

Emergency And Special Assistance Program

19.1 DEFINITIONS..... 1

19.2 EMERGENCY ASSISTANCE2

A. INTRODUCTION.....2

B. GENERAL ELIGIBILITY REQUIREMENTS2

 1. Emergency Need Requirement2

 2. Time Limitation2

 3. **Residency and** Citizenship.....**3**

 4. AG’s Subject To A Penalty**3**

 5. Income.....5

 6. Assets.....8

 7. Available Community Resources.....**12**

 8. **Other Department Benefits**14

 9. **Referrals to Children and Adult Services****14**

 10. Work Stoppage **And Strikes****15**

 11. Specific Eligibility Requirements For Federally Matched Emergency Assistance (Title IV-A)**15**

 12. Defining the Elimination Of The Emergency/Vendor Refuses To Eliminate The Emergency**15**

13. Emergency Needs Created by Natural Or Man-Made Disasters or Disorders16

C. **APPLICATION PROCESS17**

 1. **Application Forms****17**

 2. The Intake Interview**18**

 3. Who **Must Complete the** Application**18**

 4. **The Assistance** Group**18**

 5. **Action** on the Application**19**

D. **SPECIFIC ITEMS OF NEED19**

 1. Shelter**20**

 2. Utilities And Bulk Fuel.....**26**

 3. Food**32**

 4. **Household Supplies Or Furnishings****33**

 5. **Clothing****34**

 6. Child Care**34**

 7. Transportation**35**

 8. Emergency Medical Care**37**

19.3	NON-EMERGENCY MEDICAL TRANSPORTATION	43
A.	INTRODUCTION.....	43
B.	APPLICATION/REDETERMINATION PROCESS.....	43
	1. Content Of The Interview.....	43
	2. Agency Delays.....	43
	3. Beginning Date Of Eligibility	43
	4. Redetermination Schedule	44
	5. The Benefit	44
	6. Expedited Processing.....	44
	7. The Application Form	45
C.	THE CASE MAINTENANCE PROCESS.....	46
	1. Closures	46
	2. Change In Income	46
	3. Update In Case Information.....	46
D.	IVES.....	46
E.	VERIFICATION	46
F.	RESOURCE DEVELOPMENT	46
G.	CLIENT NOTIFICATION	46
H.	COMMON ELIGIBILITY REQUIREMENTS.....	47
	1. Residence	47
	2. Citizenship And Alien Status	47
	3. Cooperation With Quality Assurance.....	47
	4. Limitations On Receipt Of Other Benefits.....	47
	5. Non-duplication Of Benefits.....	47
	6. Enumeration	47
I.	ELIGIBILITY DETERMINATION GROUPS	47
	1. The Assistance Group (AG)	47
	2. The Income Group.....	47
	3. The Needs Groups	47
J.	INCOME.....	48
K.	ASSETS.....	48
L.	WORK REQUIREMENTS	48

Emergency And Special Assistance Program

M. SPECIFIC ELIGIBILITY REQUIREMENTS48

 1. Exceptions To Eligibility48

 2. Transportation Requiring Prior Approval From BMS49

 3. Requests Which Require Approval By The Worker49

 4. Routine Automobile Transportation Request50

 5. Requests For Transportation For Emergency Room Service50

 6. Approved Transportation Providers51

 7. Determining The Amount Of Payment51

N. BENEFIT REPAYMENT54

O. BENEFIT REPLACEMENT54

19.4 RESERVED FOR FUTURE USE55

19.5 INDIGENT BURIAL PROGRAM56

 A. INTRODUCTION.....56

 B. ELIGIBILITY REQUIREMENTS56

 1. Residence56

 2. Exception To The Residence Requirement56

 3. Need56

 4. Responsible Relatives57

 5. Maximum Allowable Payment.....57

 6. Interment Plans58

 7. Application Submittal Deadline59

 C. BURIAL RATE.....59

 D. DEVELOPMENT OF RESOURCES..... 59

 1. Resources Obtained For Burials.....61

 2. Resources Due The Department.....61

 3. Resources Due The Funeral Director63

 E. APPLICATION PROCESS64

 1. General Instructions64

 2. Liability Of Responsible Relatives64

 3. Completion Of Form ES-BU-1, Application For Burial Benefits65

 4. Completion Of Form ES-BU-2, Affidavit Of Responsible Relative67

 5. Decision On The Application68

Emergency And Special Assistance Program

F. BURIAL PAYMENT PROCESS69

 1. Responsibilities Of The Funeral Director69

 2. Responsibilities Of The Income Maintenance Worker69

 3. Responsibilities Of The Financial Clerk69

G. CORRECTIVE ACTION71

19.6 RESERVED FOR FUTURE USE72

19.7 PUBLIC UTILITY PROGRAM73

A. SPECIAL REDUCED RESIDENTIAL SERVICE RATE (20% UTILITY DISCOUNT PROGRAM).....73

 1. Introduction.....73

 2. Operation.....73

 3. Application Form74

 4. Role Of The Local Office74

B. SEASONAL PROGRAMS74

 1. Introduction.....74

 2. Application Period.....74

 3. Eligibility Guidelines.....75

 4. Application Process75

 5. Determining The Amount Of Payment.....76

 6. Payment Authorization Process78

 7. Notification To The Client78

 8. Verification.....79

 9. Effect Upon Other Programs79

 10. Fair Hearing.....80

 11. Program Ending Date80

 12. Forms80

C. PROJECT HELPING HAND.....80

 1. Introduction.....80

 2. Application Period.....80

 3. Eligibility Guidelines.....81

 4. Application Process81

 5. Determining The Amount Of the Payment.....82

 6. Payment Authorization Process83

 7. Notification To The Client83

 8. Verification.....84

 9. Effect Upon Other Programs84

 10. Fair Hearings.....84

 11. Forms84

19.8 TEL-ASSISTANCE AND VERIZON'S ENHANCED TEL-ASSISTANCE PLAN85

I. INTRODUCTION.....85

A. STATE ADMINISTRATION85

B. AREA ADMINISTRATION85

C. ELIGIBILITY REQUIREMENTS.....85

D. APPLICATION PROCESS86

 1. Mail-Out Application Kits.....86

 2. Walk-In Applications86

E. REDETERMINATION PROCESS87

 1. Categorically Eligible Households.....87

 2. All Other Tel-Assistance Households87

F. CLOSURE PROCESS.....88

 1. Categorically Eligible Households.....88

 2. All Other Tel-Assistance Households88

G. TELEPHONE COMPANY RESPONSIBILITY88

 1. Notification Eligibility88

 2. Question of Eligibility88

 3. Hearing Process88

H. FORMS88

I. PARTICIPATING PHONE COMPANIES89

II. INTRODUCTION - VERIZON ENHANCED TEL-ASSISTANCE PLAN89

A. STATE ADMINISTRATION89

B. DISTRICT OFFICE ADMINISTRATION89

C. ELIGIBILITY REQUIREMENT89

D. APPLICATION PROCESS90

E. CLOSURE PROCESS.....90

F. VERIZON RESPONSIBILITY90

G.

19.9	LINK-UP AMERICA	91
	A. INTRODUCTION.....	91
	B. STATE ADMINISTRATION	91
	C. AREA ADMINISTRATION.....	91
	D. ELIGIBILITY REQUIREMENTS	91
	E. APPLICATION PROCEDURE.....	91
	F. FORM	91
19.10	TRANSPORTATION REMUNERATION INCENTIVE PROGRAM	92
	A. INTRODUCTION.....	92
	B. GENERAL INFORMATION	92
	C. ORGANIZATIONAL RESPONSIBILITIES.....	93
	D. RELATIONSHIP TO TAXATION AND FINANCIAL ASSISTANCE PROGRAMS	93
	E. CASE RECORD.....	94
	1. TRIP Eligibility Block.....	94
	2. TRIP Correspondence And Verification Block	94
	F. ELIGIBILITY REQUIREMENTS: BENEFIT GROUPS/RESIDENCE	94
	1. Benefit Groups	94
	2. Separation Of Eligible Individuals Into Separate Benefit Groups.....	94
	3. The Eligibility Requirements Of Residence	95
	4. Eligibility Of Individuals In Special Living Arrangements	95
	G. THE ELIGIBILITY REQUIREMENT OF AGE AND HANDICAP/DISABILITY	97
	1. Age	97
	2. Handicap/Disability	97
	H. FINANCIAL ELIGIBILITY	98
	1. Unearned Income	98
	2. Earned Income	100

I.	DETERMINATION OF TOTAL COUNTABLE INCOME	101
1.	Determination Of Financial Eligibility	102
2.	Basis For Ticket Book Issuance	102
3.	Purchase Requirement.....	102
4.	The Eligibility Requirement Of Client Cooperation.....	103
J.	VERIFICATION	103
1.	General Instructions For Verification	103
2.	Verification Of Age.....	103
3.	Verification Of Disability Or Handicap.....	104
4.	Verification Of Income	104
5.	Verification For Extra Benefits (MI/AA)	104
K.	ELIGIBILITY DETERMINATION SYSTEM.....	105
1.	The Declaration Process	105
2.	ES-TR-1 Application And Redetermination Form	105
3.	Client Notification.....	105
4.	ES-TR-7 Identification Card.....	105
L.	THE APPLICATION PROCESS.....	105
M.	INITIATION OF APPLICATION PROCESS	106
N.	THE FORMAL APPLICATION	106
O.	RESPONSIBILITIES OF THE ECONOMIC SERVICE WORKER IN PROCESSING APPLICATIONS	106
P.	SPECIAL PROCEDURES IN PROCESSING APPLICATIONS	107
Q.	THE REDETERMINATION PROCESS	108
1.	Completion Of Redetermination	108
2.	Control Of Redeterminations	108
3.	Relationship To Food Stamp Redetermination	109
4.	Procedure When The Redetermination Is Incomplete	109
5.	Procedure When The ES-TR-1 Is Not Returned	109
6.	Responsibilities Of The Worker	109
R.	SPECIAL PROCEDURES IN PROCESSING REDETERMINATIONS.....	109
1.	More Than One TRIP Case In Home Due For Redetermination	109
2.	Case Transfer During Month Of Redetermination	110

S. THE CASE MAINTENANCE PROCESS..... 110

 1. Initiation Of Case Maintenance 110

 2. Transfer Of Cases 110

 3. Case Closures 110

T. RESPONSIBILITY OF THE ECONOMIC SERVICE WORKER 111

U. SPECIAL PROCEDURES IN THE CASE MAINTENANCE PROCESS 111

 1. Non-Receipt Of Authorization Card 111

 2. Mail Issuance From County Office Not Received 111

 3. Lost Authorization Card 111

 4. Stolen Authorization Card And TRIP Tickets 112

 5. Lost TRIP Tickets 112

 6. Notification To Issuance Clerk 112

 7. Ineligibility For Mail Issuance 112

 8. Refund Of Purchase Requirement..... 112

V. EXTRA TRIP BENEFITS DUE TO SPECIAL CIRCUMSTANCES 113

 1. Authorized Attendant (AA) 113

 2. Multiple Issuance (MI) 114

 3. Requirements For Eligibility 114

 4. Usage 115

 5. Procedures For Approval Of Extra Benefits For AA/MI..... 115

 6. Accountability And Reporting Of AA/MI Issuance..... 116

W. THE TRIP DATA SYSTEM..... 116

APPENDIX A EMERGENCY ASSISTANCE INCOME LIMITS A-1

**APPENDIX B WEST VIRGINIA COUNTIES SERVED BY AMERICAN ELECTRIC
POWER B-1**

**APPENDIX C COUNTIES SERVED BY WEST VIRGINIA – AMERICAN WATER
COMPANY C-1**

APPENDIX D BORDER HOSPITALS D-1