employment or training for employment.

12. Emergency Financial Assistance for Families Without Children

Consideration may be given to applicants of Emergency Assistance who do not have eligible children as outlined in 11 above.

These applicants will be evaluated on the basis of need, and if they meet the specific eligibility requirements for

Emergency Assistance and for the item of need requested. Since these individuals do not meet the eligibility criteria as outlined under Title IV-A, there will be no federal match of Emergency Assistance payments authorized to or on behalf of

these applicants.

13. Defining the Elimination of the Emergency/  
Vendor Refuses to Eliminate the Emergency

"Eliminate the Emergency" will be defined as delaying or preventing the emergency from occurring for a period of not less than 30 days from the date the vendor is made aware of and accepts the Department's offer. The client should be made aware of this so there is no mistake on how long the emergency will be delayed. This time period is most important for rent and utilities. The client must be informed that the OFS-67 voucher be taken to the vendor without delay.

When the applicant is otherwise eligible for or approved for Emergency Assistance yet the vendor refuses to eliminate the emergency, payment must be denied to the vendor. This occurs mostly when the vendor is not satisfied with the amount of payment. However, the reason for refusing to eliminate the emergency is unimportant insofar as the payment is concerned. Payment will not be made to any vendor who has refused to eliminate the emergency. If payment has already been made to the vendor, a statement requesting reimbursement must be sent to the vendor. If the vendor refuses to reimburse the Department, a fraud summary must be completed and sent to Investigations and Fraud Management. Otherwise, the applicant must locate a new vendor with assistance from the worker, if necessary.

Whenever a vendor refuses to eliminate the emergency, the application is denied only when another vendor cannot be located by the applicant and/or Worker to eliminate the emergency.

### C. SPECIFIC ELIGIBILITY REQUIREMENTS

The following section describes the specific eligibility requirements of the various emergency needs and services provided by the Emergency Assistance program. Verification requirements and instructions for determining the amount of payment are also included.

Only the items listed below will qualify as items of need under the Emergency Assistance Program.

A description of the maximum allowable payment for each item is included. The benefit group is not automatically eligible for the maximum allowable payment when other resources are being used with the Emergency Assistance payment or when the amount required to eliminate the emergency is less than the maximum allowable payment amount. Recipients of Emergency Assistance who refuse to accept the benefit which was offered by the Department will not receive the benefit and the application will be denied.

#### 1. Shelter

Since the Emergency Assistance and Homeless programs offer the same or similar services, it is important to define the relationship between these two programs in order to best serve the client in the most efficient manner and minimize confusion for field staff. Therefore, applicants facing or in immediate danger of becoming homeless plus two types of homeless applicants identified below will be referred to the Emergency Assistance program. Applicants who are identified as homeless (except as noted above) under the definition provided in Chapter 33,000 of the Social Services Manual will be referred to the Homeless program. That definition of homelessness is a situation wherein a person does not have access to, nor the resources to obtain shelter. Clients receiving benefits from one program shall not be eligible for concurrent benefits from the other.

a. Rent

(1) Individuals or Families Facing Eviction

In all situations regarding evictions, the applicant must verify the existence of his emergency by submitting a written statement from the landlord that eviction of the applicant and/or his family will occur on a specific date and the reason for the eviction. The written statement should be signed and dated by the landlord or the landlord's agent. If the Worker doubts the authenticity of the statement, the landlord may be contacted to determine if he actually intends to evict the applicant. This procedure will include action taken against mobile home owners who are forced to vacate their rental space.

(2) Individuals or Families Facing Eviction from their Motel or Hotel Room

The applicant must submit verification in the form of a written statement signed and dated by the hotel or motel manager which indicates that the applicant and/or his family are facing eviction from their room for non-payment of rent.

(3) Tenant-Landlord Relationship

It is necessary that a tenant-landlord relationship must have existed in situations involving requests for payment of rent on behalf of applicants who are facing eviction. THIS POLICY DOES NOT APPLY TO HOMELESS APPLICANTS.

A tenant-landlord relationship exists when rent (or room and board) payments are made by the applicants to the landlord or family who are the original tenants. Payment must consist of cash or in-kind.

The need to verify the tenant-landlord relationship will be the decision of the Worker. When rent payments are involved, for example, such verification could be provided via rent receipts. When payment of rent is being made in-kind (such as housework, or other types of labor performed in lieu of cash payment), the landlord must state in writing that such an arrangement exists and indicate a monthly dollar value for the in-kind payment.

(4) Individuals or Families who are Actually Homeless

The definition of Homelessness shall include ONLY THE FOLLOWING CIRCUMSTANCES:

- Homeless transients for which transportation arrangements to their communities are incomplete, OR
- Homeless individuals or families rendered homeless because their living quarters have been destroyed.

The Worker must obtain the following types of verification to substantiate the existence of homelessness:

- Collateral contact with the appropriate local agency or responsible person having the responsibility for making damage assessment of destroyed living quarters.
- Verification of homeless stranded transients may be obtained through a collateral contact with the appropriate agency or responsible person in the community.

b. Mortgage

When the applicant is being faced with foreclosure because of delinquent mortgage payments, he must verify his emergency by submitting a signed statement from the lending institute that indicates imminent foreclosure. The term "mortgage" is used here to define payments made by the applicant upon his home or mobile home with the intent of obtaining ownership of such property.

c. Overnight Lodging

Authorization for payment of overnight lodging may be made for clients under the following circumstances.

UNDER NO CIRCUMSTANCES MAY PAYMENT FOR OVERNIGHT LODGING BE AUTHORIZED UNLESS THE CIRCUMSTANCES OUTLINED IN (4) ABOVE EXIST.

The Worker must thoroughly explore available resources such as alternate temporary housing with friends and relatives (after obtaining permission from the client to pursue such resources) prior to authorizing payment for overnight lodging. Through the process of exploring available resources with the client and other community contacts, the Worker will have verified whether or not the family meets the definition for this type of Emergency Assistance. When resources of this type are not available, payment may be made ONLY pending the completion of a PLAN for permanent housing.

d. Determining the Amount of Payment

(1) Rent

- Eviction

Regardless of the type of shelter or the time unit by which it is being paid, the maximum allowable payment for shelter will not exceed ONE MONTH, FOUR WEEKS, or THIRTY DAYS. Therefore, when the benefit group is found eligible for more

than one shelter payment within the thirty day period of eligibility, the maximum allowable payment must be observed. It will be necessary in these situations to compute the weekly or daily rate in order to arrive at fractional amounts. This policy will apply in situations when the group is homeless or facing eviction from the living quarters.

Depending on the number of months the rent is delinquent, the Worker will proceed as follows:

- Rent is Delinquent for One Month Only:

In this situation, the Worker will authorize payment for the appropriate amount to the vendor (landlord) for one month of rent. No dollar limit is placed on the value of one month's rent since amounts vary considerably.

- Rent is Delinquent for More than One Month:

In this situation, the Worker, before authorizing payment, must evaluate the existence of alternate housing for the applicant.

The existence of alternate housing facilities must fulfill all of the following guidelines:

- \* It must be available to the applicant prior to the date of eviction (i.e. the landlord must agree to accept the applicant as his tenant).
- \* It must approximate the current living quarters of the applicant as closely as possible in regard to location, utility, and rental costs, condition, and size.



- \* It must NOT be condemned or unfit for human habitation.

When the above conditions exist, the Worker will negotiate with the present landlord to obtain the LEAST POSSIBLE payment to eliminate or prevent the eviction.

**EXAMPLE:** An applicant who is facing eviction is delinquent for five months' rent at \$150 per month. The landlord is demanding the total rent bill of \$750 to be paid. Satisfactory alternate housing for the individual and his family is available for \$160 per month. The Worker will offer the landlord \$160 toward the total delinquent rent of \$750 with the remainder of the rent (\$590) to be worked out between landlord and his tenant. If the landlord refuses to accept this payment, the Worker will authorize payment for \$160 or one month's rent to the new landlord of the alternate housing. If the present landlord accepts the payment of \$160 toward the delinquent rent bill, it must be understood that the landlord and the tenant will make the arrangements regarding payment of the remaining balance.

The Worker must use care in handling this type of situation. Available alternate housing MUST exist before such negotiations are initiated. Factors affecting the alternate housing (particularly the cost, availability, etc.) must be thoroughly evaluated. When alternate housing does exist, the Worker may add the cost of a REASONABLE deposit to the amount of rent to be authorized.

When alternate housing does not exist for individuals who are more than one month delinquent in their rent payments, the Worker may offer payment to avoid the eviction up to a

maximum of one month of rent. As indicated above, no dollar limitations are placed on the amount of one month's rent. If either the landlord or client refuses to make arrangements to pay the remaining balance of rent to the landlord, the application will be denied.

When the landlord will not agree to let the eligible benefit group remain in the housing, the application for Emergency Assistance will be denied and the Worker shall evaluate the availability of alternate housing.

- Lockouts

Payment may be authorized up to the maximum or:

- \* One month of rent when the client is paying on a monthly basis, or
- \* Four weeks of rent when the client is paying on a weekly basis, or
- \* Thirty days of rent when the client is paying on a daily basis.

- Individuals or Families Who Are Actually Homeless

(2) Security and Damage Deposits

The Worker will authorize payment for one month of rent and a REASONABLE security and/or damage deposit, if necessary, to the landlord when suitable housing is obtained. If the benefit group needs housing facilities immediately and none are available, refer to item C., Overnight Lodging.

**NOTE:** A REASONABLE security and/or damage deposit is defined as the amount that is

customary to the community up to, but NOT EXCEEDING the amount of one month of rent.

(3) Mortgage

The Worker will contact the lending institution and first offer payment of the interest portion to eliminate the emergency. If the lending institution refuses to forestall foreclosure based upon payment of the interest portion only, the Worker will offer payment of both interest and principal (or the total monthly mortgage amount) for a maximum payment of one month.

The procedure of alternate housing will not be used where the foreclosure of mortgages are involved. However, if the applicant becomes homeless as a result of actual foreclosure, the Worker shall evaluate his eligibility for an emergency rent or overnight lodging payment as in any homeless applicant situation when the client and his family are actually homeless.

(4) Overnight Lodging

The Worker will authorize payment to the facility at the going per diem weekly or monthly rate up to a maximum of one week of lodging.

When overnight lodging must be extended beyond one week, alternate temporary housing must be carefully explored by the Worker with the client. If alternate temporary housing cannot be arranged, supervisory approval must be obtained for authorizing payment beyond one week up to a maximum of thirty (30) days.

2. Utilities and Bulk Fuel

a. Services Covered

The payment of utility services included under the Emergency Assistance Program include those services needed by the benefit group for heating, cooking,

lighting, and sanitation. Telephone service will be included only when the applicant is living alone and is in need of telephone service because he is 65 years of age or older, or he is handicapped.

b. General Requirements

Payment may be authorized for clients who are without utility services or who face imminent termination of these services. In determining whether or not the applicant is eligible for payment of utility services, the following requirements must be met:

- The applicant must submit a written notice of termination from the provider that indicates a specific date on which the service was or will be terminated, and the amount of the OVERDUE bill, or
- The applicant must submit a written statement from the provider (such as fuel oil, bottled gas, or coal company) that indicates no future orders will be filled, and
- The utility services must be in the name of the applicant or a member of the benefit group EXCEPT in the following situations:
  - \* When it is determined that the utility service is not in the name of the applicant or benefit group member because that person is deceased, has left the household with the intention of not returning, or the applicant is unable to pay the security deposit.
  - \* When it is determined that the utility service is in the name of the landlord, mobile home park owner/manager, etc., this person becomes, in effect, the utility provider. Therefore, the applicant must obtain from this provider a written notice of termination as specified above.

- \* In situations where the water and sewage bills are billed separately, it is legal for the supplier to terminate water service for the non-payment of sewage bills even when water bills are current. In these situations, a notice of termination for water service may be submitted by the applicant for an overdue sewage bill. This may be accepted as verification of the emergency.

c. Determining the Amount of Payment

In determining the amount of payment, the Worker must give consideration to the following:

- Type of utility service being requested for payment.
- Cost of the overdue utility bill which covers a billing period up to thirty (30) days.
- The average daily amount of the overdue bill when the overdue billing period exceeds 30 days.
- Reconnection charges required by the utility provider when the service has been terminated.
- Service charges required by the utility provider to start service in new living quarters when the applicant has moved to a new housing facility as a result of an eviction, fire, condemnation, etc., or some other EMERGENCY that has forced the applicant to move into new living quarters. Service charges are NOT utility deposits. UTILITY DEPOSITS ARE NOT INCLUDED AS AN ITEM FOR PAYMENT UNDER THE EMERGENCY ASSISTANCE PROGRAM.
- "Late fees" added to delinquent or overdue payments will be considered as part of the overdue bill and will not be deducted from the overdue bill when computing the average daily amount.

- Payments made by the customer in an attempt to reduce or eliminate the overdue bill will not be deducted from the ongoing overdue bill when computing the average daily amount.
- Payments made on behalf of the customer from other agencies plus reductions via the 20% discount program will be deducted from the ongoing overdue bill when computing the average daily amount.

(1) Payment Amount for Gas, Electric, Water and Sewage

**NOTE:** "Sewage utility service" shall NOT include garbage pick-up service.

When the client is eligible to receive payment for any of the utility services indicated above, the Worker will consider the following:

- OVERDUE Utility Bill Covers a Billing Period from 0 to 30 days:

The Worker shall authorize payment to the vendor on behalf of the client.

- OVERDUE Utility Bill Covers a Billing Period Beyond 30 Days:

Since most utility billing periods are on a monthly basis, overdue bills covering a period in excess of 30 days are often submitted for payment. When this occurs, the Worker determines the average daily amount of the overdue bill. THE AVERAGE DAILY AMOUNT TIMES 30 DAYS WILL BE THE AMOUNT OF THE EMERGENCY ASSISTANCE PAYMENT. Utility bills often have an OVERDUE amount and an amount labeled "DUE." The "DUE" amount cannot be considered for payment nor may this amount be used in calculating the amount of the payment.

**EXAMPLE:** An applicant submits an overdue utility bill in the amount of \$235 which accumulated over a period

of 93 days. In order to determine the correct dollar amount of payment when the overdue bill is over 30 days, it will be necessary to determine the average daily amount multiplied by 30 days.

In the example above, the amount of payment will be computed as follows: \$235 divided by 93 days = \$2.53 x 30 days = \$75.90.

The Worker will explain to the applicant that payment may be made up to the average daily amount of the total overdue bill times 30 days. The worker will contact the utility provider to determine if payment of this amount will eliminate the emergency.

The Worker will indicate to both the applicant and the provider that payment of the remaining balance must be worked out between the provider and the applicant. The Worker shall not enter into these negotiations.

- Overdue Utility Bills Having a Budget "Accrual" "Reconciliation" or "Settlement" Amount

The budget settlement amount (also referred to as the "reconciliation" or "accrual" amount) is that amount of a bill in excess of the monthly budget bill which accumulates during the length of the budget period (usually 12 months). The customer is responsible for paying that amount of the total annual bill not covered by the monthly budget payments.

In order to remain consistent with current policy, the amount of payment is determined by dividing the number of days over which a budget overrun occurred into the total amount of the OVERDUE budget settlement bill. It will be necessary to contact the utility company to determine the number of days in which overruns occurred unless the applicant can supply this information. If the utility company or the applicant cannot or refuses to provide this information, the total number of months in the entire budget period will be used to determine

the amount of payment referred to above. (The length of the budget period is usually 365 days unless correct information is otherwise obtained.)

Complicating this procedure are situations in which the overdue budget settlement bill is combined with or added to a routine overdue bill on the same notice of termination. In these situations, the amount of the overdue budget settlement bill must be separated from the amount of the routine overdue bill. A daily average is then determined for each overdue bill in excess of 30 days. The two amounts are multiplied by 30 and the two products are added. The result is the amount of payment.

**EXAMPLE:** The total amount of the overdue bill on the termination statement is \$235.50. The overdue budget settlement bill is \$85.50. Budget overruns occurred during 243 of the the 365 day budget period. The regular overdue bill is \$150.00 accumulated over a period of 45 days.

Computation of overdue budget bill:

\$85.50 divided by 243 - \$0.35 x 30 days =  
\$10.50

Computation of regular overdue bill:

\$150.00 divided by 45 days = \$3.33 x 30 days \$ 99.90  
Amount of payment \$110.40

- Determining the amount of payment in which the applicant has made partial payment(s) upon the original overdue bill.

Situations arise in which the applicant has made partial payment(s) upon overdue utility bills in an attempt to become current. It becomes difficult for the Worker, applicant and the utility company to determine the amount of payment the applicant is eligible to receive.

Therefore, the Worker will need to consider the following guidelines:



The average daily cost of the original overdue bill must first be computed.

The average daily cost multiplied by 30 will equal the amount of payment.

**EXAMPLE:** An applicant submits an overdue utility bill in the amount of \$211.72. This bill was the remainder of an original overdue bill which accumulated over a period of 183 days and totaled \$296.73. The applicant made partial payment of \$85.01 which left a balance of \$211.72.

$\$296.73$  divided by 183 days =  $\$1.62$  average cost/day.

$\$1.62 \times 30 = \$48.60$  amount of payment.

**NOTE:** Whenever the utility bill balance remaining after the applicant has made partial payment is less than the average cost/day times 30 days, that amount (utility bill balance) will be the amount of the payment.

(2) Payment Amount for Telephone Service

When an applicant has been found eligible to receive payment for telephone services, the Worker may authorize payment only for the basic charges of up to 30 days for the type of service received plus federal tax. Payment cannot be authorized for long-distance calls, cables or other special services.

(3) Payment Amount for Bottled Gas, Fuel Oil, Coal and Wood

When the applicant uses energy that is not regulated by the Public Service Commission, the Worker will determine the amount of payment as follows:

When the applicant is eligible to receive payment for fuel costs, it is necessary to determine the amount of payment by referring to the chart below.

The following data represents the maximum amount of fuel that may be purchased on behalf of eligible clients for a 30-day supply of fuel.

<u>TYPE</u>	<u>UNIT</u>	<u>MAXIMUM AMOUNT</u>
Bottled Gas	Gallons	135
Bottled Gas	Pounds	300
Coal	Tons	1
Wood	Cords	1
Fuel Oils	Gallons	150

The following statement must be entered on all OFS-67 forms authorizing any type of liquid fuel: "The client must specify the correct grade and type of fuel." (Please refer to Section 19.4 item C-7 for instructions in completing the OFS-67 form).

A situation may exist when the provider refuses to make a delivery because of an existing unpaid balance. In this case, the Worker should allow the client and provider to determine what item will be paid. (The unpaid balance or the maximum amount of fuel allowed for payment.)

PAYMENT CANNOT BE AUTHORIZED FOR BOTH ITEMS. IF THE CLIENT AND VENDOR AGREE TO PAYMENT OF THE UNPAID BALANCE, THE AMOUNT AUTHORIZED CANNOT EXCEED THE EQUIVALENT COST OF THE MAXIMUM AMOUNT OF FUEL SHOWN IN THE CHART ABOVE.

If either or both parties (client or vendor) refuse to accept payment as outlined in this section, the Worker will deny the application.

3. Food

Payment may be authorized for eligible clients who have an emergency need for food. However, in the majority of instances, emergency food needs will be met by using Food Stamps provided the applicant meets the eligibility requirements of the Food Stamp Program. If the applicant refuses to accept the Food Stamp Program as a resource to meet his emergency food needs, the application for emergency assistance will be denied.

When the applicant is found eligible for Food Stamps, the Food Stamp application will be processed as quickly as possible to prevent or eliminate the emergency. If the applicant needs food prior to the receipt of his Food Stamps, the Worker may authorize payment of a food order if the applicant is eligible to receive emergency assistance.

When the applicant is ineligible for Food Stamps or when the emergency cannot be eliminated or prevented because of the time involved in determining eligibility for Food Stamps, the Worker will authorize payment for emergency food provided the applicant is otherwise eligible.

In situations when recipients of Food Stamps apply for an emergency food order, the worker must carefully evaluate the reason for the request. Generally, the worker should determine if the need was created by an unusual or catastrophic event (such as lost, damaged, destroyed or stolen food coupons) or if the need was created by the misuse of the coupons. After the worker has carefully evaluated the situation, a decision must be made to determine if an actual emergency need for food exists.

In determining the amount of payment, the Worker will refer to the Food Stamps Program schedules. ONLY THE HOUSEHOLD ALLOTMENT AT ZERO INCOME WILL BE CONSIDERED IN DETERMINING

THE DAILY FOOD ALLOWANCE TO ARRIVE AT THE TOTAL AMOUNT OF PAYMENT. Because of the availability of expedited service via

the Food Stamp program, payment may be authorized up to a maximum period not to exceed seven days.

**EXAMPLE:** A seven-person benefit group is approved for Food Stamps. The Worker anticipates the receipt of stamps in seven days. The benefit group has an immediate need for food and meets the eligibility criteria for emergency assistance. The Worker will compute the amount of payment as follows:

Monthly allotment at zero income for a seven-person benefit group divided by 30 days equals a daily amount. The daily amount times seven days equals the amount of payment to be authorized via OFS-67 for emergency food for seven persons.

In the event the benefit group is in a situation where food preparation is not possible, authorization may be made for payment to purchase food at a cafeteria or a low cost restaurant. This method may also be used to provide meals for the eligible transient benefit group returning to their home.

In determining the amount of payment to be authorized, the Worker needs to consider the following:

- \* A maximum payment will be made of up to \$9 per day per eligible person.
- \* The number of days in which the benefit group needs this service shall be up to, but not exceeding, seven days.
- \* The Worker should carefully discuss this arrangement with the client to be sure he understands how the funds are to be used.

When the benefit group plans to utilize a local restaurant or cafeteria, the Worker will authorize payment to the local vendor.

When the clients are transients returning to their home and plan to use non-local restaurants or cafeterias, the Worker will authorize payment by having a check made out to a responsible member.

4. Household Supplies or Furnishings and Clothing

Household supplies or furnishings and clothing may be considered an item of need for Emergency Assistance only when a fire or some other man-made or natural disaster has destroyed such items. The only exception to this is an abandoned child or children in need of clothing and when household supplies or furnishings are needed for a homeless person or family as noted below.

a. Household Supplies or Furnishings

An applicant may be eligible to receive payment for emergency household supplies or furnishings when:

- The household supplies or furnishings were destroyed in a fire or some other natural disaster.
- Emergency household supplies or furnishings are needed for a homeless person(s) for whom the Department is seeking or has located housing.
- Emergency household supplies or furnishings may include such basic items as bedding, eating and cooking utensils, towels and linens, soap or a necessary good used appliance limited to a refrigerator or stove.

b. Clothing

An applicant may be eligible to receive payment for emergency clothing when:

- Their clothing supplies have been destroyed by a fire or some other disaster.

- A child or children have been abandoned without adequate clothing.

c. Determining the Amount of Payment

(1) Household Supplies or Furnishings

A maximum payment of up to \$100 per eligible benefit group may be authorized to a vendor for household supplies and furnishings. Because of the limited maximum payment, the Worker should assist the recipient in planning his purchases wisely. For example, the recipient should be discouraged from selecting such items as he may desire for his convenience rather than basic needs. In arriving at those items to be purchased, the Worker must carefully evaluate the recipient's actual need for the items requested.

(2) Clothing

Authorization for payment of up to a maximum of \$75 per eligible benefit group member may be made to a vendor for this item of need.

5. Child Care

Emergency Assistance funds may be authorized to help an eligible benefit group arrange for temporary child care when a family requires immediate arrangements for the care of children are required.

Examples of situations in which emergency child care may be authorized include hospitalization of the parent(s), the incarceration of the parent(s), or the abandonment of children and when immediate arrangements for care must be made pending the development of a more appropriate and permanent plan.

Payment may be authorized to a neighbor, friend or relative at the rate of \$.38 per hour per child or \$9 per day (24 hours) per child. Payment may be made for varying amounts of time to 24 hour care up to a period of one week.

The Department's concern for the maximum protection of children is that such emergency child care arrangements be of limited duration and only used when other approved child care plans cannot be developed in time to meet the emergency.

6. Transportation

Payment for emergency transportation service may be authorized for eligibles as described below.

a. Transients

For purposes of determining eligibility for Emergency Assistance, an individual(s) who meets the definition of transient is someone who is traveling or passing through a locality and has experienced an emergency that has made it necessary to return to his/their home community. The definition of transient does NOT include individuals who are visiting within the locality or who have arrived with the intent of obtaining temporary to permanent employment or otherwise remain within the locality on a temporary or permanent basis. Likewise, an individual(s) that finds temporary or permanent employment within a locality, but later decides to return to his/their home community does not meet the definition of a transient since he/they obviously were not traveling or passing through a locality if he/they were employed.

Transients must be without resources with which to purchase the item or service that will enable them to return to their communities. Prior to authorizing payment, the Worker shall verify through a collateral contact that the transients have a place to live or that another agency will assist them in becoming reestablished in that community to which they wish to return. The Worker will also evaluate the possibility of their eligibility for TRIP tickets prior to authorizing payment for emergency transportation services.

b. To obtain Medical Assistance

Clients in need of transportation to a medical provider may obtain benefits for this purpose. THESE PERSONS MUST NOT BE MEDICAID RECIPIENTS.

c. Determining the Amount of Payment

(1) Transients

Determining the amount of payment depends upon the type of transportation to be used and the one-way distance involved. However, the maximum amount of payment shall not exceed \$50 regardless of the type of transportation used or the one-way distance involved.

Payment may be authorized for the cost of gasoline, oil and minor auto repairs for a privately owned automobile or for the use of a common carrier restricted to bus, train or taxi.

If an automobile is to be used, payment may include 17 cents per mile one way for the cost of gasoline and oil and minor automobile repair. The total payment for either gasoline and oil or minor repairs or a combination thereof may not exceed \$50. Form OFS-67 will be completed and the check will be made payable to the recipient to allow for refilling of fuel and oil during the length of the trip. If payment is to be authorized only for minor automobile repairs, the check will be made payable to the vendor.

If a common carrier must be used, payment up to \$50 of the established one-way fare may be made via and the check will be made payable to the vendor.

(2) To Obtain Medical Assistance

Payment may be authorized for the use of a privately owned automobile or common carrier

restricted to the use of a bus, train or taxi. Determining the amount of payment depends upon the type of transportation to be used and the round-trip distance involved.



If a common carrier must be used, payment will be made to the vendor for a round-trip fare. The cost of waiting time will be included in the payment when intra-city travel is required (travel from city to city). The client and taxi driver must be aware that waiting time is allowed ONLY TO SECURE MEDICAL SERVICES. Prior to making payment for transportation in which the cost of waiting time is included, the Worker must obtain from a taxi company a dated and signed statement indicating the rate, elapsed time and total charges for waiting time. When inter-city travel is required (travel within the city limits), the cost of waiting time will not be included in the payment and the client(s) and the taxi driver must be aware of this. Prior to authorizing payment to a common carrier, the Worker MUST DETERMINE THAT OTHER TRANSPORTATION RESOURCES ARE NOT AVAILABLE unless it is determined that a common carrier will cost less.

When an automobile is used, payment will be made at the rate of 17 cents per mile for one round trip. When the transportation provider is not the client or someone who lives in the client's household, the total cost of the round trip mileage to the nearest medical facility will be computed from the provider's point of departure (his residence) to pick up the client for the trip to the medical facility.

In either of the two methods of transportation indicated above, the Worker will authorize payment only to the NEAREST APPROPRIATE MEDICAL FACILITY.

7. Emergency Medical Care

The cost of emergency outpatient medical care may be authorized for clients when such care is not otherwise available through program resources such as Medicare, Medicaid or any other local or state program.

In addition, the Worker must also consider whether the applicant might be eligible to receive medical services via the Department's medical programs. The Worker, therefore, must determine that resources are NOT available to an applicant in time to eliminate or prevent an emergency prior to the authorization of emergency medical services or emergency prescription services.

a. Outpatient Medical Service

Specifically, this will include emergency room, emergency outpatient hospital services and emergency outpatient physician's services. Emergency outpatient dental or oral surgery will be included. A written statement signed by the attending physician is required for the approval of emergency room and emergency outpatient hospital services. When emergency outpatient physician's services are requested, a statement signed by the physician that indicates emergency treatment was rendered must be obtained. WHEN OUTPATIENT DIAGNOSTIC TESTS ARE REQUIRED, THE PHYSICIAN MUST SPECIFICALLY INDICATE THE TYPE OF TESTS NEEDED.

b. Prescription Service

Emergency prescription service involves situations in which prescription medicine is needed on an emergency basis. This service may be in relation to emergency outpatient medical treatment as described above or in situations when the individual needs prescription medicine without medical treatment.

THE NEED FOR PRESCRIPTION MEDICINE MUST BE VERIFIED BY A PRESCRIPTION SIGNED BY A PHYSICIAN. In determining whether the prescription medicine is needed to prevent an emergency, the Worker may contact the attending physician. If this is not possible, the Worker should determine the purpose for or type of medicine (via pharmacist) being requested. If it cannot be determined from medical sources that the prescription is needed to prevent an emergency (illness or death), the applicant's statement that an emergency exists may be accepted.

c. Determining the Amount of Payment

(1) Outpatient Medical Services

Payment may be made for treatment or services up to but not exceeding a period of thirty days.

(2) Prescription Services

Drugs may be authorized up to but not exceeding a thirty day supply per different prescription medicine PER PERSON WITHIN THE THIRTY DAY PERIOD OF ELIGIBILITY.

**EXAMPLE:** Only one thirty day supply of Promethazine can be authorized during the period of eligibility. Additional requests for this specific drug will be denied if a thirty day authorization was previously made. Other types of prescription medicine may be authorized if the client meets the eligibility guidelines.

8. Emergency Needs Created by Natural or Man-Made Disasters or Disorders

Natural disasters will consist of catastrophic events limited only to flooding, high winds, severe electric storms, earthquakes, hail, blizzards, heavy snowfall and sub-zero temperatures.

Man-made disasters will consist of catastrophic events limited only to fire, explosions, falling objects, exposure to toxic elements such as gas, chemicals or other poisonous substances and dangerous situations created by automobile, airplane and train crashes.

In order to be found eligible, the emergency need must have been created by any of the catastrophic events referred to above.

When an applicant requests Emergency Assistance as a result of natural or man-made disasters, the Worker must determine, as in any application for Emergency Assistance, the existence of resources available to the applicant prior to the approval and authorization for payment of the request for assistance.

Particular attention must be given by the Worker toward insurance benefits. The Worker must determine that NO insurance benefits are available prior to the authorization of Emergency Assistance.

More specifically, however, the Worker must determine that disaster related resources through such agencies as Housing Urban Development, Red Cross, Community Services Administration, Farmers Home Administration, Department of Health and Human Resources, Volunteer and other local organizations, etc., are NOT available prior to the authorization of Emergency Assistance.

When such resources are available, the Worker shall refer the applicant to these resources. The Worker, therefore, will be providing a referral service to eliminate or prevent an emergency.

A situation may exist when an area or locale has been declared a disaster area and Federal and/or State aid is forthcoming but not immediately available to eliminate emergencies. In these situations, the Worker must evaluate very carefully the nature of the applicant's emergency to determine if the forthcoming Federal and/or State aid will eliminate or prevent the emergency.

However, if the Worker feels that authorization for payment of Emergency Assistance must be made, he shall obtain verification of need through a collateral contact with the responsible local agency or person who is in charge of assessing the damages or loss to the community.

Applicants who have received Emergency Assistance within the last 12 consecutive months including the current month of application WILL NOT be denied Emergency Assistance as a result of natural or man-made disasters if they are otherwise found eligible for such benefits. However, Emergency Assistance payments will be made from 100 percent State funds.

In order to determine the amount of payment, please refer to the appropriate section that covers the specific item or service being requested by the applicant.

#### 9. Fire

Although fire is usually a man-made disaster, it will be discussed in this section as it relates to fires which have destroyed an individual's or family's living quarters, clothing, bedding, etc. When an applicant has requested Emergency Assistance from the Department as a result of a fire, the Worker shall verify through a collateral contact with the local fire department that the fire did occur and that the item of need (clothing, housing, etc.) was destroyed. If no other resources are available to the applicant, the Worker will authorize payment as outlined in the Sections that cover the particular item(s) or service(s).

Applicants who have received Emergency Assistance within the last twelve consecutive months, including the current month of application, WILL NOT be denied Emergency Assistance as a result of fire if they are otherwise found eligible for such benefits.

In determining the amount of payment, please refer to the appropriate section that covers the specific item or service being requested by the applicant.

#### D. APPLICATION PROCESS

##### 1. The Intake Interview

The Worker will conduct the intake interview for the purpose of obtaining a thorough knowledge of the applicant's current social and financial situation. This information is needed to allow the Worker to determine if the applicant meets the eligibility requirements of the program and of the specific item(s) of need for which he is requesting payment.

The policy regarding time limitations of Emergency Assistance must be explained to the applicant during the intake interview. When the applicant is not currently receiving any type of assistance from the Department, the Worker should give particular attention to the possibility of the applicant's eligibility for regular financial or Medicaid assistance and/or Food Stamps. The intake process ends when the Worker has gained sufficient information from which he can make a decision on the application.

##### 2. Who Shall Make Application

That person who applies for Emergency Assistance benefits will be an adult in whose name the bills are listed or the adult who handles the financial matters of the benefit group. In most situations, this person is the head of the household or the person who has accepted responsibility for and is knowledgeable about other members of the benefit group.

Situations will occur when the person who should apply for benefits is unable or unwilling to do so. In these situations, the Worker must use judgement to determine if someone else in the benefit group can apply. Consideration should be given to the nature of the crisis and if a suitable person is available to apply. In most situations, the spouse of the head of the household would be the best choice.

3. The Benefit Group

The benefit group will consist of one or more persons who are living together. The only exception to this policy is when a person is paying for the privilege of living in the household. When this occurs, that person and his income will not be considered in determining eligibility of the benefit group. However, the payment being made for the privilege of living in the household will be added to the total income of the benefit group. This payment must be consistent with that amount which is locally usual and customary for the privileges covered. The worker may decide to request written verification of these situations. Written verification must consist of a statement having the amount of payment and what it covers, the time period covered by the payment and the dated signature of the person to whom payment is made.

Benefit group members will always receive a communal benefit from the Emergency Assistance Payment. This simply means that everyone in the group benefits from the payment even when payment is made for such items as pharmacy or medical treatment for individual assistance. No one who has benefitted from an Emergency Assistance Payment during the time limitation period may be included in the benefit group for individual assistance nor in determining eligibility for the entire benefit group. For example, an individual was a member of a benefit group that received an Emergency Assistance Payment. Six months later, this person is a member of a second household (or second benefit group). The head of the household has applied for pharmacy assistance for this person only. The application must be denied.

Using the example above, assume the person joined the second benefit group and the head of the household applies for payment of an overdue utility bill. The person and his resources will not be counted in determining eligibility for the second benefit group. If the case is approved, the person will benefit from the payment. However, this cannot be prevented.

4. Completion of Form ES-6, Notice of Information Needed

When the Worker has insufficient information to make a decision on the application, it is necessary to complete Form ES-6 to inform the applicant of the information needed.

The Worker should enter the specific information that clearly states what items must be returned by the applicant. As well, care should be used to enter the correct date by which the information is to be returned.

The failure to return information or the return of incomplete or incorrect information that prevents a decision from being made on the case will be considered failure to provide verification and will result in a denial of the application. THEREFORE, ALL REQUESTS FOR VERIFICATION AND/OR TO RETURN CERTAIN INFORMATION MUST BE MADE VIA ES-6 FORM.

5. Decision on the Application

After the Worker has thoroughly reviewed with the applicant his current situation, consideration should be given to the following items:

- a. Has the benefit group received (or received on it's behalf) an authorization for Emergency Assistance benefits within the last twelve consecutive months including the current month of application (except for authorizations based upon natural or man-made disasters or fire)? If so, the application will be denied.
- b. Has the applicant met the general eligibility requirements?
- c. Has the applicant met the specific eligibility requirements for whatever item(s) of need he has requested?



- d. Has the applicant been referred to an available community resource and has the applicant followed through to obtain the resource? Did the applicant actually receive (or receive on his behalf) the benefits in time to eliminate or prevent the emergency?

After giving careful consideration to the above, the Worker will approve or deny the application by entering the appropriate code on the form.

A decision must be rendered on all Emergency Assistance applications as soon as possible if the emergency currently exists or prior to an imminent emergency but never beyond three state government business days from the date of application.

**EXAMPLES:** An applicant submits a notice of termination from a utility provider on Monday which states that the service will end in five days. A decision must be rendered on the application no later than Wednesday. (The date of application will be counted as the first day.)

An individual applies for payment of a utility bill on Friday. He does not have the notice of termination to verify the emergency and is informed by the Worker to submit the termination notice no later than Tuesday. Applicant fails to submit the notice. Worker must render a decision on Tuesday. In the absence of a verification, this decision would be a denial. The applicant may reapply.