October 1, 2018

Temporary Assistance for Needy Families Manual

Transmittal # 65

This transmittal includes changes to the Temporary Assistance for Needy Families (TANF) Program and the Virginia Initiative for Employment not Welfare (VIEW) Program. The purpose of this transmittal is to provide new, clarified and revised guidance for both the TANF and VIEW Programs. Throughout the TANF Manual, references to ADAPT and ADAPT procedures were revised to VaCMS and VaCMS procedures; references to TANF grant were revised to TANF payment; and annual changes to program calculation elements of guidelines were revised.

Unless otherwise stated, the provisions included in this transmittal are effective for all TANF eligibility determinations and VIEW Program assessments and reassessments completed on or after October 1, 2018.


Significant changes to the manual are as follows:

<table>
<thead>
<tr>
<th>Page(s) Changed</th>
<th>Significant Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chapter 100, Table of Contents, page 1</td>
<td>Section 100.5, the Virginia Department of Social Services Strengthening Families Initiative (SFI) Practice Model, is obsolete and was removed. Section 103.3, Disclosure of Information from the Income Eligibility Verification System (IEVS), previously missing from the Table of Contents, was added. Subsequent Sections were renumbered as 103.4, 103.5 and 103.6.</td>
</tr>
<tr>
<td>Section 100.1</td>
<td>The Code of Virginia citation was updated. Section 63.2-619 has been repealed.</td>
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<tr>
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<tr>
<td>Section 100.4</td>
<td>Virginia Public Records Act, the title of Code of Virginia Section 42.1-76 et seq., was added.</td>
</tr>
<tr>
<td>Section 100.5</td>
<td>The Strengthening Families Initiative (SFI) Practice Model is obsolete and has been removed.</td>
</tr>
<tr>
<td>Section 101.1, page 1a</td>
<td>The Code of Virginia citation was updated. Section 2.2-2632 et seq., has been repealed.</td>
</tr>
<tr>
<td>Section 101.1, page 1b</td>
<td>Section 101.1.E was reworded for clarity. The fax number and email address of the Office of Civil Rights were added.</td>
</tr>
<tr>
<td>Section 102.1</td>
<td>Reference to the term “grant” was removed and replaced with payment.</td>
</tr>
<tr>
<td>Section 102.2</td>
<td>Reference to the term “grant” was removed and replaced with payment. The form number for the Notice of Intentional Program Violations and Penalties was updated.</td>
</tr>
<tr>
<td>Section 102.2, page 1a</td>
<td>The form numbers listed in item 102.2.E were updated. Section 102.F information that was continued on page 2 was moved to the bottom of page 1a.</td>
</tr>
<tr>
<td>Section 102.3, page 2</td>
<td>The Application for Benefits form number was updated. Reference to the Statement of Facts was removed. The Note was reworded for clarity.</td>
</tr>
<tr>
<td>Section 102.4, page 3</td>
<td>Section 102.4 information that was continued on page 3a was moved to the bottom of page 3.</td>
</tr>
<tr>
<td>Section 102.4, page 3a</td>
<td>References to the redetermination form in items 102.4.B and 102.4.C were replaced with renewal application.</td>
</tr>
<tr>
<td>Section 102.8, page 4</td>
<td>Section 102.8 information that was continued on page 4a was moved to the bottom of page 4.</td>
</tr>
<tr>
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</tr>
<tr>
<td>Section 102.10, page 4a</td>
<td>Section 102.10 information that was continued on page 5 was moved to page 4a.</td>
</tr>
<tr>
<td>Section 102.11, page 4a</td>
<td>Section 102.11 that was on page 5 was moved to the bottom of page 4a.</td>
</tr>
<tr>
<td>Section 102.12, page 5</td>
<td>Under Section 102.12, items 6 and 7 were moved from the top of page 6 to the bottom of page 5.</td>
</tr>
<tr>
<td>Section 102.13, page 6a</td>
<td>Section 102.13 information that was continued on page 7 was moved to the bottom of page 6a.</td>
</tr>
<tr>
<td>Section 103.2, page 2</td>
<td>A portion of Section 103.2.C was moved from the bottom of the previous page to the top of page 2.</td>
</tr>
</tbody>
</table>
| Section 103.4, page 3 | The portion of Section 103.4 that was on the bottom of page 2 was moved to the top of page 3.  
The Request for the Address of a TANF Recipient form number referenced at 103.4.B.2 was updated. |
| Section 104.3, page 2 | The reference to “Field” Offices in Item F was replaced with “Regional” Offices. |
| Section 105.2, page 2 | The section in guidance that addresses the notice requirement for action taken based on an appeal decision, 401.4.E, was updated. |
| Section 105.2, page 3 | The Note that was previously at the top of page 4 was moved to the bottom of page 3. |
| Section 105.3, page 4 | Section 105.3 information that was continued on page 5 was moved to the bottom of page 4.  
Reference to the term “grant” was removed and replaced with payment. |
<p>| Section 106.1 | At Item B.3.c, the reference to ADAPT was replaced with VaCMS and the reference to Statement of Facts was replaced with application. |</p>
<table>
<thead>
<tr>
<th>Section 106.1, page 2</th>
<th>Typographical errors in Item D were corrected, and the underlining of Summary was removed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 106.2, page 3a</td>
<td>Item E was reworded for clarity and the carryover sentence that was on page 4 was moved to page 3a.</td>
</tr>
<tr>
<td>Section 106.2, page 4</td>
<td>Item G was reworded for clarity and information that was continued on page 5 was moved to the bottom of page 4.</td>
</tr>
<tr>
<td>Section 106.3, page 5</td>
<td>At Item E, the carryover sentences previously on page 6 were moved to the bottom of page 5.</td>
</tr>
<tr>
<td>Section 200, Table of Contents, page 2</td>
<td>Section 201.12.J was replaced with Child Capped in Another State. Appendix IV was renamed to Continuing Assistance beyond the TANF 60-Month Clock in VaCMS.</td>
</tr>
<tr>
<td>Multiple Sections and Pages: Section 201.1, pages 1a-3b, 3d; Section 201.3, pages 4b-4d; Section 201.8, page 1; Section 201.10, pages 3a-4; Section 201.12, pages 7-7a; Appendix III, page 2; Appendix X, pages 1-7</td>
<td>References to the term “grant” were removed and replaced with payment.</td>
</tr>
<tr>
<td>Section 201.1, page 1</td>
<td>At Item B.3, references to the Eligibility Review, Part A, and the ADAPT Statement of Facts were removed.</td>
</tr>
<tr>
<td>Section 201.1, page 2</td>
<td>At Item D.3, the last sentence was reworded for clarity. For cases that are transferred, the receiving agency must ensure that the recipient has been advised of the immunization requirement.</td>
</tr>
<tr>
<td>Section 201.1, page 2a</td>
<td>For clarity, a duplicated sentence was removed from the first paragraph.</td>
</tr>
<tr>
<td>Section 201.1, page 3</td>
<td>Guidance regarding the status of the Medical Assistance case due to the immunization reduction for the TANF program has been removed.</td>
</tr>
<tr>
<td>Section 201.1 page 3a</td>
<td>At Item G, references to ADAPT coding have been removed and replaced with VaCMS terminology. A PC is now an eligible child and a PR is now an eligible adult.</td>
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</tr>
<tr>
<td>Section 201.1, page 3b</td>
<td>Reference to ADAPT was removed and replaced with VaCMS.</td>
</tr>
<tr>
<td>Section 201.1, page 3c</td>
<td>The first note was updated to reflect VaCMS Procedures for sending the 60-month TANF Lifetime Limit letter. Examples 3 and 5 were updated to reflect VaCMS procedures and a current timeline of events for the 60-month clock.</td>
</tr>
<tr>
<td>Section 201.1, page 3d</td>
<td>Reference to Appendix IV was updated to reflect the new title, Continuing Assistance beyond the Sixty Month Clock.</td>
</tr>
<tr>
<td>Section 201.1-201.2, page 3e</td>
<td>A duplicated sentence was removed from Section 201.2 for clarity.</td>
</tr>
<tr>
<td>Section 201.3, page 4</td>
<td>Reference to an Alert was removed and replaced with Task and Reminder to reflect VaCMS terminology. Reference to the SPARK page was removed and replaced with Fusion.</td>
</tr>
<tr>
<td>Section 201.3, page 4a</td>
<td>Contact information for Learnfare issues has been updated.</td>
</tr>
<tr>
<td>Section 201.5, page 3a</td>
<td>At Item 2, the second paragraph, the requirement to conduct a special review for shared living arrangements was removed. At the next review, the agency must verify the child’s actual living arrangements and determine whether the “living with” requirement continues to be met.</td>
</tr>
<tr>
<td>Section 201.5-201.6, page 5</td>
<td>At Item 3, instructions were added to reflect where protective payee details for an individual caring for a minor parent should be selected in VaCMS.</td>
</tr>
<tr>
<td>Section 201.7, page 1</td>
<td>The first sentence on page 1a was moved to the end of page 1.</td>
</tr>
<tr>
<td>Section 201.7, page 1a</td>
<td>The first sentence was moved to the end of page 1.</td>
</tr>
</tbody>
</table>
| Section 201.7, page 1d | At Item C, references to the Eligibility Review, Part A, and the ADAPT Statement of Facts were removed.  
The second paragraph at Item C was reworded for clarity. |
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Section 201.8, page 1</td>
<td>At Item A, reference to ADAPT was removed and replaced with VaCMS.</td>
</tr>
</tbody>
</table>
| Section 201.8, page 1b | At Item E, reference to ADAPT procedures for verification and documentation of SSN’s were removed and replaced with VaCMS procedures.  
References to ADAPT were removed and replaced with SVES and SOLQ-I. | |
| Section 201.10, page 2a| ADAPT procedures for coding Attesting to the Lack of Information (ATL) were removed and replaced with VaCMS procedures. | |
| Section 201.10, page 3 | At Item 2, ADAPT procedures for documenting noncooperation were removed and replaced with VaCMS procedures.  
At Item 2.b, VaCMS procedures for taking action on noncooperation were added. | |
| Section 201.10, page 3a| This entire section has been updated to reflect VaCMS procedures for taking action on noncooperation.  
All references to ADAPT were removed and replaced with VaCMS.  
ADAPT procedures for taking action on the DCSE Noncooperation Worklist were removed as the DCSE Noncooperation Worklist no longer exists.  
The responsibilities of the EW and local agency for acting on noncooperation have been outlined. | |
| Section 201.10, page 3b| A statement was added to inform the EW of their responsibility for ensuring that VaCMS performs the appropriate actions as described in guidance for noncooperation during the first six months of receipt of assistance. | |
| Section 201.10, page 5a | At Item H, the last sentence was reworded for clarity.  
At Item J, the ADAPT procedures were removed and replaced with VaCMS procedures for entering good cause. |
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Section 201.10, page 6</td>
<td>At Item L, reference to the 501 series in ADAPT was removed and replaced with the Absent Parent Information Details screens in VaCMS.</td>
</tr>
</tbody>
</table>
| Section 201.12, page 7  | The second paragraph was removed.  
VaCMS terminology was added to assist the worker with identifying the correct fields in VaCMS when applying the Family Cap Provision.  
The examples were updated to reflect a current timeline of events and to incorporate VaCMS terminology for payments. |
| Section 201.12, page 7a | Example 4 was updated to reflect a current timeline of events.  
At Item A, the reference to the ADAPT 501 series was removed and replaced with Absence Information Details screen in VaCMS. |
| Section 201.12, page 8  | At Item H, reference to the combined application was removed.  
At Item J, reference to Medicaid coverage for the child subject to the family cap provision was removed and replaced with the information at Item K, Child Capped in Another State.  
Item K has been removed. |
| Section 201, Appendix III, page 2 | Reference to ADAPT procedures regarding the citizenship verification process were removed and replaced with VaCMS procedures.  
The reference to a PC was removed. |
| Section 201, Appendix IV, page 1 | References to ADAPT were removed and replaced with VaCMS.  
ADAPT procedures for Continuing Assistance Beyond the TANF 60-Month Clock were removed and replaced with VaCMS procedures.  
The first paragraph was reworded for clarity. |
| Section 201, Appendix IV, page 2 | The instructions for rescinding a case closure with 60 months already on the clock have been updated to reflect VaCMS procedures. |
| Section 201, Appendix X, pages 1-7 | The examples on pages 1-7 were updated to reflect the current SOA’s. |
| Chapter 300, Table of Contents, page 1 | Definition of the Standard Filing Unit was removed and replaced with Definition of the Eligibility Determination Group.  
Timely Report Examples, Section 305.1.G, was added to the Table of Contents. |
| Chapter 300, Table of Contents, page 2 | Reference to the term “grant” was removed and replaced with payment. |
| Section 301.1 | The Code of Virginia citation and quotation were updated. Section 63.1-110 was repealed and replaced with Section 63.2-505. |
| Section 302.2, page 1 | The definition of a Standard Filing Unit, as related to ADAPT, was removed and replaced with the definition of an Eligibility Determination Group (EDG), as related to the VaCMS.  
Reference to the term “grant” was removed and replaced with payment. |
| Section 302.3, page 1 | Reference to ADAPT coding for court convicted offenders was removed.  
Reference to the term “grant” was removed and replaced with payment. |
| Section 302.6, page 1b | At Item E, references to ADAPT documentation and coding was removed.  
VaCMS documentation and system requirements for the evaluation and approval of an EWB were added. |
| Section 302.7, page 2 | The term “grant” was replaced with payment.  
The carryover sentence previously continued on page 2a was moved to the bottom of page 2. |
<table>
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</thead>
<tbody>
<tr>
<td>Section 302.7, page 2a</td>
<td>The first two sentences previously on page 2a were moved to the bottom of page 2.</td>
</tr>
</tbody>
</table>
| Section 302.7, page 4 | At Item E.6., the period of ineligibility for receipt of a lump sum was updated to one month.  
At Item E.13, the recipient’s reporting time standard was updated from by the end of the fifth day to by the 10th of the month following the date it becomes clear that a child will be out of the home for 60 consecutive days. The manual citation for time standards for reporting changes was added. |
| Section 302.7, page 4a | At Item F.6., the period of ineligibility for receipt of a lump sum was updated to one month. |
| Section 302.8, page 4b | At Item A, the reference to TANF “policy” was updated to TANF guidance. Reference to the term “grant” was removed and replaced with payment. |
| Section 302.8, page 4c | References to ADAPT coding were removed from Items A.1.a.1 and A.1.a.2. |
| Section 302.8, page 5 | References to ADAPT coding were removed and minor rewording changes were made at Items A.1.a.3, A.1.b and c, and A.2.a. |
| Section 302.8, page 5a | References to ADAPT coding were removed.  
A statement was added to explain that the individual standing in loco parentis for the minor parent should be indicated on the Relationship –Details screen in VaCMS. The box under the “In Loco Parentis (TANF)” column must be checked. Emphasis was placed on “minor parent” because the in loco parentis box should only be checked in VaCMS when there is a minor parent included in the assistance unit. |
<p>| Section 304.1 | Guidance was updated to reflect the change in the number of locality groupings. The number changed from three to two groups effective July 1, 2017. The Code of Virginia citation was updated. Section 63.1-110 was repealed and replaced with Section 63.2-505. |
| Section 304.2 | Reference to the term “grant” was removed and replaced with payment. |
| Section 304, Appendix 1 | The note at the bottom of the page was moved from the center of the page to the left side of the page. It was also noted that the former Group I localities were moved to Group II. |
| Section 305.1, page 2 | The standard deduction amounts were updated to reflect the 2018 amounts. |
| Section 305.1, page 3 | At Item B.2., language was added to clarify that to be reasonably certain about income, not only the rate of pay was needed, but also the number of work hours. |
| Section 305.1, page 4 | The term “grant” was replaced with payment. |
| Section 305.1, page 5 | The years listed in the examples were updated. |
| Section 305.1, page 6 | The years listed in the example were updated. For consistency and clarification purposes, the dollar sign, division sign and the word “month” were added to the equations under Examples 1 and 3. Reference to the term “grant” was removed and replaced with payment. |
| Section 305.1, page 8 | Reference to ADAPT was removed. The ADAPT term “granted” was replaced with “approved.” At Item C., the reference to documentation of unearned income verification in ADAPT was removed and replaced with the location for documentation of unearned income verification within the VaCMS, in Case Comments on the Screen Level page. |</p>
<table>
<thead>
<tr>
<th>Section 305.1, page 9</th>
<th>At Item D., the income chart was updated to reflect the 130% of the 2018 Federal Poverty Levels amounts.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 305.1, page 9a</td>
<td>At Item D.2.a, language was added to clarify that for a reported income change, documentation of the rate of pay, number of hours, frequency of pay and the payment cycle must be documented within the VaCMS in Case Comments on the Screen Level page.</td>
</tr>
<tr>
<td>Section 305.1, page 10</td>
<td>Item D. was corrected to Item E. At Item E.2, duplicate language regarding deleting persons from the assistance unit was removed. At Example 2, the term “grant” was removed and replaced with payment.</td>
</tr>
<tr>
<td>Section 305.2., pages 12 and 13</td>
<td>At Item A, the carryover sentence that was on page 13 was moved to page 12.</td>
</tr>
<tr>
<td>Section 305.3, page 15</td>
<td>At Item B.2., the reference to WIA (Workforce Investment Act) was updated to WIOA (Workforce Innovation and Opportunity Act) and the term “grant” was removed and replaced with payment.</td>
</tr>
<tr>
<td>Section 305.3, page 17</td>
<td>At Item B.5, the form number for the Medical Evaluation was corrected.</td>
</tr>
<tr>
<td>Section 305.3, page 20</td>
<td>The TANF Manual citation for the Transitional Child Care Benefits section was corrected; the citation was changed from 401.8 to 401.7.</td>
</tr>
<tr>
<td>Section 305.4, page 23</td>
<td>At Item A.9, the Action Office was updated to the Action Federal Domestic Volunteers Office.</td>
</tr>
<tr>
<td>Section 305.4, page 24</td>
<td>At Item A.20, reference to approval action in ADAPT was changed to action required for approval in the VaCMS.</td>
</tr>
<tr>
<td>Section 305.4, page 32b and 33</td>
<td>At Item D.1.d, the carryover sentences and address of the U.S. Citizenship and Immigration Services previously on page 33 were moved to page 32b.</td>
</tr>
<tr>
<td>Section 305.4, page 33a</td>
<td>At Item E.1, the manual citation for income deeming was updated.</td>
</tr>
</tbody>
</table>
| Section 305.4, page 35 | At Item E.2, references to ADAPT were removed and replaced with VaCMS.  
Reference to the term “grant” was removed and replaced with payment. |
|------------------------|-------------------------------------------------------------------------------------------------------------------------|
| Section 305.4, page 36 | Reference to the term “grant” was removed and replaced with payment.  
The Exceptions previously listed on page 36a were moved to page 36. |
| Section 305.4, page 36a | Item E.4 previously on page 37 was moved to page 36a. |
| Section 305.4, page 37 | At Item F.1, reference to the term “grant” was removed and replaced with payment. |
| Section 305.4, page 38 | At Item F.1.a.4)., reference to the term “grant” was removed and replaced with payment.  
A portion of the last sentence carried over on page 39 was moved to page 38.  
The 2018 150% FPL amount for two persons was updated. |
| Section 305.4, pages 39, 40, and 41 | References to the term “grant” were removed and replaced with payment.  
Examples 1 and 3 - The income calculations and 2018 150% FPL amount for two persons were updated. |
| Section 305.4, page 42a | At Item F.2.c.4., reference to the term “grant” was removed and replaced with payment. |
| Section 305.4, page 44 | References to the term “grant” were removed and replaced with payment in Examples 1 and 2.  
The Standard of Assistance (SOA) amounts in Examples 1 and 2 were updated to a current SOA amount for a Group II locality. |
<p>| Section 305.5, page 46 | The entire page was deleted because the language on the page was an exact duplicate of language on page 45. |</p>
<table>
<thead>
<tr>
<th>Section 305, Appendix 4, page 3</th>
<th>The Establishing Quarters table was updated with the Quarter Minimum and Annual Minimum amounts for 2014 – 2018.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multiple Sections and Pages: Section 502.2, pages 2-3; Section 502.3, page 3; Section 502.4, page 4; Section 502.6, pages 6-7a; Section 502.7, pages 7c-8; Section 503.7, page 2c; Section 503.8, pages 3-4a; Section 503.9, page 5; Section 500, Appendix I, page 5, 11, and 15; Appendix III, page 8</td>
<td>References to the term “grant” were removed and replaced with payment.</td>
</tr>
<tr>
<td>Section 502.1, page 1</td>
<td>The statement referencing the full budgetary funding deficit was deleted because VDSS is providing 100% of the SOAs for all agencies.</td>
</tr>
</tbody>
</table>
| Section 502.2, page 2 | At Item A., references to TANF grant were updated to TANF payment.  
At Item A.1, the SOA amounts demonstrated in the examples were updated to reflect the current SOAs. |
| Section 502.2, page 3 | Reference to TANF grant was updated to TANF payment.  
At Item A.2, the SOA amounts demonstrated in the examples were updated to reflect the current SOAs. |
| Section 502.3, page 4 | Reference to TANF grant was updated to TANF payment.  
At Item B, Language removed as EA payments for purchase, repair, moving or storage of household equipment are not made through vendor payments. |
| Sect 502.4, page 4 | This item was moved from the top of page 4a to page 4.  
Reference to ADAPT was removed and replaced with Virginia Case Management System (VaCMS). |
<table>
<thead>
<tr>
<th>Section 502.5, page 4a</th>
<th>Reference to ADAPT was removed and replaced with System VaCMS. At Item A.3, the reference to Vendor Payments is obsolete and has been removed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 502.5, page 5</td>
<td>TANF Child Support Supplement Payment has been added as a type of payment and the date of issuance.</td>
</tr>
<tr>
<td>Section 502.6, pages 6 and 7</td>
<td>At page 6, Item B, reference to TANF grant was updated to TANF payment. The first paragraph on page 7 was put on page 6. On page 7, the sentence in the first paragraph referencing a site for instructions for transfers between Loudoun County and other agencies was removed.</td>
</tr>
<tr>
<td>Section 502.6, page 7</td>
<td>References to TANF grant were updated to TANF payment.</td>
</tr>
<tr>
<td>Section 502.6, pages 7a</td>
<td>Item D.3, was deleted because VDSS is providing 100% of the SOAs for all agencies. Reference to ADAPT has been replaced with VaCMS. Lettering for the additional page items have been adjusted. References to TANF grant were updated to TANF payment.</td>
</tr>
<tr>
<td>Section 502.6, page 7b</td>
<td>Item F, reference to Medicaid Coverage has been removed. Lettering for additional items have been adjusted.</td>
</tr>
<tr>
<td>Section 502.7, page 7c</td>
<td>Reference to TANF grant was updated to TANF payment.</td>
</tr>
<tr>
<td>Section 502.7, page 8</td>
<td>Reference to TANF grant was updated to TANF payment.</td>
</tr>
<tr>
<td>Section 503.5, page 1b</td>
<td>Under Repayment Procedures reference to ADAPT has been replaced with VaCMS. It has also been added, “When an overpayment is entered into VaCMS, the originating FIPS field will default to the FIPS of the worker initiating the claim. The originating locality in which the overpayment occurred is responsible for entering the claim”. This must be done prior to going to the TANF Overpayment Calculation Screen.</td>
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</tr>
<tr>
<td>Section 503.7, page 2c</td>
<td>References to TANF grant were updated to TANF payment. At Item H.1, the report’s name has been corrected to TANF Cases Current Collected Support Report. At Item H.2 in the Example, the Standard of Assistance was changed to the current amounts.</td>
</tr>
<tr>
<td>Section 503.8, page 3</td>
<td>References to TANF grant were updated to TANF payment. At Item B was revised to remove reference to ADAPT procedures and replace with VaCMS procedures. “grant” amount in the example was changed from 336 to 347. The recoupment calculation was revised to show the “grant” amount and recoupment amount can have cents.</td>
</tr>
<tr>
<td>Section 503.8, page 3a</td>
<td>References to TANF grant were updated to TANF payment. Example #1 and Example #2, “grant” amounts were revised and recalculated with the current “grant” amounts.</td>
</tr>
<tr>
<td>Section 503.8, page 4</td>
<td>At item D.2.a, reference to ADAPT was replaced with VaCMS and the process for identifying the liable person for VaCMS was added. At b., the process for showing the liable person was removed. At c., was reworded to say minors are not responsible for overpayments unless they are described as (1) under Item D. Example 2 was updated with VaCMS instructions; reference to TANF “grant” was updated to TANF payment.</td>
</tr>
</tbody>
</table>
At Item G., reference to the term “grant” was
changed to payment.

Section 503.8, page 4a

At Item H information for retaining
overpayment information has been changed to
the worker retaining the Claim Information
Screen and the Overpayment Calculation
Screen.
Section 503.9, page 5

Reference to the term “grant” was changed to
payment.

Section 500, Appendix I

At the Glossary, A.1., has been updated to
replace references to ADAPT with VaCMS.
At A.2, Payment History (ADAPT) has been
updated to Issuance Summary/Search screen
(VaCMS).

Section 500, Appendix I, page 2

At Item C.1, Check Handling Procedures
have been revised to replace ADAPT
procedures with VaCMS procedures.

Section 500, Appendix I, page 3

At Item C.1.a., instructions for re-mailing
undelivered check within 10 days has been
revised with instructions on re-mailing the
check in VaCMS. At Item b., instructions for
canceling an undelivered check within 10 days
have been revised with instructions to cancel
the check through VaCMS.

Section 500, Appendix I, page 4

At Item C.2, State Checks Returned to local
department of social services (LDSS);
instructions have been updated from ADAPT
procedures to VaCMS procedures and informs
the worker how to handle State checks
returned to Local Department of Social
Services (LDSS).
At Item C.3, Check Reported Undelivered by
Payee; instructions to re-mail the undelivered
check within the 10-day time frame have been
revised to provide VaCMS instructions.

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| Section 500, Appendix I, page 5 | At Item C.4.a., Check Reported Lost/Stolen/Mutilated by Payee; Mutilated added to the section title as the replacement procedures are the same as the Lost and Stolen check procedures; references to ADAPT instructions have been replaced with VaCMS instructions. |
| Section 500, Appendix I, page 6 | At the 4th bullet, the reference to procedures for mutilated checks have been changed from Section E. to Section D.  
The worker’s name for the FPU unit has been removed and replaced with FPU – TANF Affidavits. |
<p>| Section 500, Appendix I, page 7 | At Item c., enter stop payment request in VaCMS, reference to ADAPT procedures have been updated to VaCMS procedures. |
| Section 500, Appendix I, page 8 | At Item D., Mutilated check procedures replaced Checks Lost by First Casher After Check is Cashed by Payee (e.g., Fire, Robbery, or Employee Error) as procedures are the same as Lost/Stolen/Mutilated checks replacement procedures. |
| Section 500, Appendix I, page 9 | At Item E., at the 2nd bullet, language updated for clarity. At the 3rd bullet, Local checks are to be issued only in an emergency and with the prior approval of the TANF Program Manager in order to be reimbursed. |
| Section 500, Appendix I, page 10 | At Item H., Procedure to Ensure Reimbursement for a Locally Issued Check ADPAT procedures were updated to VaCMS procedures. |
| Section 500, Appendix I, page 11 | ADAPT reference on The Affidavit on Check Endorsement was updated to VaCMS. |
| Section 500, Appendix I, page 14 | The Wells Fargo Bank form was removed as the existing TANF benefit issuance has transitioned to Bank of America. This page was intentionally left blank. |
| Section 500, Appendix I, page 15 | ADAPT reference on The Affidavit on Check Endorsement form instructions were updated to VaCMS instructions. |</p>
<table>
<thead>
<tr>
<th>Section 500, Appendix I, page 17</th>
<th>Reference to ADAPT was replaced with VaCMS. Wells Fargo Affidavit Instructions were removed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 500, Appendix I, page 18</td>
<td>Reference to ADAPT have been replaced with VaCMS.</td>
</tr>
<tr>
<td>Section 500, Appendix II, page 1</td>
<td>The Glossary terms bullets were replaced with numbers for consistency. At Item A.1., ADAPT was updated to VaCMS. At Item A.7., and A.8., Payment History and Specific Payment Inquiry were updated to VaCMS terminology.</td>
</tr>
<tr>
<td>Section 500, Appendix II, pages 2 - 3</td>
<td>At Item C., reference to ADAPT procedures for How to Process a Direct Deposit Request have been updated to VaCMS procedures.</td>
</tr>
<tr>
<td>Section 500, Appendix II, pages 3 - 4</td>
<td>At Item D., reference to ADAPT procedures for Procedures to reissue payments that did not electronically post (direct deposit) to client’s bank account have been updated to VaCMS procedures.</td>
</tr>
<tr>
<td>Section 500, Appendix III, page 1</td>
<td>In the Glossary, At Item A.1., ACS was replaced with Conduent. At Item A.2., ADAPT was updated to VaCMS. At Item A.4., Debit Card was redefined. At Item A.7. and A.8., Payment History and Specific Inquiry were replaced with VaCMS terminology. Payment ADAPT’s Payment History reference was updated to VaCMS Issuance Summary/Search screen. At Item A.8, Specific Payment Inquiry was updated to Benefit Issuance Details. At Item B.1., reference to ADAPT were replaced with VaCMS.</td>
</tr>
<tr>
<td>Section 500, Appendix III, page 2</td>
<td>At Item C., reference to ADAPT procedures for How to Process a Debit Card Request were update to VaCMS procedures. At Item D., reference to ADAPT procedures for How TANF Payments Will Be Issued When the Request to Establish a Debit Card Account (Request a Debit Card) is Rejected were updated to VaCMS procedures.</td>
</tr>
<tr>
<td>Section 500, Appendix III, page 3</td>
<td>At Item E., reference to ADAPT procedures</td>
</tr>
<tr>
<td>Section 500, Appendix III, page 4</td>
<td>At Item G., reference to ADAPT procedures for How to Change the Payment Issuance Method from Direct Deposit to Debit Card were updated to VaCMS procedures.</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>At Item H., reference to ADAPT procedures for How to Change the Payment Issuance Method from Debit Card to Check were updated to VaCMS procedures.</td>
</tr>
<tr>
<td>Section 500, Appendix III, page 5</td>
<td>At Item I., reference to ADAPT procedures for How to Change the Payment Issuance Method from Debit Card to Direct Deposit were update to VaCMS procedures.</td>
</tr>
<tr>
<td></td>
<td>Adjustments were made to page 7.</td>
</tr>
<tr>
<td>Section 500, Appendix, page 7</td>
<td>At Item L., Change of Address Reported by Cardholder, and Item N., A Social Security Number and/or Date of Birth Has Been Corrected for a Debit Cardholder, references to the ACS and the EPPIC system were replaced with Conduent and Way2Go.</td>
</tr>
<tr>
<td></td>
<td>At Item M., reference to ADAPT and EPPIC were updated to VaCMS and Conduent.</td>
</tr>
<tr>
<td>Section 500, Appendix, page 8</td>
<td>At Item O, references to ADAPT procedures were replaced with VaCMS procedures and reference to EPPICard was replaced with Way2Go. Procedures for Reporting Non-Receipt of Debit Card Funds were updated.</td>
</tr>
<tr>
<td>Section 900, Table of Contents, page 1</td>
<td>Reference to VIEW Worker was removed and replaced with Employment Services Worker. References to the term “grant” were removed and replaced with payment.</td>
</tr>
<tr>
<td>Multiple Sections and Pages: Section 901.2, pages 2c and 3a; Section 901.3, pages 4-4a; Section 901.4, page 5; Section 901.5, pages 5b-5c; Section 901.6, pages 6-7a; Section 901.7, page 8; Section 901.9, page 8a; Section 901.10, page 9a; Section 901.11, pages 9b-10; Section 901.14, page 13; Appendix I, pages 1-3; Appendix II, pages 1-5</td>
<td>References to the term “grant” were removed and replaced with payment.</td>
</tr>
<tr>
<td><strong>Section 901.1-901.2, page 1</strong></td>
<td>Section 901.1 was updated to reflect that applicants and recipients that are not required to participate in the VIEW program are considered exempt. At Items A, B and C, references to ADAPT procedures and coding were removed. The Code of Virginia citation was corrected.</td>
</tr>
<tr>
<td><strong>Section 901.2, page 2</strong></td>
<td>At Item D, ADAPT procedures for coding temporary medical conditions were removed and replaced with VaCMS procedures. A statement was added to the third paragraph to provide clarity regarding the medical exam for which a medical evaluation is based.</td>
</tr>
<tr>
<td><strong>Section 901.2, page 2a</strong></td>
<td>At Item E, reference to ADAPT procedures for coding Social Security Disability (SSDI) and Supplemental Security Income recipients (SSI) was removed and replaced with VaCMS procedures. Reference to the Department of Rehabilitation Services (DRS) was removed and replaced with the Department for Aging and Rehabilitative Services.</td>
</tr>
<tr>
<td><strong>Section 901.2, page 2b</strong></td>
<td>Item G was reworded for clarity. Reference to ADAPT procedures for coding an individual caring for a disabled household member was removed and replaced with...</td>
</tr>
</tbody>
</table>
| Section 901.2, page 2c | References to ADAPT procedures and coding were removed throughout this entire page.  
To provide clarity, the second paragraph was reworded.  
References to the V1 exemption have been removed and replaced with caring for a child under 12 months.  
Minor typographical errors were corrected. |
|------------------------|--------------------------------------------------------------------------------------------------|
| Section 901.2, page 3  | References to ADAPT procedures and coding were removed throughout this entire page.  
References to the V1 exemption have been removed and replaced with caring for a child under 12 months. |
| Section 901.3, page 3b | It Item A, ADAPT procedures were removed and replaced with VaCMS Procedures.  
Reference to VIEW Worker has been replaced with ESW.  
At Item C, the paragraph was updated to provide clarity regarding the EW’s responsibility to explain transitional services to applicants/recipient. In addition, the list of services was expanded.  
At Item E, the Department of Rehabilitative Services (DRS) was updated to the Department of Aging and Rehabilitative Services (DARS). |
<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item G was moved to the top of page 4.</td>
<td></td>
</tr>
<tr>
<td><strong>Section 901.3, page 4</strong></td>
<td>Item G, previously on Page 3b, was moved to the top of this page. At Item J, the references to computer system were removed and replaced with VaCMS and task and reminders. References to VIEW worker were removed and replaced with ESW. The list of changes that the ESW will be notified of was updated.</td>
</tr>
<tr>
<td><strong>Section 901.3, page 4a</strong></td>
<td>Item N was updated to reflect VaCMS procedures. References to VIEW worker were removed and replaced with ESW. At Item Q, VaCMS procedures were added. At Item R, reference to ADAPT was removed and replaced with VaCMS. Instructions for accessing the list of Alerts in the ESPAS manual were removed.</td>
</tr>
<tr>
<td><strong>Section 901.4, page 5</strong></td>
<td>References to VIEW worker were removed and replaced with ESW. At Item C, reference to ADAPT instructions and screen names were replaced with VaCMS procedures. Instructions for accessing Alerts in the ESPAS manual were removed. Item F was updated to provide clarity.</td>
</tr>
<tr>
<td><strong>Section 901.4, page 5a</strong></td>
<td>Item J was updated to provide clarity regarding the disability screening. Instructions for accessing the list of Alerts in the ESPAS manual were removed. At Item O, references to VIEW worker were removed and replaced with ESW.</td>
</tr>
<tr>
<td><strong>Section 901.5, page 5b</strong></td>
<td>References to VIEW worker were removed and replaced with ESW.</td>
</tr>
<tr>
<td>Section</td>
<td>Page</td>
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<td>------</td>
</tr>
<tr>
<td>Section 901.5, page 5c</td>
<td>References to VIEW worker were removed and replaced with ESW. At Items C and D, reference to ADAPT procedures were removed and replaced with VaCMS procedures.</td>
</tr>
<tr>
<td>Section 901.5, page 5d</td>
<td>References to ADAPT procedures were removed and replaced with VaCMS procedures.</td>
</tr>
<tr>
<td>Section 901.6, page 6</td>
<td>Reference to VIEW worker was removed and replaced with ESW. References to ADAPT were removed and replaced with VaCMS.</td>
</tr>
<tr>
<td>Section 901.6, page 6a</td>
<td>At Item 3, the example was updated to reflect a current timeline. Reference to VIEW worker was removed and replaced with ESW.</td>
</tr>
<tr>
<td>Section 901.6, page 7a</td>
<td>References to VIEW worker were removed and replaced with ESW.</td>
</tr>
<tr>
<td>Section 901.7, page 8</td>
<td>At Items A and B, references to guidance have been updated. Item A.2 was reworded for clarity.</td>
</tr>
<tr>
<td>Section 901.8-901.9, page 8a</td>
<td>References to VIEW worker were removed and replaced with ESW.</td>
</tr>
<tr>
<td>Section, 901.9, page 9</td>
<td>To provide clarity, the first example at Section 901.9, page 9, was reworded.</td>
</tr>
<tr>
<td>Section 901.10, pages 9a</td>
<td>Reference to ADAPT was removed and replaced with VaCMS. The requirement to mail the Appeals and Fair Hearings form (032-01-0901-22) was removed. The first paragraph was reworded for clarity. The second paragraph was reworded for clarity.</td>
</tr>
<tr>
<td>Section 901.10, pages 9b</td>
<td>The dates in the examples were updated.</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-----------------------------------------</td>
</tr>
<tr>
<td>Section 901.11, page 10</td>
<td>The dates in the examples were updated.</td>
</tr>
<tr>
<td>Section 901.11-901.12, page 10a</td>
<td>The dates in the examples were updated. Reference to ADAPT procedures was replaced with VaCMS procedures. At Item A, procedures were added for transferring an active VIEW case to another agency. Reference to ESPAS was removed and replaced with ESP.</td>
</tr>
<tr>
<td>Section 901.13, page 11</td>
<td>Minor grammatical errors were corrected At Item A.1, criteria for the receipt of the VTP were updated. If a case closes because a renewal was not submitted or completed, VTP cannot be established. ADAPT procedures were removed. For clarity purposes, some references to TANF were replaced with TANF/VIEW and TANF-UP/VIEW. Reference to VIEW worker was removed and replaced with ESW.</td>
</tr>
<tr>
<td>Section 901.13, page 11a</td>
<td>References to VIEW worker were removed and replaced with ESW. Reference to ESPAS was removed and replaced with ESP module. At Item 4, the language was removed because the worker will now have the ability to establish VTP retroactively, provided all VTP criteria were met at the time of the TANF/VIEW or TANF-UP/VIEW closure. The remaining items were renumbered.</td>
</tr>
</tbody>
</table>
| Section 901.13, page 12 | Reference to ADAPT was replaced with VaCMS.  
The reference to the instructions for establishing, reinstating, reissuing, closing and cancelling VTP in ADAPT was removed. |
|------------------------|---------------------------------------------------------------------------------------------------------------|
| Section 901.14, pages 13 | The first paragraph was reworded for clarity.  
References to ADAPT were removed and replaced with VaCMS.  
References to ADAPT procedures were replaced with VaCMS procedures.  
Reference to VIEW worker has been replaced with ESW.  
The second paragraph was reworded to provide clarity. A TANF payment will not be made during the FEP placement. |
| Section 901.14, pages 14 | References to ADAPT were removed and replaced with VaCMS.  
References to the VIEW worker were removed and replaced with ESW.  
Minor grammatical corrections were made. |
| Section 901.14, pages 15 | References to the VIEW worker were removed and replaced with ESW.  
At Item E, reference to Form 032-03-0655 was updated to reflect the correct name, VIEW Full Employment Program Communication Form.  
Form numbers were updated.  
At Item G, ADAPT procedures for FEP check replacements were removed and replaced with VaCMS procedures. |
| Section 900, Appendix I, page 1 | Guidance references have been updated.  
The Code of Virginia citation was corrected. |
| Section 900, Appendix I, page 2 | Guidance references have been updated.  
The Code of Virginia citation was corrected. |
|---------------------------------|------------------------------------------------|
| Section 900, Appendix II, page 1 | Example 1 was updated to reflect the current  
Standard of Assistance in the VIEW payment calculation. |
| Section 900, Appendix II, page 2 | Examples 2 and 3 were updated to reflect the  
current Standard of Assistance in the VIEW payment calculation. |
| Section 900, Appendix II, page 3 | Example 4 was updated to reflect the current  
Standard of Assistance in the VIEW payment calculation. |
| Section 900, Appendix II, page 4 | Example 5 was updated to reflect the current  
Standard of Assistance in the VIEW payment calculation. |
| Section 900, Appendix 3, page 1 | The Federal Poverty Levels were revised to  
reflect the 2018 amounts. |
| Section 1000, Table of Contents, page iv | The reference to Appendix H, Coding of  
VIEW Components in ESPAS, has been removed. The Appendix itself is in the process of being updated to describe VaCMS procedures and will be restored to guidance in a future transmittal. |
| Section 1000, VIEW Definitions, page 3 | The term “Grant” and its definition were removed. The term “grant” was replaced with payment. |
| Section 1000, VIEW Definitions, pp. 4 – 5 | The portion of the definition of Public Service Employment appearing on page 5 has been moved to page 4. ‘VTP’ has been added following the reference to the VIEW Transitional Payment in the Transitional Services definition. |
| Multiple Sections and Pages  
VIEW Definitions, page 5; Sections 1000.1,  
page 8; 1000.8, page 22; 1000.9.C, page 26a;  
1000.10, page 27; 1000.13, pages 38a, 42, and  
52; 1000.20, page 71; 1000.20, pages 75 and 76;  
1000.22, pages 81 and 83a; 1000.26, page 93 | References to the term “grant” were removed and replaced with payment. |
<p>| Section 1000.1, page 7 | The policy guidance reference of 1000.1 was |</p>
<table>
<thead>
<tr>
<th>Section 1000.1, page 8</th>
<th>The reference to ESPAS was changed to the ESP module in VaCMS.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 1000.2, page 12</td>
<td>The reference to ESPAS was changed to the ESP module in VaCMS.</td>
</tr>
<tr>
<td>Section 1000.2, page 13</td>
<td>References to data sent from ADAPT and ESPAS for federal reporting were changed to VaCMS. A portion of the final sentence was moved from page 14 to the bottom of page 13.</td>
</tr>
<tr>
<td>Section 1000.2, page 14</td>
<td>The first paragraph was rewritten to remove references to calculating participation hours for ESPAS. Actual hours of participation are entered into the ESP module in VaCMS without the need for calculation. Partial hours of participation are rounded up or down following standard rounding rules. The link to the Actual Hours Calculator on SPARK was removed. The potential penalty for failure to meet the federal participation rate was clarified.</td>
</tr>
<tr>
<td>Section 1000.2, page 14a</td>
<td>Effective 10/1/09, federal regulations allowed up to 80 hours of excused absences to be counted as participation. While there has been no change in excused absence guidance, references to the date and specific procedures related to the date were removed as no longer needed. All examples have been updated to use 2017 and 2018 as the year. The completed Holidays and Excused Absences for Participants in Unpaid Activities forms that support the examples have likewise been updated and the links to access the forms have been corrected.</td>
</tr>
<tr>
<td>Section 1000.2, page 14b</td>
<td>The example referenced in Example 5 was corrected to Example 4. “Case Record Documentation” was changed to “Case Documentation.” The requirement to</td>
</tr>
<tr>
<td>Section</td>
<td>Page</td>
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<tr>
<td>---------</td>
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</tr>
<tr>
<td>1000.3</td>
<td>15</td>
</tr>
<tr>
<td>1000.4</td>
<td>16</td>
</tr>
<tr>
<td>1000.4</td>
<td>17</td>
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<td>1000.5</td>
<td>19</td>
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<td>1000.6</td>
<td>20</td>
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<tr>
<td>1000.7</td>
<td>21</td>
</tr>
<tr>
<td>1000.8</td>
<td>22</td>
</tr>
<tr>
<td>Section 1000.8, page 23</td>
<td>The reference to TANF/VIEW Field Consultant was updated to Regional Consultant. CASAS was added as an example of a literacy assessment in Section E.2.</td>
</tr>
<tr>
<td>-------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Section 1000.8, page 24</td>
<td>The web link for Screening for Employment Barriers: Issues and Tools was updated. The explanation for Verified Barriers to Employment was rewritten at E.6 to remove references to ESPAS coding and to explain how the information is entered in the ESP module in VaCMS.</td>
</tr>
<tr>
<td>Section 1000.8, page 25</td>
<td>The partial sentence ending on page 24 was moved to the top of page 25 and revised to remove the reference to ESPAS coding. The statement regarding “banking” of TANF months was rewritten for clarity.</td>
</tr>
<tr>
<td>Section 1000.9, page 26</td>
<td>The policy guidance reference of 1000.9 was added back to the heading. References to ESPAS and ADAPT including specific coding were removed. Dates of examples were updated from 2007/2008 to 2017/2018. A statement that for medical exemptions, the EW will complete the Disability Details screen in VaCMS and the ESW will close the ESP enrollment was added.</td>
</tr>
<tr>
<td>Section 1000.9, page 26a</td>
<td>The first paragraph was rewritten for clarity. Reference to ESPAS was replaced with the ESP module in VaCMS and ESPAS coding references were removed. Example dates were updated to 2017/2018.</td>
</tr>
<tr>
<td>Section 1000.10, pages 27</td>
<td>A reference to ESPAS was removed and replaced with the ESP module in VaCMS.</td>
</tr>
<tr>
<td>Section 1000.11, page 29</td>
<td>The policy guidance reference of 1000.11 was added back to the heading. A note was added to explain that effective 10/1/17 the VIEW Activity and Service Plan can no longer be used as an application for child care services. VIEW participants will need to complete a separate Child Care Subsidy Service Application.</td>
</tr>
<tr>
<td>Section 1000.12, page 30</td>
<td>A statement was added to clarify that the</td>
</tr>
</tbody>
</table>
Section 1000.12, page 31  | The reference in 1000.12.C.1c to Volume VII of the Services Manual was removed and replaced with a reference to the Child Care Subsidy Manual.

Section 1000.13, page 34  | A reference to ADAPT was changed to the ESP module in VaCMS.

Section 1000.13, page 41  | A reference to ADAPT was changed to VaCMS at 1000.13.C.4.d. A reference to the ADAPT screen AECLOC was removed from Section D.2. A partial sentence at the top of page 42 was moved to D.3.a at the bottom of page 41.

Section 1000.13, page 42  | Reference to the ADAPT payment history was removed and replaced with the VaCMS Issuance Summary/Search screen. Reference to ESPAS was changed to the ESP module. Form numbers for the FEP Information Sheet and the FEP Communication Form were corrected.

Section 1000.13, page 44  | A reference to ESPAS was changed to the ESP module.

Section 1000.13, page 45  | A reference to ADAPT was changed to VaCMS.

Section 1000.13, page 46  | The name of the Attendance/Performance Rating Sheet was corrected to VIEW Attendance/Performance Rating Sheet; the form number was also corrected.
<table>
<thead>
<tr>
<th>Section 1000.13 page 47</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference to ADAPT was changed to VaCMS in section D.7.b. Minor grammatical corrections and rewording changes were made throughout the section. The name of the Work Site Position form was corrected to VIEW Work Site Position.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 1000.13, page 48</th>
</tr>
</thead>
<tbody>
<tr>
<td>A new link for the Employee Grievance Procedure – Grievance Form A was added in section D.8.d. Information about the option for monthly payments of the Earned Income Tax Credit (EITC) was added to D.9.b and Section D.9.c was revised accordingly.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 1000.13, page 49</th>
</tr>
</thead>
<tbody>
<tr>
<td>A reference to a supplemental benefit calculation in ADAPT was changed to Benefit Adjustment in VaCMS.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 1000.13, page 51</th>
</tr>
</thead>
<tbody>
<tr>
<td>A reference to ESPAS was removed. The requirement that a six-month assignment to CWEP be entered in two consecutive three-month segments was retained. A statement requiring reassessment after the first three-month assignment was added.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 1000.13, page 52</th>
</tr>
</thead>
<tbody>
<tr>
<td>The form number for the VIEW Referral to Worksite was corrected.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 1000.13, page 54</th>
</tr>
</thead>
<tbody>
<tr>
<td>References to ADAPT and Legacy case numbers was removed from E.8.b.(1). Managed care services related to Workers Compensation is now handled by MC Innovations through Care Works. The website address used to access doctors to serve on physician panels was updated at E.8.b.(2).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 1000.13, page 55</th>
</tr>
</thead>
<tbody>
<tr>
<td>The reference to the Employer’s Accident Report was corrected at E.8.d.3.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 1000.13, page 56</th>
</tr>
</thead>
<tbody>
<tr>
<td>The reference to WIA (Workforce Investment Act) was updated to WIOA (Workforce Innovation and Opportunity Act). References to AmeriCorps in Section G.2 which were inadvertently dropped from guidance with Transmittal 59 have been restored.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 1000.13, page 57</th>
</tr>
</thead>
<tbody>
<tr>
<td>At Item G.3, a portion of the last sentence that was on the bottom of page 56 was moved to the top of page 57. At Item H, the section “1.” identifier was removed.</td>
</tr>
<tr>
<td>Section 1000.13, page 58a</td>
</tr>
<tr>
<td>Section 1000.16, page 64</td>
</tr>
<tr>
<td>Section 1000.17, page 65</td>
</tr>
<tr>
<td>Section 1000.17, page 66</td>
</tr>
<tr>
<td>Section 1000.18, pages 67</td>
</tr>
<tr>
<td>Section 1000.18, pages 68 and 69</td>
</tr>
<tr>
<td>Section 1000.19, page 70</td>
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<tr>
<td>Section 1000.20, page 72</td>
</tr>
<tr>
<td>Section 1000.20, pages 75 and 76</td>
</tr>
<tr>
<td>Section 1000.20, page 76</td>
</tr>
<tr>
<td>Section 1000.20, pages 77 and 78</td>
</tr>
<tr>
<td>Section 1000.20, page 79</td>
</tr>
<tr>
<td>Section 1000.21, page 80</td>
</tr>
</tbody>
</table>
| Section 1000.22, page 81 | References to ESPAS procedures were replaced with VaCMS procedures. Reference to the ESPAS manual was removed.  
The policy guidance was revised to include the requirement for the Activity and Service Plan for all Transitional Services except Transitional Child Care paid from Child Care Funds. |
<p>| Section 1000.22, pages 83 and 83a | At Item B.1) and B.2), ADAPT VTP initiation and follow-up procedures were replaced with VaCMS VTP initiation and follow-up procedures. |
| Section 1000.22, page 84 | At Item B.3), ADAPT VTP follow-up procedures were updated to VaCMS follow-up procedures. |
| Section 1000.23, page 85a | At Item A, references to ADAPT coding and procedures for the referral of participants returning to the VIEW program prior to the end of the 24-month limit on TANF were updated with VaCMS procedures. In VaCMS, after the EW runs eligibility, VIEW mandatory individuals will be automatically referred to the ESP queue. |
| Section 1000.24, pages 86 and 87 | At Item A, Guidance was updated to reflect that the TANF 24-Month Advance Notice of Proposed Action is now generated by VaCMS on the 15th day of the 22nd month. A copy of the notice will be retained in the forms history within VaCMS. At Item D.1, the carry over |</p>
<table>
<thead>
<tr>
<th>Section 1000.24, page 87</th>
<th>Sentence previously on page 87 was moved to page 86.</th>
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<tr>
<td>Section 1000.24, page 88</td>
<td>At Item E.1.a., reference to the SPARK website was removed and replaced with the FUSION website and the VEC Unemployment Rate information link was updated.</td>
</tr>
<tr>
<td>Section 1000.25, page 92</td>
<td>The policy guide reference of 1000.25 was added back to the heading.</td>
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<tr>
<td>Section 1000.26, page 93</td>
<td>The policy guide reference of 1000.26 was added back to the heading.</td>
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<tr>
<td>Section 1000.26, page 95</td>
<td>Reference to the Work Force Investment Act (WIA) was updated to the Workforce Innovation and Opportunity Act (WIOA).</td>
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<tr>
<td>Section 1000.29, page 98</td>
<td>Virginia Public Records Act, the title of Code of Virginia § 42.1-76 et seq., that places authority with the Library of Virginia to issue regulations regarding the retention and destruction of records was added.</td>
</tr>
<tr>
<td>Chapter 1000, Appendix G, page 2</td>
<td>Reference to the ADAPT system were replaced with the ESP module in VaCMS.</td>
</tr>
<tr>
<td>Chapter 1000, Appendix H, pages 2-16</td>
<td>Appendix H, Coding of VIEW Components in ESPAS, was removed. The Appendix itself is in the process of being updated to describe VaCMS procedures and will be restored to guidance in a future transmittal.</td>
</tr>
<tr>
<td>Chapter 1000, Appendix J, pages 2 and 3</td>
<td>References to the ADAPT/ESPAS system and procedures for the Understanding Federal Participation – Examples were updated to VaCMS/ESP module.</td>
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Questions about this transmittal should be direct to regional program consultants or Mark Golden, TANF Program Manager, at (804) 726-7385, or mark.golden@dss.virginia.gov.
Duke Storen
Commissioner
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TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) GUIDANCE MANUAL

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100.1 LEGAL BASE - Virginia's Temporary Assistance for Needy Families (TANF) Program is based on Title IV-A of the Social Security Act as amended by the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996, the TANF State Plan, and on the Code of Virginia, Sections 63.2-600 through 63.2-618. PRWORA allows states to establish program requirements in any manner which will reasonably accomplish the purpose of TANF.* The purpose of TANF is to:**

- provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives;
- end the dependence of needy parents on government benefits by promoting job preparation, work, and marriage;
- prevent and reduce the incidence of out-of-wedlock pregnancies; and
- encourage the formation and maintenance of two-parent families.

State and federal law establishes the right of any individual:

- to apply for financial assistance;
- to have his eligibility for such assistance determined promptly and in conformity with law and established policy;
- if found eligible, to receive assistance promptly and in the amount determined according to established policy; and
- to appeal to the Commissioner of Social Services, if he is dissatisfied with the decision of the local department on his case.

100.2 ADMINISTRATION - Title 63.2 of the Code of Virginia mandates a local department of social services in every political subdivision of the State, or combination thereof, and specifies the duties and responsibilities of the local social services board and superintendent/director, as well as the methods of discharging these responsibilities.

The law also defines the general and specific duties and responsibilities of the State Department of Social Services in relation to supervision of the local social services programs.

Within the framework of the statutes and the regulations of the State Board of Social Services, local boards of social services carry responsibility for the administration of social services programs in their respective localities. The State Department of Social Services carries responsibility for supervision of local programs, consultative assistance to localities in the implementation of programs, and monitoring and evaluation to assure that the intent of the law and regulations is fulfilled on a statewide basis.

* Social Security Act, Sec. 404(a)(1)
** Social Security Act, Sec. 401(a)
In addition, the State Department of Social Services carries direct responsibility for locating and securing support from responsible persons for children receiving TANF and, on application, providing this same service to non-welfare clients.

100.3 FUNDING - The TANF Program is funded through a federal block grant and from State funds authorized by the General Assembly of Virginia.

100.4 RECORD RETENTION - The Virginia Public Records Act, §42.1-76, et seq. of the Code of Virginia places authority to issue regulations concerning retention and destruction of records with the Library of Virginia (LVA). The LVA General Schedule No. 15 governs records maintained by local social service agencies, including client case records. LVA General Schedule No. 02 governs locality fiscal records including purchase orders. While many records can be destroyed three years after case closure there are exceptions to that general rule. These exceptions include situations involving audits, investigations, court cases, and fraud or overpayments related to supportive services and emergency assistance among others.

Each local agency must designate a Records Officer who will be in charge of seeing that LVA regulations for record retention and destruction are followed. See http://lva.virginia.gov/agencies/records/retention.asp for information about establishing a Records Officer and for access to the specific schedules for record retention and disposition. The Library encourages agencies to contact the Records Analysis Services section at 804-692-3600 with questions about records management.
NONDISCRIMINATION - Federal law and the Virginia Human Rights Act, Virginia Code §2.2-3900 et seq., bar discrimination on the basis of age, race, sex, disability, religious creed, national origin, and political belief. The following civil rights laws apply in TANF:


Virginia has established procedures for ensuring fair and equitable treatment of applicants and recipients of public assistance. The local department of social services must assure that no person shall, on the grounds of age, race, color, sex, disability, religious creed, national origin, or political belief be subjected to discrimination.

A. **Key Principles** - Compliance with these laws assures that equal opportunity exists for persons with disabilities to benefit from all aspects of public assistance programs, including access to the proper support services to enable such individuals to work and to keep their families healthy, safe and intact. There are two key principles underlying the bar on discrimination against people with disabilities:

1. **Individualized treatment.** "Individualized treatment" requires that individuals with disabilities be treated on a case-by-case basis consistent with facts and objective evidence. Individuals with disabilities may not be treated on the basis of generalizations and stereotypes.

2. **Effective And Meaningful Opportunity.** "Effective and meaningful opportunity" means that individuals must be afforded meaningful access to the TANF program so that individuals with disabilities benefit from and have meaningful access to TANF to the same extent as individuals who do not have disabilities.

B. **Legal Requirements.** - In order to implement these two principles, the following legal requirements must be met:

- Ensure equal access through the provision of appropriate services to people with disabilities.
- Modify policies, practices and procedures to provide such equal access.
- Adopt non-discriminatory methods of administration in the program.

C. **Applicability To All Staff, Contractors, Vendors At The State And Local Levels.** - In compliance with the federal laws, Virginia does not discriminate against people with disabilities in its TANF program. This applies to all Department of Social Services staff at both the state and local levels. It also applies to those agencies and entities with which we contract for services. State and county agencies must ensure that contractors and vendors do not subject recipients to discrimination.
D. Definition Of A Person With A Disability - The Americans with Disabilities Act of 1990 as amended protects individuals with a “disability” and defines that term to mean a person who has a physical or mental impairment that substantially limits one or more of the major life activities of that individual, a person who has a record of such an impairment, or a person who is being regarded as having such an impairment. “Life activities” include, but are not limited to: the operation of a major bodily function, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. Chronic health problems such as asthma, diabetes, and hypertension may also be considered disabilities if these conditions limit the individual’s ability to function.

E. Complaint Procedures – Individuals who believe that they have been discriminated against on the basis of disability have the right to file a grievance under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act with the state TANF Manager. The grievance must be resolved promptly.

Individuals who believe they have been discriminated against on the basis of disability (including failure to provide reasonable accommodations), race, national origin (including the failure to provide access to services to people with limited English proficiency) can also file a complaint with the Office of Civil Rights at the U.S. Department of Health and Human Services. Complaints must be filed within 180 days of the date the alleged discrimination occurred. The complaint should include the information listed in Section 101.2.A. A written complaint may be filed by mail, fax or email to:

Office for Civil Rights
U.S. Department of Health & Human Services
150 S. Independence Mall West, Suite 372
Philadelphia, PA 19106-3499
Hotline: 1-800-368-1019
TDD: 215-861-4440
Fax: 215-861-4431
Email: OCRComplaint@hhs.gov

F. Responsibility To Share Information Between Staff And Contractors - If one section of DSS determines that a person has a disability, then the staff must share that information with the other staff, as appropriate.

The case record must include a copy of the form “Do You Have a Disability?” along with a description of any reasonable modifications that agency staff have determined are needed to address the person’s disability and services and supports the agency will provide to assist the individual and family.

G. Staff Authority To Make Reasonable Modifications - It is the responsibility of the worker to consider whether a person may have a disability, and how a person’s disability may affect the person’s ability to comply with rules, fill out forms, attend appointments, etc. If it is determined that a person has a disability that affects her ability to comply with program rules or procedures, the worker has the authority to make reasonable modifications to program rules, requirements and
102.1 INTENTIONAL PROGRAM VIOLATION (IPV) means any action by an individual for the purpose of: 1) establishing or maintaining the family's eligibility for Temporary Assistance for Needy Families (TANF)* (diversionary and ongoing assistance) or Virginia Initiative for Employment not Welfare (VIEW); or 2) increasing or preventing a reduction in the amount of the payment; or 3) establishing eligibility for VIEW supportive or transitional services.** For an IPV to exist, the action by the individual must be: 1) an intentionally false or misleading statement or misrepresentation; 2) a concealment or withholding of facts; or 3) an act intended to mislead, misrepresent, conceal or withhold facts or propound a falsity.*** Whoever obtains or attempts to obtain, or aids or abets any person in obtaining, by means of a willful statement or representation, or by impersonation, or other fraudulent device, assistance or benefits from TANF and other programs designated under rules and regulations of the State Board of Social Services is committing an IPV.

In determining whether an IPV exists, the worker must determine if the individual’s actions were the result of a disability such that the person did not have the intent to make a false or misleading statement or misrepresentation. In such cases, an IPV cannot be found. Instead, the local agency will work with the individual to ensure that a similar problem does not arise in the future. This may require that the agency put in place steps to assist the individual to provide the worker with the needed information on a timely basis.

102.2 RESPONSIBILITIES OF LOCAL DEPARTMENTS - The local agency has the following responsibilities in relation to IPV:

A. During the TANF application and VIEW assessment, the agency must ensure and document that a clear and full explanation is given to the applicant/recipient of the eligibility requirements for the type of assistance and services being requested or received; of his responsibility to give complete and accurate information related to his eligibility and to report promptly and fully any changes in his circumstances; and of the provisions of the law with respect to knowingly giving false information or deliberately withholding information which would affect his eligibility for assistance or the amount thereof. The worker must explain fully to the recipient what types of changes in his circumstances would have an effect on the payment and services provided. At TANF application, the agency must explain IPV to the applicant/recipient and explain the Notice of Intentional Program Violations and Penalties (Form 032-03-0646). A copy is to be given to the applicant/recipient and a copy is filed in the eligibility record. The assistance unit must report all required changes within 10 calendar days from the date the unit knows of the change but is reported timely if reported by the tenth of the following month.

B. The local agency must conduct an investigation of an allegation that an individual committed an intentional program violation, regardless of the TANF payment or VIEW Program status. A determination as to whether an IPV has occurred must be based on careful consideration of the

* 45 CFR 235.112
** 2002 Acts of Assembly, Item 362
*** Code of Virginia 63.2-522

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circumstances. A determination must be made that there has been a deliberate misrepresentation on the part of the applicant/recipient. Consideration should be given to: (1) whether the incorrect or unreported information was, in fact, known to the applicant/recipient and (2) whether the applicant/recipient understood the eligibility and reporting requirements.

C. The local agency is required to proceed against any individual alleged to have committed an intentional program violation by referring the matter to the appropriate authorities for criminal action in a federal or state court or through an administrative disqualification hearing (ADH).

An individual may be charged with an IPV even if the application was denied. An overpayment does not have to exist for there to be a determination of an IPV. Individuals may be charged with an IPV for VIEW even if supportive or transitional services have not yet been received. For a VIEW IPV the agency is not to terminate future supportive or transitional services if those services are needed to assist the client to maintain employment.

The local agency may refer a case for prosecution or initiate an ADH regardless of the current eligibility of the individual.

D. The local agency must coordinate its actions with any corresponding actions being taken against the individual under the Supplemental Nutrition and Assistance Program if the factual issues involved arise out of the same or related circumstances.

E. The forms listed below must be used in the IPV process. The forms and instructions for their use may be accessed from the Local Agency DSS Intranet site (www.localagency.dss.state.va.us/).

1. Notice of Intentional Program Violation (032-03-0721)
2. Waiver of Administrative Disqualification Hearing (032-03-0722)
3. Referral for Administrative Disqualification Hearing (032-03-0725)
4. Advance Notice of Administrative Disqualification Hearing (032-03-0724)
5. Administrative Disqualification Hearing Decision (032-03-0723)
6. Notice of Disqualification for Intentional Program Violation (032-03-0052)

F. Cases in which an IPV is alleged will be referred for prosecution in accordance with the agreement established between the local Commonwealth’s Attorney or other legal authority and the local agency. This agreement shall include information on how and under what circumstances cases will be accepted for possible prosecution. Additionally, it will contain any other criteria set by the prosecutor for accepting cases for prosecution, such as a minimum for the overpayment which resulted from the IPV. The local agency will refer for prosecution all individuals meeting the criteria established by the Agreement.
102.3 IPV DISQUALIFICATION PENALTIES - An individual found to have committed an IPV by a court of appropriate jurisdiction, or pursuant to an administrative disqualification hearing (ADH), or by waiving his right to an administrative disqualification hearing is subject to IPV penalty periods of six months for the first offense, twelve months for the second offense, or permanently for the third offense. Notice of the disqualification penalties for IPV is included in the Application for Benefits (032-03-0824) and the Notice of Intentional Program Violations and Penalties (032-03-0646).

If found to have committed an IPV pursuant to an ADH, and at some later point it is determined that the individual had a disability that interfered with his or her ability to file accurate and timely information, or with his or her capacity to have the intent to defraud or otherwise provide improper information to the state, or has limited English proficiency that impaired his or her ability to provide accurate and timely information, the worker must delete the IPV and prospectively reinstate benefits.

NOTE: The ADH process may not be used to disqualify an individual who committed a TANF IPV prior to December 1, 1992, or a VIEW IPV prior to April 1, 2003. However, IPV's committed prior to these dates can be referred for prosecution. If the individual is found guilty, no disqualification period can be imposed.
A. Only the individual found guilty of committing an IPV shall be disqualified. The local agency shall not take the individual’s needs into account when determining the assistance unit’s need and the amount of assistance. However, if the individual is a parent, any income of the disqualified parent must be considered available to the assistance unit. (See Section 305.4) NOTE: When an IPV occurs and the Waiver of Administration Disqualification Hearing (032-03-722) is signed while the application is pending, the disqualified individual’s needs are excluded when determining a diversionary assistance payment.

B. The period of disqualification must begin no later than the second month following the month of the court’s decision of guilt, the date the waiver notice is received by the local agency, or the date the Administrative Disqualification Hearings Decision Notice is issued by the hearing officer. If the individual is not eligible for TANF at the time the disqualification is to begin, the period must be postponed until the individual applies for and is determined eligible for benefits. The disqualification period must run uninterrupted until it expires. VTP months will not count as months of disqualification.

The disqualification penalty must be in addition to, and cannot be substituted for, any other sanctions or penalties which may be imposed by the TANF program or by the court for the same offense.

Any period for which a disqualification is imposed will remain in effect, without possibility of an administrative stay, unless and until the finding upon which the penalty was based is subsequently reversed by a court of appropriate jurisdiction. If the disqualification period was imposed by an ADH and it is determined that the individual had a disability that prevented the filing of accurate and timely information or affected his or her capacity to have the intent to defraud or otherwise provide improper information to the state, or has limited English proficiency that prevented providing accurate and timely information, then the local agency will delete the IPV and reinstate benefits prospectively. In no event shall the duration of the period for which such penalty is imposed be subject to review in a fair hearing.

C. An individual convicted in state or federal court of fraudulently misrepresenting his address to receive benefits in two or more states is ineligible to receive TANF for 10 years. Benefits refer to TANF, Medicaid, and the Supplemental Nutrition Assistance Program (SNAP). The 10 year period begins on the date the individual is convicted.*

102.4 ADMINISTRATIVE DISQUALIFICATION HEARINGS (ADH) - An administrative disqualification hearing is an impartial review by a hearing officer of an individual's actions involving an alleged IPV for the purpose of rendering a decision of guilty or not guilty of committing an IPV.**

In order to request an ADH, the local agency shall ensure that a pre-hearing investigation has occurred and that the evidence supports the charge of intentional program violation. There must be clear and convincing evidence which demonstrates the individual committed or intended to commit a TANF or VIEW IPV.

* Code of Virginia 63.2-522
** 45 CFR 235.113
Examples of evidence include but are not limited to:

A. Written verification of unreported income received by the individual; or

B. Verification that the individual understood the reporting responsibility by his signature on the application or renewal application; or

C. An application, renewal application or change form submitted during the period the IPV is alleged to have occurred which omits the information in question; or

D. Documented contacts with the individual during the period the IPV is alleged to have occurred in which the individual failed to report the information in question.

E. Verification that information on a voucher or check for gas or check to a vendor was altered. Example: changing money amounts, purpose, date or signature; or

F. Verification that the client received other services provided by the agency and sold them to another individual; or

G. Verification that items were obtained under false pretenses. Example: obtaining supportive services to purchase a vehicle in order to participate in VIEW and then giving the vehicle to another person.

If a case is referred for an ADH, it shall not be simultaneously referred for prosecution. Cases dismissed in court or individuals acquitted by the court cannot be referred for an ADH.

102.5 NOTIFICATION OF IPV - Prior to requesting an ADH by the State Hearing authority, the local agency shall provide the form, Notice of Intentional Program Violation, to the individual alleged to have committed the program violation advising the individual of the alleged IPV. In addition, the individual must be informed he can waive his right to an administrative disqualification hearing by signing the Waiver of Administrative Disqualification Hearing form and returning this form to the local agency within 10 days.

The notice must advise the person that reasonable accommodations are available in order to participate in the hearing. It must also inform the person that if the person has a disability or limited English proficiency that could have impaired the person’s ability to provide accurate and timely information, the person should provide this information to the eligibility worker and the hearing officer, as this information could have an impact on the decision about whether there is an IPV.

If there is an indication of a disability or that the person has limited English proficiency that prevented providing accurate and timely information or the capacity to have the intent to defraud or otherwise provide improper information, but the staff has determined to proceed with the IPV because there is compelling
evidence of intent to violate the requirements, then it will not be appropriate to accept a waiver of hearing from the individual and the request for a hearing must be forwarded to the State Hearing authority.

If a signed waiver is received, an ADH is not scheduled and the disqualification period is imposed in accordance with Section 102.3.

102.6 REFERRAL FOR AN ADH - If a signed waiver is not received within 10 days, the local agency shall request an ADH be scheduled by submitting the form, Referral for Administrative Disqualification Hearing, to the State Hearing Manager. The form must include the following information:

A. Identifying information
B. Summary of the allegation(s)
C. Summary of the evidence
D. Copies of documents supporting the allegation(s)

The referral is to be signed and dated by the supervisor or local agency director.

A fair hearing and an ADH may be combined into a single hearing if the factual issues arise out of the same or related circumstances provided that the individual receives prior notice of the consolidation.

If the ADH and fair hearing are combined, the agency must follow ADH time frames for conducting an ADH. If the hearings are combined for the purpose of settling the amount of the claim at the same time as determining whether or not the IPV has occurred, the household will lose its right to a subsequent fair hearing on the amount of the claim. However, the local agency must, at the household’s request, allow the household to waive the 30 day advance notice period for the scheduling of the ADH when the hearings are combined.

102.7 SCHEDULING THE ADH - Upon receipt of the request for an ADH, the State Hearing authority will forward the request to the appropriate Regional Hearing Officer.

102.8 ADVANCE NOTICE OF ADH - The hearing officer will schedule a date for the ADH and provide written notice to the individual suspected of committing an IPV at least 30 days in advance of the date the ADH has been scheduled. The form, Advance Notification of Administrative Disqualification Hearing, is used for this purpose.

The advance notice of ADH may be sent by first class mail, certified mail – return receipt requested, or by any other reliable method. If the notice is sent by first class mail and it is subsequently returned as undeliverable, the hearing may still be held.

Once the ADH has been scheduled, the ADH is to be conducted and a decision made within 90 days of the date the household is notified in writing that the ADH has been scheduled. A copy of the decision must be provided to the household and the local agency.
102.9 TIME AND PLACE OF THE ADH - The time and place of the ADH shall be arranged so that the hearing is accessible to the individual suspected of committing an IPV. The individual may request a postponement of the ADH if the request for postponement is made at least 10 days in advance of the date of the scheduled hearing. The ADH shall not be postponed for more than a total of 30 days and the State Hearing authority may limit the postponement to one.

102.10 FAILURE OF INDIVIDUAL TO APPEAR AT THE ADH - Unless the agency has received proof that the ADH advance notice has not been received, the requirement to notify the individual alleged to have committed the IPV has been met. The ADH may be held even if the member or representative subsequently cannot be located or fails to appear without good cause.

The individual has 10 days from the date of the scheduled ADH to present reasons other than nonreceipt of the notice to show good cause for failure to appear at the hearing. Good cause reasons based on nonreceipt of the notice must presented within 30 days of the scheduled hearing.

Even though the individual is not represented, the hearing officer must carefully consider the evidence and determine if an IPV was committed based on clear and convincing evidence. If the individual is found to have committed an IPV but a hearing officer later determines there was good cause for not appearing, the previous decision is no longer valid and a new ADH must be conducted. The hearing officer who conducted the original hearing may conduct the new hearing. The good cause decision must be entered into the hearing record by the hearing officer.

102.11 PARTICIPATION WHILE AWAITING A HEARING - A pending ADH shall not affect the individual's right to participate in the TANF/VIEW program. The local agency may not disqualify an individual until the hearing officer finds that the individual has committed an IPV. This does not preclude, however, the local agency from reducing, suspending or terminating assistance for other reasons.
102.12 CONDUCT OF THE ADH - The hearing officer presides and conducts the hearing informally. Technical rules of evidence are not required. The hearing may be conducted via a teleconference.

A. Attendance at the ADH

The ADH is attended by persons directly concerned with the issue. This normally means a representative of the local agency and the individual alleged to have committed the IPV. If space is limited, the hearing officer has the right to limit the number of persons in attendance.

B. Responsibilities and Duties of the Hearing Officer

The hearing officer shall:

1. Identify those present for the record.

2. Advise the individual that he may refuse to answer questions during the hearing and that anything said or signed by the individual concerning the charge(s) may be used against him in a court of law. If the person is not represented and has been determined to have a disability or limited English proficiency that could affect his or her ability to represent him or herself, then the hearing officer must direct the local agency to assist the person in identifying a representative.

3. Explain the purpose of the ADH, the procedure, how and by whom a decision will be reached and communicated, and the option of either the individual or the local agency to request review of the hearing officer’s decision by the Commissioner’s review panel.

4. Consider all relevant issues. Even if the household is not present, the hearing officer is to carefully consider the evidence and determine if an IPV was committed.

5. Request, receive and make part of the record all evidence determined necessary to render a decision.

6. Regulate the conduct and course of the hearing consistent with due process to insure an orderly hearing.

7. Advise the local agency to obtain medical assessment at local expense if the hearing officer considers it necessary.
102.13 NOTIFICATION OF ADH DECISION - The hearing officer is responsible for rendering a decision based on clear and convincing evidence. The decision shall be based on evidence and other material presented at the hearing. The hearing officer must substantiate his decision by identifying supporting evidence and applicable regulations.

Following the ADH, the hearing officer shall prepare a written report of the hearing which shall include findings, conclusions, decisions and appropriate recommendations. The decision shall specify the reasons for the decision, identify the supporting evidence, identify pertinent TANF regulations and respond to reasoned arguments made by the individual or representative.

The hearing officer must notify the individual of the decision within 90 days of the date of the Advance Notice of ADH. The Administrative Disqualification Hearing Decision Form shall accompany the findings. The individual shall be informed of his right to request the Commissioner's appeals review panel review of the decision within 10 days of the date of the notice. If the individual is found guilty of an IPV, the decision shall advise the individual that disqualification will occur.

If the individual did not appear at the hearing and the hearing officer determines that an IPV was committed, the hearing officer will delay notification of the decision until 10 days after the date of the hearing to allow the individual time to present good cause for failing to appear. No notice to the individual is required when failure to appear occurs.

The determination of an IPV by the hearing officer cannot be reversed by a subsequent fair hearing.

The individual is entitled to seek relief in a court of appropriate jurisdiction. The period of disqualification may be subject to stay by a court of appropriate jurisdiction or other injunctive remedy.

The amount of the overpayment subject to repayment may be appealed by a fair hearing, provided that the individual did not request a fair hearing for that reason which was consolidated with the ADH.
C. Client Access to Records

Clients, or their representatives, may read information about themselves contained in their own case records except for medical or mental health reports when the physician who wrote the report recommends against it. Other individuals who are or were part of the assistance unit can also read information about themselves contained in the TANF case record under the same terms and conditions. In the case of an individual who was on the TANF case as a dependent child, access to the record will be available only after the individual reaches age 18.

The agency shall not release the name or other identifying information about an individual who has made a complaint alleging child abuse/neglect, fraud, participation in illegal activities, or other questionable behaviors on the part of the client.

The local agency is advised to seek guidance from the agency’s legal counsel if there are questions about the propriety of releasing specific information, or if the agency has reason to be concerned that the safety of a client or former client might be threatened by the release of such information.

D. Penalty for the Unauthorized Release of Confidential Information

The disclosure, directly or indirectly, of confidential information contained in a case record by any officer, agency or employee of the local department shall be considered a Class 1 misdemeanor.

E. Ownership of Records

All client information contained in the local department’s records is the property of the local department. Employees of the local department shall protect and preserve such information from dissemination except as necessary for the administration of the case.

Original client records may be removed from the premises only by auditors, individuals monitoring case records, other authorized staff of the state or the local department, or by court order.

The local department may destroy records pursuant to record retention schedules referenced at 100.4.

F. Correcting Inaccurate information

Local departments must provide means for inaccurate information to be corrected.

103.3 DISCLOSURE OF INFORMATION FROM THE INCOME ELIGIBILITY VERIFICATION SYSTEM (IEVS)

Retention requirements and requirements regarding disclosure of information regarding all match reports received through the Income Eligibility Verification System (IEVS), including Internal Revenue Service (IRS) data, can be found in the IEVS User Guide.
103.4 EXCHANGE OF INFORMATION WITH LAW ENFORCEMENT AGENCIES

A. The agency must provide the address of a current or former recipient when requested to do so by a Federal, State, or local law enforcement officer who furnishes the name of the recipient: *

1. who is fleeing to avoid prosecution, or custody, or confinement for a felony, or who is in violation of a condition of Federal, State or local probation or parole; or

2. who has information that is necessary for the officer in the conduct of official duties; and

3. when locating or apprehending the recipient is within the officer's official duties.

B. The record must be documented carefully regarding the release of the address. Documentation must include:

1. the name, badge number and law enforcement affiliation of the officer; and

2. a written request for the address. The form "Request for the Address of a TANF Recipient" (032-03-0560) located in the forms drawer may be used for this purpose.

103.5 RELEASE OF INFORMATION REGARDING PAST RECEIPT OF BENEFITS BY ALIENS* Section 212(a)(4) of the Immigration and Nationality Act allows the denial of entry into the U.S. of any alien determined likely to become a public charge. If the U.S. Citizenship and Immigration Services (USCIS), the Department of State, or an immigration judge requests information regarding past receipt of AFDC or TANF benefits for the purpose of evaluating public charge risk, the local agency must deny the request unless the agency has the written consent of the alien.

103.6 RELEASE OF INFORMATION TO THE U.S.CITIZENSHIP AND IMMIGRATION SERVICES (USCIS) REGARDING ILLEGAL ALIENS** - If a representative of the USCIS requests information regarding an individual who the local agency knows is unlawfully in the U.S., the local agency must furnish the USCIS with identifying information. This information is limited to the name, address, and Social Security Number of the individual. This information will be reported to USCIS by a local department of social services only upon request by a USCIS representative.

For the local agency to know an individual is unlawfully in the U.S., the individual must have presented as part of the application or renewal process a Final Order of Deportation issued by USCIS or the Executive Office of Immigration Review. For purposes of informing USCIS of an illegal alien, only a Final Order of Deportation is sufficient proof of illegal status.

* 45 CFR 205.50(a)(1)(v)
** Public Law 104-193, Section 404
C. **State Hearing Authority** - A comprehensive term used to designate the State Agency decision-maker in appeal cases; as such, it includes the Commissioner and duly qualified hearing officers of the State Department of Social Services, in whom the Commissioner has reposed full authority to make binding decisions in appeal cases in the name of the State Hearing Authority.

D. **Hearing Officer** - An impartial representative of the State Agency to whom appeals are duly assigned and by whom they are heard. He must not have been involved in any way with the agency action on appeal. The hearing officer is empowered with the authority specified herein to conduct and control hearings and to decide appeal cases.

E. **Hearings Manager** - An individual who determines, promulgates and assures compliance with internal procedures, including processes for maintaining the Commissioner’s review of fair hearings, necessary for an effective State fair hearing system. This individual also provides supervision and training to hearing officers and can hold hearings and render decisions for the Commissioner of Social Services.

F. **State Agency** - This term, for purposes of this Chapter, refers to the Home Office and to the **Regional** Offices of the Virginia Department of Social Services. It is the responsibility of the State Agency to assure that appeal provisions are correctly administered, that decisions in appeal cases are consistent with established public assistance policies, and that such decisions are given prompt effect.

G. **Date of Hearing Decision** - The date of the letter conveying the hearing officer's decision. This date should be the same as the postmark. If it is not and the recipients of the letter can verify that it is different, applicable time frames will be extended.
201.8 SOCIAL SECURITY ACCOUNT NUMBER (SSN) - As a condition of eligibility, each applicant is required to provide an SSN or show proof of application for a Social Security number for each person for whom assistance is requested. An applicant must meet this condition prior to approval of the case. Only those members of the assistance unit who have met this condition are to be approved for TANF. The agency must refer each applicant/recipient who does not have an SSN or cannot provide proof of application for an SSN to the Social Security Administration (SSA) District Office. The agency must also discuss with the applicant the types of evidence of age, identity, and U.S. citizenship or alien status documents which the SSA will require prior to issuing an SSN.

A. Obtaining a Social Security Number - For those individuals who provide SSNs prior to approval or at any other time the agency shall record the SSN in VaCMS and attempt to verify the SSN according to 201.8 E. As soon as all other steps necessary to approve an application are completed except for verification of the social security number the agency shall approve the application.

For those individuals who do not have an SSN, who do not know if they have a number, are unable to find a number and therefore cannot provide a number, or whose number appears to be questionable, the agency will direct the assistance unit to submit form SS-5, Application for Social Security Number to the Social Security Administration (SSA). The agency must advise the assistance unit where to file the application for an SSN and discuss what evidence the assistance unit will need to obtain a SSN.

Evidence needed to secure a Social Security number includes a U.S. public record of birth established before age five or other verification of birth, such as religious records whose validity is not questionable, or hospital records, if they can be verified by the SSA. While religious and hospital records will entitle the individual to an SSN, further proof of birth is required by the SSA to establish eligibility for Social Security benefits.

The agency shall advise the assistance unit that proof of the application for an SSN from SSA will be required prior to approval and suggest that the assistance unit member asks the SSA for proof of the application for an SSN. SSA has a form SSA-5028, Receipt for Application for a Social Security Number for this purpose. Local agencies may also devise their own form for this purpose; however, these must receive the approval of the Regional TANF Specialist.

B. Assistance to Newborns - An electronic application for a social security number for the newborn will be made by the hospital before the mother is discharged. The parent should be able to provide the agency with verification that the social security number was applied for when requesting that the child be added to the payment. If for some reason the parent cannot provide this information, the child can be added to the assistance unit, but the parent must provide the child’s social security number or proof of application for the number, at the next case renewal, or within six months, whichever is later.
E.  SSN Verification and Documentation

The local agency shall verify the SSNs reported by the assistance unit by submitting them to the Social Security Administration (SSA) through the State Verification and Exchange System (SVES) or the State Online Query- Inqury System (SOLQ-I) via SPIDER. The print out from SVES or SOLQ-I must also be filed in the case record. When proof of an application for a social security number has been obtained, the worker will enter the SSN application date and select the SSN application verification source on the Client - SSN Application screen in VaCMS.

When the inquiry indicates that SSA is unable to verify the SSN provided by the client, the EW must re-contact the assistance unit to determine if the information the assistance unit provided is correct and obtain the correct information as appropriate. Entering the corrected data into SVES or SOLQ-I will result in another match being initiated with SSA to verify the SSN.

If the information the agency has is correct, but the information SSA has is incorrect, the assistance unit must be notified that it must appear at the SSA office to provide them with the necessary information such as a change of name due to marriage.

If the assistance unit refuses to provide the necessary information that would allow the verification of a SSN, the individual shall be determined ineligible. For a determination of refusal to be made, the assistance unit must be able to cooperate, but clearly demonstrate that it will not take actions that it can take.

Once the worker determines that the assistance unit must provide information or documentation to either the agency or the SSA, the assistance unit must complete such action prior to the next renewal or show good cause why it was unable to do so.

If an assistance unit claims it cannot cooperate for reasons beyond its control, the worker must substantiate the assistance unit's inability to cooperate. For example, an assistance unit may claim it cannot verify a name change because official records were destroyed in a fire. The worker must verify this to the point that he/she is satisfied the claim is accurate, i.e., documentation of the name change no longer exists. In these cases, a SSN match cannot be accomplished since SSA records cannot be corrected without the missing documentation. If the worker verifies that the assistance unit is unable to cooperate in the verification of the SSN, the individual shall not be terminated. The case file must adequately document the assistance unit's inability to cooperate.

If the worker is unable to substantiate the assistance unit's claim that it cannot cooperate, the individual shall be found to have refused to cooperate and shall be terminated.

F.  Ending Ineligibility

Once a person has been removed from the assistance unit for refusal or failure to provide a SSN, the ineligible member must provide a SSN before eligibility can be established.
information required in 201.10 A.1.a. and/or b. is not provided and no penalty is to be imposed. If the applicant/recipient cannot provide the name of the noncustodial parent and at least three pieces of identifying information, she must sign an Attesting to The Lack of Information (ATL) form (032-03-0423). The client will be considered to be not cooperating if she states that she is unable to provide the name and other identifying information for a noncustodial parent but also refuses or fails to sign the ATL. (Note: A separate ATL form must be completed for each noncustodial parent.) When an ATL form is completed, “yes” must be selected from the “Agree to Cooperate” drop-down and “ATL” must be selected from the “Good Cause” drop-down on the Absent Parent Information Details screen in VaCMS. This coding will ensure that a referral will not be sent to DCSE.

At the time of each renewal, the eligibility worker is to ask the client to provide information on each noncustodial parent. If the client continues to be unable to provide the name and at least three pieces of identifying information on a noncustodial parent, the eligibility worker will have the client complete a new ATL form for that noncustodial parent.

Note: An applicant/recipient who is the grandparent of the child for whom assistance is requested, is expected to be able to provide the first and last name and at least three additional pieces of identifying information for the noncustodial parent who is her own child. If she fails to do so, she will be subject to noncooperation penalties outlined in guidance at 201.10 B and C.

2. Appearing at an office of the local department of social services or the Division of Child Support Enforcement, as requested, to provide:
   a. verbal or written information, or
   b. documentary evidence known to, possessed by, or reasonably obtainable by the applicant/recipient about the noncustodial parent.

3. Appearing as a witness at judicial or administrative hearings or proceedings.

4. Appearing for a scheduled appointment to have testing completed to establish paternity.

5. Paying to DCSE any money directly received from the noncustodial parent after approval of the TANF case.

6. Paying for all additional genetic testing after the first five potential fathers have been tested and excluded as the father of the child.

Note: If a problem is identified that interferes with the recipient’s ability to cooperate, such as, lack of transportation, hospitalization, etc., the local agency must assist the applicant/recipient, if requested.
B. **ACTION TO BE TAKEN UPON DETERMINATION OF NONCOOPERATION**

Noncooperation may occur with respect to an individual's failure to cooperate with either the local department of social services or DCSE.

1. Noncooperation exists in the following circumstances. The applicant/recipient:

   a. failed to provide identifying information, including the first and last name of the father or of all individuals who may be the father of the child(ren), and at a minimum three additional informational items to identify the parent, and the exception in Section 201.10 A.1.c is not applicable, or the exception in Section 201.10A.1.c is applicable but the client fails or refuses to sign the ATL; or

   b. failed to respond to two consecutive requests to provide information; or

   c. missed two consecutive scheduled appointments (other than genetic testing and court appearance) and did not contact the worker to reschedule them; or

   d. failed to appear in court for a scheduled paternity, establishment of support, or enforcement hearing and did not contact DCSE to reschedule (one occurrence); or

   e. missed a scheduled appointment for genetic testing and did not contact DCSE to reschedule (one occurrence); or

   f. does not name another individual who may be the father after the only man named as the putative father is excluded; or

   g. the putative fathers listed on the "List of Putative Fathers" form are excluded from paternity as a result of genetic testing; or

   h. fails or refuses to pay for further genetic testing after DCSE has paid for the first five potential fathers to be tested; or

   i. otherwise fails to comply with the requirements in Section 201.10 A.

2. The finding of noncooperation, including noncooperation for failure/refusal to sign the ATL after attesting to a lack of information, must be documented on the Case Narrative - Details screen in VaCMS.

   a. Noncooperation must be due to one of the reasons listed in 1.a. - i. above.

   b. If noncooperation was determined by DCSE, the VaCMS will be notified via the APECS interface. On the Absent Parent Information Details screen, the "Agree to Cooperate" drop-down will be updated to "No", and a task and reminder will be sent to the worker to inform him of the noncooperation status.
- VaCMS will automatically take action to close or reduce the TANF benefits, as appropriate, and send a 10-day Advance Notice of Proposed Action. A copy will be retained in the Forms History.

- VaCMS will automatically close the case if paternity has not been established for the child for whom the caretaker has failed to cooperate and the child has received TANF for at least six months.

If paternity has been established or, if the child has not been on TANF for at least six months, VaCMS will reduce the payment by the appropriate amount as determined by guidance at 201.10C. The reduction will be effective the following month or as soon as administratively possible based on Advance Notice requirements.

The EW must manually update the task and reminder when the action to reduce or terminate benefits has been completed. It is the responsibility of the worker to ensure that VaCMS takes the appropriate actions in accordance with this section.

Detailed information is maintained in the DCSE case record to substantiate the noncooperation and must be made available, upon request, if the penalty resulting from the noncooperation finding is appealed. If the action is appealed, the EW must contact the DCSE worker to inform him that an appeal has been filed and to request the supporting documentation required to be included in the appeal summary. The DCSE worker will attend the hearing or participate in the telephonic hearing to testify as to the applicant/recipient's failure to cooperate.

3. The local agency must ensure the appropriate penalty for noncooperation is imposed the following month or as soon as administratively possible in accordance with Section 201.10.C., as follows:

Check the Forms History to ensure an advanced notice has been sent advising the recipient of the penalty.

a. DCSE will be notified of the penalty through the VaCMS system interface when the action to reduce or close the benefits in VaCMS has been certified and authorized.
b. If the penalty is due to failure to redirect support, the agency must also explain that the support, minus the $100 disregard, will count as income to the assistance unit.

C. **PENALTIES FOR NONCOOPERATION** - Failure to cooperate, absent good cause or an exception to identification requirements, will result in the following action:

1. **Noncooperation During the First Six Months of Receipt of Assistance** - When the applicant/recipient or a minor parent fails to cooperate during the first six months of receipt of assistance, the individual will be ineligible for assistance. The individual will remain ineligible and any penalty reduction must continue until he has cooperated or the information not previously provided has been obtained from another source, or all children for whom the individual did not cooperate have left the home. The worker must ensure VaCMS performs the following actions:

a. Exclude the caretaker's needs from the payment, reducing the payment by the amount of the caretaker's needs or by 25 percent, whichever is greater, effective the month following noncompliance, if administratively possible. 

   Note: If the individual not cooperating is a minor parent who is a member of an assistance unit that includes her sibling(s), the agency must notify the applicant/recipient that the penalty may be avoided by withdrawing the request for assistance for the minor parent’s child.

   Procedures for calculating the amount of the reduction are as follows:

   1) If the caretaker's needs are currently included in the payment, the caretaker must be removed. If the resulting payment reduction is less than 25 percent of the amount of assistance that would otherwise be provided to the family, the payment reduction must be increased to 25 percent. In addition to removing the caretaker, document the case record as to the basis for imposing the additional penalty amount.

   2) The payment must be reduced by 25 percent if the caretaker’s needs are not currently included on the payment because

   a. the caretaker is categorically ineligible (e.g., receives SSI, is an ineligible alien, etc.);

   b. the caretaker has failed or refused to cooperate in meeting a requirement of eligibility; or

   c. the caretaker is a non-parent caretaker: not on the payment (a payee).

See Appendix X to Chapter 201 for penalty calculation examples.
b. Recalculate the penalty reduction to ensure that the penalty reduces the payment by the greater of the amount of the caretaker's needs or 25 percent whenever:

1. there is a change in the assistance unit size or the payment amount.
2. the caretaker subsequently complies with the eligibility requirement that had caused his needs to be removed.

c. Lift the penalty reduction if all children for whom the client did not cooperate have left the client's home. Reimpose the penalty if the children subsequently return to the home.

d. Add the recipient to the payment by the month following the month in which he cooperates with DCSE or the information not previously provided is obtained from another source. Note: If the caretaker complies with the support enforcement requirement but continues to be ineligible due to noncompliance with another requirement, the penalty reduction (amount in excess of the caretaker's needs) must be removed but the caretaker's needs must continue to be excluded.

e. If, in the sixth month TANF is received, the recipient is still not cooperating, the local agency must complete a special review to determine if the case continues to be eligible in accordance with C.2 below.

2. Noncooperation After the Sixth Month of Receipt of Assistance - When noncooperation continues after the sixth month of receipt of assistance, the local agency must conduct a special review of the case. The purpose of the special review is to verify, through contact with DCSE, whether the recipient has begun to cooperate in establishing paternity or in fulfilling other child support requirements as outlined at 201.10A.

a. If the recipient has not begun to cooperate, but paternity has been established, the recipient will continue to be ineligible for assistance and the penalty imposed will continue until the individual cooperates or all children for whom the individual did not cooperate have left the home.

b. If the recipient has not begun to cooperate and paternity has not been established, the local agency must close the entire TANF case as soon as administratively possible and document the case record accordingly. The case is ineligible effective the following month and must remain closed until cooperation has been achieved, the information not previously provided is received from another source*, or all children for whom the individual did not cooperate have left the home. If the determination of noncooperation is based on the exclusion of the individual(s) named as the father based on genetic testing, the recipient cannot be considered to be cooperating until paternity has been established for the child or the recipient signs the Attesting to the Lack of Information (ATL) form.

* Code of Virginia, Section 53.2-602
3. Counting the Six Months of Receipt of Assistance - In counting the six months of receipt of assistance, count the month of entitlement as the first month of assistance when noncooperation began prior to case approval. If noncooperation occurred after approval, the six months are still counted from the date of entitlement.

Exception: For a child added to the payment subsequent to case approval, the six-month period begins with the first month of receipt of assistance for the child.

Example 1: At the time of application Ms. Rageolla refuses to name the father of her child. The agency determines that Ms. Rageolla is not cooperating in identifying the father of one of her children, and that good cause does not exist. Her case is approved in March, with her needs removed. The date of entitlement is March 20. The case is reviewed in August, the sixth month of receipt of assistance, to determine whether the case must be closed in accordance with C.2 above.

Example 2: Ms. Zorda cooperates at application (April) in identifying the putative father of her child. Her case is approved effective May 1. In the second month assistance is received (June), she is notified that she must come to the DCSE office for genetic testing. Ms. Zorda fails to keep the appointment, and DCSE notifies the eligibility worker that Ms. Zorda is not cooperating. Good cause for not cooperating does not exist and her needs are removed from the payment. In October, Ms. Zorda has received six months of assistance, and the agency must determine whether the case must be closed in accordance with C.2 above.

Example 3: If Ms. Zorda's refusal to cooperate had occurred more than six months after entitlement, i.e., entitlement is in January and refusal to cooperate occurs in November, the sixth month of receipt of assistance would have been June and the agency would immediately evaluate continuing eligibility of the case in accordance with C.2 above.

Example 4: Ms. Bonnewit has been receiving TANF for several years. A child (not subject to the family cap), who had been residing elsewhere, comes to live with his mother, Ms. Bonnewit. His paternity has not been established. In determining the child's eligibility, Ms. Bonnewit refuses to name the father. At the same time the child is added to the payment, the mother's needs are removed. In this situation, the six-month period begins with the first month of receipt of assistance for the child, which is January 1. On April 15, Ms. Bonnewit requested that her case be closed. The case closes April 30. Ms. Bonnewit later reapplys and is determined eligible for TANF in June. Her six month period resumes in June. June will be her fifth month for the non-cooperation penalty.
H. Advising the Client of the Good Cause Determination - The agency must advise each applicant/recipient who claims good cause for not cooperating of the final determination using the Notice of Action form. If the agency determines that good cause does not exist, it must refer the case to the Division of Child Support Enforcement. The agency must inform the applicant/recipient that cooperation will be required and provide a clear explanation of what is expected under the cooperation provision. The agency must allow him the opportunity to withdraw the application or request termination. Should the Division of Child Support Enforcement notify the local agency of evidence of failure to cooperate, the local agency must ensure that action is taken upon such information in accordance with Section 201.10 B and C.

I. Time Frame for Determining Good Cause - The agency must make the final determination that good cause for refusing to cooperate does or does not exist with the same degree of promptness as any other determination or redetermination of eligibility. However, the agency must not delay, deny, or discontinue assistance for the caretaker and children pending a determination of good cause if the applicant/recipient furnishes the required documented evidence or information necessary for the agency to obtain such. EXCEPTION: If the applicant/recipient reapplies following denial or closure due to noncooperation in establishing paternity, the agency cannot approve the application unless good cause has been verified, the applicant has cooperated, or the information not previously provided has been received from another source.

J. Referral to Support Enforcement When the Client Has Claimed Good Cause - When the recipient has claimed good cause for not cooperating, the local agency will make the final decision regarding good cause. The worker will document the record explaining the approval or denial of the good cause claim.

If the agency has determined that the client has good cause, the following information must be entered on the Absent Parent Information Details screens in VaCMS: name, sex, race, the appropriate good cause reason, the good cause determination date and the verification used to determine good cause. Additionally, the fields regarding the AP’s receipt of benefits, and probation/parole must be completed. The worker can transmit through the remaining information to access the Absent Parent - Child Link screen where the child must be linked to each parent for which good cause has been claimed. As long as a good cause reason is selected from the Good Cause drop-down, a DCSE case will not be opened.

On a newly approved case in which the applicant has claimed good cause and the recipient has previously received public assistance or DCSE services, the worker must complete the "Good Cause Communication Form" and send it to the appropriate DCSE district office. If the information is questionable as to whether the client has previously received public assistance or DCSE services, the form must be completed and sent to the DCSE district office.

K. Fair Hearings Related to Good Cause Claims - The appeal procedures are equally applicable in this section and, upon notice of the decision, the Division of Child Support Enforcement will have the opportunity to participate in any hearings that result from an appeal of any action required by this section.
L. Periodic Review of Good Cause Claims - The agency must review evidence used in making the determination of good cause at least as frequently as each redetermination. This review is to determine whether good cause for not cooperating continues to exist. If good cause no longer exists, the eligibility worker must notify the client of this determination using the Notice of Action. The eligibility worker must allow the applicant/recipient the opportunity to request termination of assistance, advise him of the cooperation requirement, and enter the new information on the Absent Parent Information Details screens in VaCMS.
201.12 FAMILY CAP PROVISION* - An additional child born during the period when a family is eligible for TANF is not eligible to have his needs included in the payment. The family cap provision applies to a child born while the family is eligible for TANF whether the parent’s needs are included in the payment or not. Once a child has been capped, he continues to be capped during any subsequent period of eligibility subject to the provisions below.

For applications on or after July 1, 1995, the family cap provision applies to a child born after the ten full months following the month in which the initial TANF payment was issued for the case. For new applications, the issuance of the initial payment is the date the payment shows on the Issuance Summary/Search screen under the “Issuance Date” field. For reapplications, the EW will need to determine if there has been a break in the receipt of TANF assistance. A new ten-month period will begin at reapplication when there has been at least a one month break in assistance prior to the date the client reapplyes for TANF. If the household has continuously received TANF benefits prior to reapplication, the previous ten-month period will resume. The ten-month period is a fixed period of ten calendar months and is not affected by suspensions. Months in which the household receives a VIEW Transitional Payment (VTP) will not count toward the ten-month period.

Example 1: Ms. Brown’s application was approved August 3, 2017, and the issuance date of the initial payment was August 5, 2017. The first month of the 10 month grace period is September. The tenth month is June. Therefore, the effective date of the family cap provision for Ms. Brown is July 1, 2018. The family cap applies to an additional child born to her on July 1, 2018 or later while she is eligible for TANF.

If Ms. Brown’s application had not been approved until August 30th and the issuance date of the first payment was September 1st, the 10-month period would have begun in October and ended in July, with the family cap applicable to a child born on or after August 1.

Example 2: Continuing with the previous example, Ms. Brown closes her case effective March 31st. Ms. Brown reapplyes and is approved for TANF on April 10th. As she has received a TANF payment each month since the original case approval the previous August, the original ten-month period will resume. Her tenth month will still be June. Additionally, if Ms. Brown’s application was not approved until May, the original ten-month period would resume because Ms. Brown applied in the month (April) immediately following the month of the case closure (March).

Example 3: Ms. Solos has been a recipient of TANF for the past three years. She has two children, one of whom is capped. In March 2017 her case was closed. She reapplyes in July 2017 and reports that she is pregnant. Ms. Solos’ case is approved for herself and the older child. Her younger child continues to be ineligible due to his capped status. Two months later, she gives birth to her third child. This child is not capped, since the child was born during the 10-month period following issuance of her initial payment.

* Code of Virginia, Section 63.2-604

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Example 4: Continuing the previous example, Ms. Solos closes her case effective March 31st, 2018. Ms. Solos reapsplies for TANF on May 5th, 2018. She is approved for TANF on May 10th. As she did not reapply for (or receive) TANF assistance in April, she will receive a new ten-month period. The first month of the ten-month grace period will be June. The tenth month is March. The family cap will apply to an additional child born to Ms. Solos on April 1, 2019 or later while she is eligible for TANF.

A. CHILD SUPPORT FOR THE CHILD SUBJECT TO THE FAMILY CAP PROVISION - DCSE shall send the total value of child support collected for the child subject to the family cap provision to the child's single custodial parent. This child support shall be disregarded as income and resources for the purpose of TANF eligibility and payment determination.

Any information entered on the Absence Information Details screens in VaCMS as part of the application process for the cap child WILL NOT be transmitted to DCSE. The applicant must complete an application for services at the local DCSE office if the applicant wishes to receive child support for a capped child.

NOTE: Anyone who is not the natural or adoptive parent of a "capped" child is not eligible to receive the total value of child support collected for the child.

B. MINOR MOTHERS - If a minor is an eligible child on a payment, the provision does not apply to the first child of the minor, but does apply to additional children born to the minor within the specified time frames.

C. ADOPTIVE PARENTS - The family cap guidance applies to adoptive parents in the same manner that it applies to biological parents except the date of entry of the interlocutory order is the date used instead of the child's birth date.
D. INCOME OF THE "CAPPED" CHILD - The income of the child is deemed unavailable to the assistance unit.

E. CHILDREN WHO MOVE INTO THE HOME OF THE PARENT RECEIVING TANF - A child who was not subject to the family cap provision is subsequently not subject to the provision when he moves into the parent's home.

F. OTHER CARETAKER/RELATIVES - The family cap provision does not apply to foster parents or caretakers/relatives who are not the biological or adoptive parents of the child. A child who was subject to the family cap in the home of a parent and subsequently moves into the home of a relative may be eligible for TANF, if otherwise eligible. Exception: A child who is subject to the family cap provision and whose parent is in a period of ineligibility due to the time limit for receipt of TANF is not eligible to receive assistance with another caretaker/relative until the parent's period of ineligibility expires. (See 901.11.)

G. DURATION OF THE FAMILY CAP - The provision applies to a "capped" child when he lives with or returns to the home of a parent after living for a period of time in another living arrangement.

H. CLIENT NOTICE OF FAMILY CAP PROVISION - Applicants for TANF shall receive an explanation of the family cap provision at the time of the interview. When the application is approved, the Client Notice of Action must inform the mother of the effective date of the specified periods described above.

In addition, applicants and recipients must sign and date the Notice of Personal Responsibility form. The form states that the local department has explained and that the individual understands the terms of the family cap provision. The form must be retained in the permanent document section of the TANF case record.

I. CHILD CONCEIVED AS A RESULT OF VERIFIED RAPE OR INCEST - A child conceived as a result of verified rape or incest is not subject to the family cap provision. Birth certificates and medical or law enforcement records are required to verify rape or incest.

J. CHILD CAPPED IN ANOTHER STATE - A family cap imposed under another state's TANF program does not affect the child's eligibility under Virginia's TANF program.
CITIZENSHIP AND IDENTITY

- Official written statement or record from the hospital at which the individual was born, or from the attending physician showing U.S. place of birth.

- Written affidavit attesting to citizenship or naturalization. (Note: A written affidavit is only acceptable if no other proof of citizenship can be provided. The affidavit must be signed by at least two individuals, at least one of whom is not related to the applicant, who have personal knowledge supporting the claim of citizenship. The individuals signing the affidavit must both have proof of identity and their own citizenship. The applicant must provide a separate affidavit explaining why evidence of citizenship does not exist or cannot be obtained).

Client statement cannot be used to establish citizenship.

Note: Medicaid enrollees who do not provide proof of citizenship at application but whose citizenship is subsequently verified by the Federal HUB will automatically be coded “yes” under the “Verified by the Federal HUB” field on the Client Demographics screen in VaCMS. The Federal HUB is not an acceptable verification source for the TANF Program and cannot be used to verify citizenship. In the case of an individual who has not provided the required documentation of citizenship by the 90th day after application, and for whom citizenship remains unverified on the Client Demographics screen, the EW must take action to remove the individual’s needs from the payment.

If citizenship has been verified for Medicaid and the client is coded “yes” under the “Verified by the Federal HUB” field, the EW will change the Citizen Verification source for TANF on the Client Demographics screen to an acceptable verification source if provided, or an unacceptable verification source if not provided to produce a Verification Checklist and document that the Federal HUB verification used for Medicaid is not acceptable for TANF. (See 201.7D)

C. DOCUMENTATION OF IDENTITY FOR U.S. CITIZENS (ADDITIONAL DOCUMENTATION MUST BE PROVIDED TO ESTABLISH CITIZENSHIP. SEE ACCEPTABLE DOCUMENTATION FOR CITIZENSHIP ONLY IN B. ABOVE. SEPARATE DOCUMENTATION OF IDENTITY DOES NOT HAVE TO BE PROVIDED IF CITIZENSHIP WAS VERIFIED BY U.S. PASSPORT, CERTIFICATE OF NATURALIZATION, OR CERTIFICATE OF CITIZENSHIP SINCE THESE SERVE TO VERIFY IDENTITY AS WELL AS CITIZENSHIP).

- A state photo driver’s license
- A state issued photo ID card
- A school issued photo ID card
- U.S. Military ID card (active, reserve, retired)
- U.S. Military draft record
- U.S. Military dependent ID card
- U.S. Coast Guard Merchant mariner Card

Note: For a minor caretaker who is under 16 and is not receiving TANF as an eligible child in the home of his/her parent, the following can be used:
  - Doctor, clinic, or hospital record
  - School record
  - Child care record

Client statement cannot be used to establish identity.
How To Continue Assistance Beyond the TANF 60-Month-Clock In VaCMS

A TANF case may receive beyond 60 months of TANF if the client makes a request and verifies a mental or physical disability. The case may also receive more than 60 months of TANF if the client is providing care on a substantially continuous basis for a relative living in the home that is physically or mentally incapacitated. If it is a two-parent household, both adults must be disabled or one adult caring for a disabled family member who is living in the household. The following instructions enable the assistance unit to continue to receive assistance beyond 60 months and the TANF 60-month clock continue to increment when the case is on-going, on a new application, or being rescinded, because the client is disabled or the client is providing care on a substantially continuous basis for a relative in the home that is disabled. Code VaCMS following the instructions below:

When the client has a disability, follow the steps 1-7 below.

1. From Data Collection, select Individual Information, then Questions.
2. From the Disability field, select “yes” from the drop-down and select the next button.
3. On the Disability - Details screen, enter the disability information for the individual and select the save and continue button.
4. Run eligibility for the case.
5. If all eligibility criteria are met, the Eligibility Result will display approved on the Eligibility Summary screen.
6. Certify and authorize the results.
7. The TANF 60-month clock will automatically continue to increment without requiring further action by the worker.

When the client is providing care for a disabled family member, follow steps 1-7 below.

1. From Data Collection, select Individual Information, then Client Demographics.
2. On the Client Demographics screen, select “yes” from the “Is the individual taking care of the disabled individual in the household?” drop-down.
3. Run eligibility for the case.
4. If all eligibility criteria are met, the Eligibility Result will display approved on the Eligibility Summary screen.
5. Certify and authorize the results.
6. The TANF 60-month clock will automatically continue to increment without requiring further action by the worker.
7. Set a task and reminder to re-evaluate the need for a caretaker to act as a caregiver. (See 201.1H)
Rescinding a closure after 60 months are already on the clock, because the client is physically or mentally incapacitated or a relative in the home is incapacitated for whom the caretaker is providing care on a substantially continuous basis. For this process, 60 months have to already be on the clock and the TANF case closed.

1. From Data Collection, select Case Action, then reinstate from the "What Action Do You Want to Perform?" drop-down and select next.
2. On the Initiate Reinstate screen, select a reinstate reason from the "Reinstate Reason" drop-down and select next.
3. From Individual Information, select Questions.
4. From the Disability field, select "yes" from the drop-down and select the next button.
5. On the Disability - Details screen, enter the disability information for the individual and select the save and continue button or;
6. On the Client Demographics screen, select "yes" from the "Is the individual taking care of the disabled individual in the household?" drop-down.
7. Run eligibility for the case.
8. If all eligibility criteria are met, the Eligibility Result will display approved on the Eligibility Summary screen.
9. Certify and authorize the results.
10. The TANF 60-month clock will automatically continue to increment without requiring further action by the worker.
11. Set a task and reminder to re-evaluate the need for a caretaker to act as a caregiver. (See 201.1H)

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Example: 1

A family of three, the mother and two children, apply for TANF. The mother fails to cooperate, without good cause, and is ineligible to be included on the payment. The family resides in a Group III locality and has no countable income. The children are eligible for benefits and the payment is calculated as follows:

Step (1) Calculate reduction by removing caretaker's needs:

\[
\begin{align*}
\text{SOA for 3 persons} & : \$419.00 \\
\text{SOA for 2 persons} & : -347.00 \\
\text{Amount of SOA reduction} & : 72.00 \\
\end{align*}
\]

Step (2) Calculate 25% reduction:

\[.25 \times \$419 = \$104.75\]

Step (3) Calculate additional penalty amount:

\[
\begin{align*}
\text{25% reduction} & : \$104.75 \\
\text{SOA reduction} & : -72.00 \\
\text{Additional penalty amount} & : 32.75 \\
\end{align*}
\]

Step (4) Net payment calculation:

\[
\begin{align*}
\text{SOA for 2 persons/Payment amount} & : \$347.00 \\
\text{Additional penalty} & : -32.75 \\
\text{Net payment} & : \$314.25 \\
\text{Actual Payment Amount} & : \$314.00 \\
\end{align*}
\]

Example: 2

A family residing in a Group II locality has been receiving benefits in the amount of $274 for two persons (the mother and one child). The mother is determined not to be cooperating, without good cause, and must be removed from the payment. The calculation of the new payment amount is as follows:

Step (1) Calculate reduction by removing caretaker's needs:

\[
\begin{align*}
\text{SOA for 2 persons} & : \$274.00 \\
\text{SOA for 1 person} & : -187.00 \\
\text{Amount of SOA reduction} & : 87.00 \\
\end{align*}
\]

Step (2) Calculate 25% reduction:

\[.25 \times \$274 = \$68.50\]
Example: 2 Continued

Step (3) Calculate additional penalty amount:

$68.50 25% reduction
-87.00 SOA reduction
$0.00 Additional penalty amount

Step (4) Net payment calculation:

$187.00 SOA for 1 person/Payment amount
- 0.00 Additional penalty
$187.00 Net payment

Example: 3

A family residing in a Group III locality is composed of the mother and her four children. The mother receives $120 monthly in countable unearned income. TANF benefits are currently $458 ($578 SOA - $120 income). The mother is determined not to be cooperating, without good cause, and must be removed from the payment.

Step (1) Calculate reduction by removing caretaker's needs:

$458.00 ($578.00 SOA for 5 persons - $120.00 Countable income)
-366.00 ($486.00 SOA for 4 persons - $120.00 Countable income)
$92.00 Amount of SOA reduction

Step (2) Calculate 25% reduction:

.25 X $458 = $114.50

Step (3) Calculate additional penalty amount:

$114.50 25% reduction
-92.00 SOA reduction
$22.50 Additional penalty amount

Step (4) Net payment calculation:

$486.00 SOA for 4 persons
-120.00 Countable income
$366.00 Payment amount

$366.00 Payment amount
-22.50 Additional penalty
$343.50 Net payment

$343.00 Actual Payment Amount
Example: 4

A family residing in a Group III locality is composed of the mother, father, and their three children. A child by a previous relationship of the mother enters the home. The mother does not cooperate, without good cause, in providing information about the child's father. The child's needs are added to the payment; however, the mother's needs must be removed. Calculation of the revised benefits is as follows:

Step (1) Calculate reduction by removing caretaker's needs:

$614.00 Maximum payment - SOA for 6 persons exceeds maximum
-578.00 SOA for 5 persons
$36.00 Amount of SOA reduction

Step (2) Calculate 25% reduction:

.25 X $614 = $153.50

Step (3) Calculate additional penalty amount:

$153.50 25% reduction
-36.00 SOA reduction
$117.50 Additional penalty amount

Step (4) Net payment calculation:

$578.00 SOA for 5 persons/Payment amount
-117.50 Additional penalty
$460.50 Net payment

$460.00 Actual Payment Amount

Example: 5

A family consists of the mother and two children. Assistance is being provided only for the children because the mother has failed to apply for or furnish a Social Security number for herself. The Eligibility Worker is notified of the mother's failure to cooperate with DCSE, without good cause. The family resides in a Group III locality and has no countable income. Calculate the revised payment amount as follows:

Step (1) Calculate reduction by removing caretaker's needs:

This step is not applicable since the mother's needs have already been removed from the payment for failure to comply in meeting the SSN requirement.

$347.00 SOA for 2 persons
Example: 5 Continued

Step (2) Calculate 25% reduction:

\[
.25 \times \$347 = \$86.75
\]

Step (3) Net payment calculation:

\[
\begin{align*}
\$347.00 & \quad \text{SOA for 2 persons/\textit{Payment} amount} \\
- \$86.75 & \quad \text{Penalty} \\
\$260.25 & \quad \text{Net payment}
\end{align*}
\]

If the caretaker provides her SSN while she is still subject to a penalty due to noncooperation with DCSE, the \textit{payment} amount must be recalculated as follows:

Step (1) Calculate reduction by removing caretaker's needs:

\[
\begin{align*}
\$419.00 & \quad \text{SOA for 3 persons} \\
- \$347.00 & \quad \text{SOA for 2 persons} \\
\$72.00 & \quad \text{Amount of SOA reduction}
\end{align*}
\]

Step (2) Calculate 25% reduction:

\[
.25 \times \$347 = \$86.75
\]

Step (3) Calculate additional penalty amount:

\[
\begin{align*}
\$86.75 & \quad 25\% \text{ reduction} \\
- \$72.00 & \quad \text{Amount of SOA reduction} \\
\$14.75 & \quad \text{Additional penalty amount}
\end{align*}
\]

Step (4) Net payment calculation:

\[
\begin{align*}
\$347.00 & \quad \text{SOA for 2 persons/\textit{Payment} amount} \\
- \$14.75 & \quad \text{Additional penalty} \\
\$332.25 & \quad \text{Net payment} \\
\$332.00 & \quad \text{Actual payment amount}
\end{align*}
\]
A mother residing in a Group II locality receives TANF for one child. The mother's needs are not included in the payment since she receives SSI. There is no countable income. The Eligibility Worker is notified of the mother's failure to cooperate with DCSE, without good cause. Calculate the revised payment amount as follows:

Step (1) Calculate reduction by removing caretaker's needs:

This step is not applicable since the mother is categorically ineligible to receive benefits for herself while receiving SSI.

$187.00 SOA for 1 person

Step (2) Calculate 25% reduction:

$.25 \times $187 = $46.75

Step (3) Net payment calculation:

\[
\begin{align*}
$187.00 & \quad \text{SOA for 1 person/Payment amount} \\
-46.75 & \quad \text{Penalty} \\
$140.25 & \quad \text{Net payment}
\end{align*}
\]

$140.00 Actual payment amount

Example: 7

A mother residing in a Group II locality receives TANF for herself and seven children. There is no countable income. The Eligibility Worker is notified of the mother's failure to cooperate with DCSE, without good cause. Calculate the revised payment amount as follows:

Step (1) Calculate reduction by removing caretaker's needs:

\[
\begin{align*}
$516.00 & \quad \text{Maximum payment - SOA for 8 persons ($678) exceeds maximum} \\
$516.00 & \quad \text{Maximum payment - SOA for 7 persons ($607) exceeds maximum}
\end{align*}
\]

Because the SOAs are above the maximum payment amount of $516, there is no reduction when the caretaker is removed.

Step (2) Calculate 25% reduction:

\[.25 \times $516 = $129.00\]
Example: 7 Continued

Step (3) Calculate additional penalty amount:

\[ \begin{align*}
$129.00 & \quad 25\% \text{ reduction} \\
-0.00 & \quad \text{SOA reduction} \\
$129.00 & \quad \text{Additional penalty amount}
\end{align*} \]

Step (4) Net payment calculation:

\[ \begin{align*}
$516.00 & \quad \text{SOA for 7 persons ($607) exceeds maximum. Use maximum.} \\
-129.00 & \quad \text{Additional penalty} \\
$387.00 & \quad \text{Net payment}
\end{align*} \]

$387.00 Actual payment amount

Example: 8

A family of four - a mother, her son, her daughter who is a minor caretaker, and the daughter's baby - apply for TANF. The family resides in a Group II locality and has no countable income. The mother cooperates with DCSE, but her daughter, the minor caretaker, refuses, without good cause, to cooperate in securing support for her child. (Note: The minor caretaker does not claim that the father of the baby is unknown, and so cannot sign the ATL.) She is ineligible to be included on the payment. (See 201.10.C regarding cooperation requirements for a minor caretaker). The mother, son, and the daughter's baby are eligible for benefits and the payment is calculated as follows:

Step (1) Calculate reduction by removing the minor parent's needs:

\[ \begin{align*}
$411.00 & \quad \text{SOA for 4 persons} \\
-344.00 & \quad \text{SOA for 3 persons} \\
$67.00 & \quad \text{Amount of SOA reduction}
\end{align*} \]

Step (2) Calculate 25% reduction:

\[ .25 \times $411 = $102.75 \]

Step (3) Calculate additional penalty amount:

\[ \begin{align*}
$102.75 & \quad 25\% \text{ reduction} \\
-67.00 & \quad \text{SOA reduction} \\
$35.75 & \quad \text{Additional penalty amount}
\end{align*} \]

Step (4) Net payment calculation:

\[ \begin{align*}
$344.00 & \quad \text{SOA for 3 persons/Payment amount} \\
-35.75 & \quad \text{Additional penalty} \\
$308.25 & \quad \text{Net payment}
\end{align*} \]

$300.00 Actual payment amount
Example: 9

A non-parent caretaker in a Group II locality receives TANF for one child. The non-parent caretaker is not in the AU. There is no countable income. The Eligibility Worker is notified of the caretaker’s failure, without good cause, to cooperate with DCSE. Calculate the revised payment amount as follows:

Step (1) $187.00 SOA for 1 person

Step (2) Calculate 25% reduction:

$$\frac{1}{4} \times 187 = 46.75$$

Step (3) Net payment calculation:

\[
\begin{align*}
187.00 & \quad \text{SOA for 1 person/Payment amount} \\
-46.75 & \quad \text{Penalty} \\
140.25 & \quad \text{Net payment} \\
140.00 & \quad \text{Actual payment amount}
\end{align*}
\]

Example: 10

A non-parent caretaker in a Group II locality receives TANF for one child. The non-parent caretaker is not in the AU. The child receives $50 monthly in countable unearned income. The Eligibility Worker is notified of the caretaker’s failure, without good cause, to cooperate with DCSE. Calculate the revised payment amount as follows:

Step (1) $187.00 SOA for 1 person

Step (2) Calculate payment amount:

\[
\begin{align*}
187.00 & \quad \text{SOA for 1 person} \\
-50.00 & \quad \text{Countable unearned income} \\
137.00 & \quad \text{Payment Amount}
\end{align*}
\]

Step (3) Calculate 25% reduction:

$$\frac{1}{4} \times 137.00 = 34.25$$

Step (4) Net payment calculation:

\[
\begin{align*}
137.00 & \quad \text{Payment amount} \\
-34.25 & \quad \text{Penalty} \\
102.75 & \quad \text{Net payment} \\
102.00 & \quad \text{Actual Payment}
\end{align*}
\]
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TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) GUIDANCE MANUAL

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301.1 GENERAL PROVISIONS - The Code of Virginia, Section 63.2-505, provides that the "The Board shall adopt regulations governing the amount of public assistance persons receive under the provisions of this subtitle. In making such regulations, the Board shall consider significant differences in living costs in various counties and cities and, unless otherwise precluded by law, shall establish or approve such variations in monetary public assistance standards for shelter allowance on a regional or local basis, as may be appropriate.

The amount of public assistance any person receives under the provisions of this subtitle shall be determined according to Board regulations with regard to (i) the property and income of the person and any support he receives from other sources, including from persons legally responsible for his support, and (ii) the average cost of providing public assistance statewide. It shall be sufficient to provide public assistance that, when added to all other income and support of the recipient (exclusive of that not to be taken into account as hereinafter provided), provides such person with a reasonable subsistence. In determining the income of and support available to a person, the amount of income required to be exempted by federal statute, or if the federal statute makes such exemption permissive, then such portion thereof as may be determined by the Board shall not be considered in determining the amount of assistance any person may receive under this subtitle."
302.1 DEFINITION OF THE TANF ASSISTANCE UNIT - The TANF assistance unit is composed of the individual or individuals who meet all categorical requirements and conditions of eligibility. The assistance payment will include the needs of all such individuals.

302.2 DEFINITION OF THE - ELIGIBILITY DETERMINATION GROUP (EDG) – For purposes of the VaCMS, the group of individuals whose income must be considered in determining the assistance unit's eligibility and payment amount is referred to as the eligibility determination group. This includes children and parents required to be in the assistance unit; essential persons; individuals whose income is subject to deeming; and, when assistance is requested, a caretaker-relative other than the parent. In the VaCMS, on the TANF – EDG Summary screen, the participation status for individuals included in the EDG will be Eligible, Countable or Deemed.

302.3 DEFINITION OF CARETAKER - In TANF, the caretaker is the natural or adoptive parent or other relative who is responsible for supervision and care of the needy child(ren).

There will be one caretaker included in an assistance unit, except when:

1. the natural or adoptive parent who is incapacitated has remarried, the spouse may be included; or

2. the household consists of a married couple who each have a child(ren) of their own; or

3. guidance at Section 302.8 A. regarding minor parents requires more than one caretaker; or

4. both natural or adoptive parents of at least one child are living in the home and the family is in financial need. Note: In households that include both natural parents and at least one child in common residing in the home, paternity must be established before the putative father can be included as a caretaker on the TANF payment (See Section 201.10 A.).

302.4 DEFINITION OF PAYEE - In TANF, the payee is the parent or other relative who is responsible for supervision and care of the needy child(ren) but who is not included in the assistance unit. A relative would be a payee unless he/she meets the criteria in 302.7.E.

In situations where the parent of the eligible child(ren) is in the home and included in the assistance unit, another relative may be designated as the payee for the case if the local agency has determined that the relative, not the parent, is exercising primary responsibility for the care and control of the child(ren). (Refer to Section 502.4.A.1.c. concerning designation of payees.) In such situations, the relative may be included in the assistance unit only if he/she meets the requirements of an essential person (EWB) listed in Section 302.6.
E. Each case in which an applicant/recipient requests inclusion of an individual as a EWB must be reviewed by the Eligibility Supervisor. The worker must document the Case Narrative - Details screen with the full name and worker number of the supervisor and the date the supervisor approved an individual for inclusion as an EWB.

**Note:** In the VaCMS, the EWB information is captured on the Client Demographics screen under "TANF Information." The worker must indicate that the EWB provides services essential to the well-being of someone in the household and the reason the EWB is needed.

F. EWB individuals are exempt from VIEW.
302.7 COMPOSITION OF THE TANF ASSISTANCE UNIT - The TANF assistance unit is required to include, when living together, the parent(s) and minor sibling(s) of a dependent child for whom assistance is requested. Therefore, each sibling living in the home of a dependent child must be evaluated to determine if he/she meets the categorical requirements listed in Section 201.1.A. This includes any sibling living in the home with both natural or adoptive parents who are also living in the home.

The TANF assistance unit will include the following individuals:

A. The natural or adoptive parent(s) who is living in the same home as the child for whom assistance is requested, unless otherwise indicated by guidance at 302.7.D.*

B. All blood related or adoptive siblings, including those emancipated by court order or marriage, who meet the categorical requirements of an eligible child, living in the same home as the child for whom assistance is requested.** Note: The spouse of the child emancipated by marriage cannot be living in the home for eligibility to exist.

When the entire case is ineligible: If the agency is unable to determine categorical eligibility or payment amount due to the inability or refusal of the parent or caretaker to provide information about an individual required to be a member of the assistance unit, the entire AU must be found ineligible.

When the case is eligible but an individual must be excluded: In general, a case may be approved even though a condition of eligibility has not been met by a required member of the assistance unit. Sections 302.7C – 307.7F list individuals whose needs are not included in the payment, including individuals excluded for failure to meet a condition of eligibility. Those individuals will be assumed to be required members of the assistance unit and the following will apply:

1. In determining need for the assistance unit, the individual will be excluded.

2. In determining the amount of payment for the assistance unit, the income of the individual will be included.

The individual will continue to be excluded and the income will continue to be considered available to the assistance unit until both categorical eligibility and the conditions of eligibility are met. When both requirements are met, the needs of the individual will be included in the assistance unit. (Refer to Section 401.2.B.2.c.)

Exceptions: The entire household is ineligible for assistance, and the application must be denied, when an individual fails to sign the VIEW Agreement of Personal Responsibility (APR) when required to do so as a condition of eligibility at reapplication. (See 901.5C). Also, when a case has been closed for non-cooperation with DCSE, a new application must be denied unless good cause for the

* 45 CFR 206.10(a)(1)(vii)(A)
** 45 CFR 206.10(a)(1)(vii)(B)
E. A caretaker/relative (other than the parent) who requests assistance is not included when:

1. He is not in need.
2. He is receiving SSI and/or an Auxiliary Grant.
3. He is not (1) a U. S. citizen or (2) an eligible alien.*
4. His needs are met by a spouse living in the home.
5. He refuses to cooperate in identifying the parents, establishing paternity, or obtaining support by failing to comply with any of the requirements defined in Section 201.10. This exception applies until compliance with the requirements of cooperation of 201.10 is met.
6. He is ineligible for one month based on receipt of a lump sum. (See 305.4.C.)
7. The caretaker/relative's SSN has not been provided or application for an SSN has not been provided.
8. He is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.**
9. He is found to have committed an IPV and is disqualified according to Section 102.3.
10. His citizenship or alien status has not been declared in writing according to Section 201.7.C.
11. The caretaker/relative is convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or SNAP benefits in two or more states and it is within ten years of the date the individual was convicted.*
12. The caretaker/relative is convicted in state or federal court of a felony offense for possession, use, or distribution of a controlled substance for conduct occurring after 8/22/96.*
13. The caretaker/relative failed to report to the local agency by the 10th of the following month after it became clear that the minor child would be absent from the home for 60 consecutive days. See Section 305.1.E.3.a.

* Personal Responsibility and Work Opportunity Reconciliation Act of 1996
** 45 CFR 233.51
14. The caretaker/relative that is fleeing to avoid prosecution or confinement or that is in violation of probation or parole.*

Note: The spouse of the caretaker/relative cannot be included in the assistance unit as second caretaker unless the spouse is the parent of an eligible child residing in the home.

F. An individual for whom assistance is requested on the basis of providing services essential to the child's well-being (EWB) is not included when:

1. He is not providing a service identified in Section 302.5.
2. He is not in need.
3. He is receiving SSI and/or an Auxiliary Grant.
4. He is not (1) a U. S. citizen or (2) an eligible alien.*
5. The EWB’s SSN has not been provided or application has not been made for such SSN.**
6. He is ineligible for one month based on receipt of a lump sum. (See 305.4 C)
7. He is an alien who has been in the U. S. less than three years and is sponsored by an agency/organization, unless it can be documented that the agency/organization no longer exists or the agency/organization provides a statement that they are financially unable to support the alien.***
8. He is eligible for assistance in a federal category.
9. He is found to have committed an IPV and is disqualified according to Section 102.3.
10. His citizenship or alien status has not been declared in writing according to Section 201.7.C.
11. He is not in compliance with the compulsory school attendance requirement. Refer to Section 201.3.
12. The EWB is convicted in state or federal court of fraudulently misrepresenting his address to receive TANF, Medicaid, or SNAP benefits in two or more states and it is within ten years of the date the individual was convicted.*

* Personal Responsibility and Work Opportunity Reconciliation Act of 1996
** 45 CFR 205.52
*** 45 CFR 233.51
13. The EW3 is convicted in state or federal court of a felony offense for possession, use, or
distribution of a controlled substance for conduct occurring after 8/22/96.*

14. The EW3 is fleeing to avoid prosecution or confinement or is in violation of
probation or parole.*

G. In Emergency Assistance - The assistance unit includes:

1. In cases of natural disaster or fire, any member of the child's family living in the
home and other nonrelated member of the household.

2. In cases of total loss of earnings, those persons who are living in the home related to
the child by birth, marriage, or adoption, provided they meet the citizenship or alienage
requirements.

302.8 FORMING THE COMPLEX ASSISTANCE UNIT - The most common type of assistance
unit consists of one caretaker/relative and child(ren) living in a household. The following guidelines
have been established to aid in determining who shall be included in an assistance unit when the
household contains complex family situations:

A. Minor Parent(s) - A minor parent is an individual under 18 years of age who is the natural
parent of a child. A senior parent is a parent of the minor parent. Minor parents must meet
school attendance requirements in order to have their needs included in the payment.

An unmarried minor parent, for purposes of TANF guidance, is a minor who is single,
separated, or divorced. A married minor parent is a minor who is married and living with his/her
spouse.

*Personal Responsibility and Work Opportunity Reconciliation Act of 1996
See Section 201.10 and 201.10.C.2. regarding cooperation with DCSE, Section 901.2 regarding the VIEW exemption criterion of caring for a child under 12 months of age and Section 401.1D regarding who must complete the application in a minor caretaker household.

In all instances when assistance is requested for the child of a minor parent, the minor parent must also be included in the assistance unit. (Note: the child of a minor parent does not have to be included in the assistance unit if assistance is requested only for the minor parent and siblings of the minor parent, if any).

When the minor parent and her child are the only children in the assistance unit, the case must be closed effective the month following the month the minor parent turns 18. (Exception: If the minor parent turns 18 on the first of the month, the case must be closed for the birthday month.) The 18 year-old may then apply for assistance for herself and her child, and, if approved, will be the caretaker on the new case and the TANF benefits will be issued in her name.

An assistance unit in which the minor parent is included as the only child on the case, but which does not include the minor parent’s child, will be closed effective the month following the month the minor parent turns 18 (unless the case must be closed for the birthday month because the minor parent turns 18 on the first day of the month). Exception: If the minor parent is enrolled in secondary school or a vocational/technical program in which she is expected to complete prior to, or in the same month as, her 19th birthday, the case may remain open until that time. (See 201.2)

1. Unmarried Minor Parent Living with Needy Parent(s) or Other Relative(s)

   a. Minor Parent Living With One Needy Parent or Other Relative

   1. Cases in which the minor parent and her child live with a needy senior parent (including a step-parent), or other relative, will be formed with the needy parent or other relative as caretaker, and the minor and her child as children. The TANF payment will be in the name of the senior parent or other caretaker relative. Any siblings who have applied for or are receiving assistance will be part of the same assistance unit.

   2. Cases in which assistance is requested for the minor parent, but not for the minor parent’s child, and the senior parent (including a step-parent) or other relative is needy, will be formed with the senior parent or other relative as the caretaker and the minor parent as a child. The minor’s child does not have to be included in the assistance unit. The TANF payment will be in the name of the senior parent or other relative. Any siblings of the minor parent who have applied for or are receiving assistance will be part of the same assistance unit.
3. When assistance is requested for the minor’s child, but not for the minor parent, and the minor parent is living in the home, both must be included in the assistance unit. The case will be formed with the needy senior parent (including step-parent) or other relative as caretaker and the minor and minor’s child as children. The TANF benefits will be in the name of the senior parent or other relative. Any siblings of the minor parent who have applied for or are receiving assistance will be part of the same assistance unit.

b. Minor Parent Living With Both Needy Parents

When assistance is requested for an unmarried minor parent and the minor’s child, and both senior parents are in the household and are needy, the case will be formed with both needy senior parents as caretakers and both the unmarried minor parent and the minor’s child as children. The TANF benefits will be in the name of one of the senior parents. If the second senior parent is a step-parent, he/she can be included in the assistance unit only when he/she is the parent of an eligible child residing in the home.

Note: If the natural senior parent is disabled, a step-parent may be included in the home if he/she meets EWB criteria (and he/she is not the parent of an eligible child residing in the home).

c. Minor Parent Living With Needy Relative and Relative’s Spouse

When assistance is requested for an unmarried minor parent and the minor’s child living with a relative and relative’s spouse, and both the relative and spouse are needy, the case will be formed with the needy relative as the caretaker. The spouse of the needy relative cannot be included as a caretaker relative, but can be included as an EWB if he/she meets EWB criteria. The TANF check will be in the name of the caretaker relative.

2. Unmarried Minor Parent Living with Parent(s) or Other Relative(s) Who is Not Needy or is Not Requesting Assistance

a. Minor Parent Living with Parent Who is Not Needy or is Not Requesting Assistance

When assistance is requested for an unmarried minor parent and the minor’s child, and the senior parent is not needy or does not request assistance, the case will be formed with the senior parent as an excluded caretaker and both the minor parent and the minor’s child as children. The TANF benefits will be in the name of the excluded senior parent. A senior parent cannot be treated as an excluded adult if any siblings of the minor parent have applied for or are receiving assistance.
b. Minor Parent Living with a Relative Who is Not Needy or Who is Not Requesting Assistance

When assistance is requested for an unmarried minor parent and the minor’s child, and the relative is not needy or does not request assistance, form the case with the relative as a caretaker not requesting assistance. The minor parent will be included as a child. The case will be formed with the relative as the protective payee, the minor parent as a child, and the minor’s child as a child. The TANF benefits will be in the name of the protective payee.

3. Unmarried Minor Parent Living with a Person Standing In Loco Parentis (See Definitions of in loco parentis at 201.5A and 201.5D).

When assistance is requested for an unmarried minor parent and the minor’s child by a person standing in loco parentis, the person standing in loco parentis (i.e., will not be part of the assistance unit. On the Relationship – Details screen in the VaCMS, the box under the “In Loco Parentis (TANF)” column for the individual standing in loco parentis for the minor parent must be checked. The TANF benefits will be issued in the name of the protective payee, the person standing in loco parentis.

4. Married Minor Parents

A married minor parent is a minor who is married and living with his/her spouse. A married minor parent living with a spouse is not eligible for assistance as a minor caretaker. If the minor parent and spouse are eligible for assistance, the case will be established as a regular TANF or TANF-UP case.

Note: If a married minor parent, spouse, and child are living with the parent of the minor parent, that parent’s income is not counted when determining the eligibility of the minor parent’s TANF or TANF-UP household.

B. Households with Multiple Groups of Children - A group of children can be a single child, or natural or adoptive siblings, or other children in a household. When the household consists of more than one group of children, the determination of which children will comprise one assistance unit is based on legal responsibility. A natural or adoptive parent is the only person who has legal responsibility for a child.

Children for whom the applicant has legal responsibility will make up one assistance unit. All other children in the home for whom assistance is requested will make up a second assistance unit. If the applicant does not have legal responsibility for any of the children, there will be only one assistance unit. (Exception: While a senior parent has legal responsibility for the minor parent, a household consisting of a needy senior parent, a minor parent, and the minor parent’s child will make up one assistance unit. If the needy senior parent requests assistance for siblings of the minor caretaker, those children, if eligible, will be included in the same assistance unit).
304.1 STANDARDS OF ASSISTANCE - The State Board has established standards of assistance*, based on the size of the assistance unit, to be used in TANF cash payment cases.

Because of wide variation in shelter cost within the State, two groups of standards have been established reflecting this variation. Appendix 1 to Section 304 lists the localities in the State according to the group in which they fall.

The monthly standards of assistance, based on the number of eligible persons in the assistance unit and the locality group in which the assistance unit resides, are shown in Appendix 2 to Section 304.

The appropriate standard of assistance, less all countable income of the assistance unit, as specified in Section 305, is the amount of the monthly cash payment for an otherwise eligible assistance unit, except that the State Board has established a maximum payment. The maximum reimbursable payment for each locality group is shown in Appendix 2 to Section 304. Any locality wishing to meet the full budgetary deficiency, when this is in excess of the maximum reimbursable payment, may do so provided (a) the deficiency is computed on the basis of established standards, (b) the excess is paid from local funds and (c) the full deficiency is met in all TANF cases in the locality.

304.2 TOTAL ALLOWABLE INDIVIDUAL NEED - When it is necessary to determine whether one individual included in the TANF assistance unit is in need, the total amount allowed for his needs must be identified. This amount is his pro rata share of the appropriate standard of assistance for the assistance unit. The same procedure is used to determine whether or not a caretaker-relative other than the parent or an essential (EWB) person living in the home is in need and eligible for inclusion in the assistance unit. Once the caretaker relative other than the parent is included in the assistance unit, he may continue to be eligible for TANF as long as his countable income (gross income less a standard deduction) is less than the current poverty level for one person. If his countable income exceeds the current poverty level for one person, he must be removed from the assistance unit.

When an individual is removed from the assistance unit, the TANF payment is recomputed on the basis of the standard of assistance specified for the number of persons remaining in the unit.

* Code of Virginia, Section 63.2-505
GROUPING OF LOCALITIES

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<tr>
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Note: Effective 7/1/17, Group I was eliminated; the localities were moved to Group II.

Transmittal 65
b. for TANF-UP, unemployment compensation benefits;

c. the earned income of a child (under age 18 or, if age 18, is scheduled to graduate no later than the month he/she turns 19) who is a full or part-time student.

If the income of the assistance unit exceeds 185%, the case is ineligible for a payment.*

Screening at the Standard of Assistance

The following procedures are applicable to the standard of assistance screening

a. Applications, Including Persons Being Added to An Existing Assistance Unit

Once the total gross countable income of the assistance unit is determined to be less than or equal to 185% of the standard of assistance, income must then be screened at the standard of assistance in order to allow earned income disregards where applicable.

b. All AUs will be allowed the following deductions from earned income:

The standard deduction**, the same amount used in the standard deduction for the SNAP program, and 20% of the remainder is deducted from the gross earnings.*** (Refer to Section 305, Appendix 3, Step 2, and to Section 305.3.B.)

<table>
<thead>
<tr>
<th>Assistance Unit</th>
<th>Standard Deduction</th>
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<tr>
<td>1-3 members</td>
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<td>4 members</td>
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<td>6 or more members</td>
<td>$234</td>
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c. Ongoing Cases

Once the total gross countable income of the assistance unit is determined to be less than or equal to 185% of the standard of assistance, income must then be screened at the standard of assistance in order to allow earned income disregards where applicable.

d. The following income is disregarded when income is screened at the standard of assistance:

1) all income specifically disregarded in 305.4.A;

* 45 CFR 233.20(a)(3)(xiii)
** 22 VAC 40-295-60
*** 22 VAC 40-295-60
2) the earned income of a child (under age 18 or, if age 18, is scheduled to graduate no later than the month he/she turns 19) who is a full or part-time student.

If the assistance unit has income below the standard of assistance, the payment is calculated based on prospective budgeting.

B. Prospective Budgeting*

1. Budgeting Concept

In order to be eligible for TANF, a case must be eligible under income requirements. The amount of the payment which an assistance unit is eligible to receive will be calculated based on prospective budgeting.

Prospective budgeting is calculating the TANF payment using the anticipated income of the members of the assistance unit and the excluded persons required to be included in the assistance unit in the budget month. For purposes of determining the amount of the TANF payment and the amount of income to be counted, the payment month and budget month are the same.*

2. Income To Be Counted In Calculating the Payment

The payment is to be calculated using the methods listed below. The assistance unit's circumstances must be evaluated to determine which method(s) will provide the amount of income anticipated (best estimate) to be received in the payment month.

For purposes of determining the amount of income to be counted in calculating the payment, anticipated income means any income the applicant/recipient and local agency are reasonably certain will be received during the payment month. If the amount of income or when it will be received is uncertain, that portion of the assistance unit's income that is uncertain shall not be counted by the local agency.

"Reasonably certain" means that the following information is known:

- who the income will come from,
- in what month it will be received, and
- how much it will be (i.e., rate of pay, number of hours, frequency and payment cycle.

* 45 CFR 233.33
a. **Methods Used To Anticipate the Income**

For applications and reapplications, the income generally to be counted is the income verified for the calendar month prior to the month of application. For redeterminations, the income generally to be counted is the income verified for the month prior to the month of review. However, if the income for the prior month is not the amount anticipated to be received in the payment month, the Eligibility Worker must work with the assistance unit to determine how the correct amount can be anticipated. For changes, the Eligibility Worker must work with the assistance unit to determine the correct amount of income that can be anticipated for the payment month.

The following methods are to be used to anticipate the assistance unit's income when the prior month's income does not reflect the income anticipated for the payment month:

1) The Eligibility Worker shall take into account the income already received by the assistance unit during the application process and any anticipated income the assistance unit and local agency are reasonably certain will be received during the payment month. During the approval process, when calculating the payment amount for prior months, the Eligibility Worker shall use converted income which has been received by the assistance unit, to determine the correct amount of the payment, unless the income is for a partial month. If the household received less than a full month's pay, or if less than a full month's pay is to be counted, the exact amount of income is to be used.

2) If income fluctuates so much that the prior calendar month cannot by itself provide an accurate indication of anticipated income, a longer period of past time may be used if it will provide a more accurate indication of fluctuations in future income. If income is ongoing, anticipate by averaging income from the past pay periods.

The Eligibility Worker may average income received in any number of pay periods immediately prior to application/review, using pay periods still appropriate to the customer's circumstances. The worker should select only the pay periods that will yield the most realistic estimate of income to be received.
If the assistance unit's income fluctuates seasonally, it may be appropriate to use the most recent season, rather than the calendar month prior to the month of application, as an indicator of future income. However, the Eligibility Worker should use caution in using income from a past season as an indicator of income now, since in many cases of seasonally fluctuating income, the income also fluctuates from one season in one year to the same season in the next year.

3) For migrant and seasonal farm worker assistance units, the judgment of the Eligibility Worker that income is reasonably certain to be received is to be based on formal or informal commitments for work for individual assistance units, rather than on the general availability of work in an area. Also, income should not be based on an assumption of optimum weather or field conditions.

4) Profit from the sale of livestock or cash crops, such as tobacco or peanuts, or from small businesses, such as but not limited to, vending stands, home beauty shops, or small grocery stores, is prorated on an annual basis or over the number of months in which the income is earned, whichever is appropriate. Federal farm subsidies are prorated over a 12-month period.

Guaranteed salaries paid under contract will be prorated over the period of the contract even though the employee elects to receive such payments in fewer months than are covered by the contract. When the contract earnings will be received monthly over a period longer than that of the contract, the earnings must be prorated over the number of months the income is anticipated to be received. Contract earnings are defined in 305.3.

Examples:

(a) A contract period is September 2018 - August 2019 (12 months). The customer chooses to receive the contract income over a 10-month period. The contract amount is divided by the contract period of 12 months to arrive at the monthly gross income.

(b) A contract period is November 2018 - June 2019 (8 months). The customer chooses to receive the contract income over the eight-month period. The contract amount is divided by eight months to arrive at the monthly gross income.

(c) A contract period is September 2018 - August 2019 (12 months). The customer receives the contract income over the 12-month period. The contract amount is divided by 12 months to arrive at the monthly gross income.
(d) A contract period is September 2018 - January 2019 (5 months). The customer receives the contract income monthly over a 12-month period. The contract amount is divided by the number of months in which the income is received (12).

In those cases where a contract specifies a set amount over the contract period, plus additional monies of an uncertain amount if additional work is available and done, only the base contract is prorated. Additional monies earned over and above the base contract are counted as income when they can be anticipated.

In those cases where a contract calls for no pay for those days not worked, the salary for those days should not be counted if it can be anticipated at the time that the prospective determination is made that certain days will be missed. Otherwise, the income calculation is to be based on the maximum salary. The client may then inform the local agency as days are missed. If the client reports a decrease in income within the month of the decrease, a supplemental payment is to be issued.

If the contract amount changes during the contract period, adjust the remaining months of the contract period. To determine the new monthly income amount, divide the new contract amount by the number of months used in the original calculation.

Example 1: A school bus driver's contract states that she will receive $1250 for the year, but that she will not be paid for days the school is closed or for days she is sick. When she applies on February 10, she has already missed three days for snow in the contract year and she was sick for two days. The contract reads that $10 will be deducted for each day not worked. The case is approved with income of $100 per month.

($1250 - $50 = $1200 \quad $1200 \div 12 \text{ months} = $100$)

Example 2: On April 5, the client reports that she missed April 3 and 4, which were not anticipated at the time of approval. The worker issues a $20 supplement for April.

Example 3: On December 11, the school bus driver reports that her contract will be increased by 10% effective January 1. The prospective income is recalculated for January's payment using the increased figure of $110.

($1,200 \times 1.10 = $1,320 \quad $1,320 \div 12 \text{ months} = $110$)
The case must be documented to reflect the method used to arrive at the anticipated income.

Eligibility must be determined for each month of the application period. Applicants may be ineligible for the month of application and eligible for the month following the month of application. Benefits must be denied for the month of application and approved for the month following the month of application.

Example 1: - On November 17, the worker processes an application dated October 29. The case is denied for October and November due to excess income; however, the case will be eligible for a December payment as the income ended in November. Therefore, the case is to be approved effective December 1.

Example 2: - On July 14, the worker processes an application dated June 1. The application was not processed within the 30-day application processing time frame due to the applicant being admitted to the hospital as a result of a stroke on the 28th day. Verification is received July 13. The worker determines that the case is eligible. The worker approves the case with July 1 as the beginning date of assistance.

Example 3: - On December 1, the worker processes an application dated November 13. The case is eligible for a payment for November and December but ineligible for a January payment as a result of full-time employment. A payment is to be issued for November and December, and the case is to be closed effective December 31.

C. Verification of Income (Earned and Unearned)

In order to establish income eligibility, verification of all income received or anticipated to be received monthly by the assistance unit is required at the time of application/reapplication, when adding individuals with income, at renewals, and when a change becomes known to the agency. When verification is required, the agency must notify the applicant/recipient of the necessary verification and allow the assistance unit 10 days to respond. The assistance unit has primary responsibility for verifying income; however, if needed, the worker must assist the household in obtaining any necessary verifications.

The assistance unit is not responsible for providing verification of reported unearned income for which verification is accessible to the local agency through systems of records. These records include SDX, SVES, SOLQ-1, and VEC inquiry of unemployment benefits. The EW should document the date and results of the searches in Case Comments on the Screen Level page within VaCMS. If the inquiry confirms that the individual does not have unearned income, the EW should also document the result in Case Comments on the Screen Level page within the VaCMS. If the applicant/recipient fails to verify income either verbally or in writing, within 10 days of notification, guidance at 401.2.B.1. and 2. regarding substantiation of eligibility factors is to be followed.
At each renewal, all income of the assistance unit must be verified, regardless of whether a change has been reported. If a change is identified, a prospective determination must be conducted in accordance with Section 305.1.A. to establish ongoing eligibility.

When a change in income occurs between renewals, a prospective determination must be conducted to establish ongoing eligibility.

When attempts to verify countable income prove to be unsuccessful because the person or organization that is to provide the verification fails to cooperate with the assistance unit and the local agency, and there are no alternate sources of verification available, the Eligibility Worker shall determine an amount to be used for TANF purposes based on the best available information. The case record must be documented to reflect the method used to arrive at the anticipated income.

In the above situation, the following verification will be considered the best available information:

1. a third party statement,
2. a collateral contact, or
3. as a last resort, the applicant/s/recipient's written statement of the amount of income anticipated to be received in the payment month.

D. Handling Changes in Income (Earned and Unearned)

1. The assistance unit must report increases in income that place the assistance unit’s monthly income above 130% of the federal poverty level based on assistance unit size.

The income limits are as follows:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Monthly Amount</th>
<th>Weekly Amount</th>
<th>Bi-Weekly Amount</th>
<th>Semi-Monthly Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$1,316</td>
<td>$306.05</td>
<td>$612.09</td>
<td>$658.00</td>
</tr>
<tr>
<td>2</td>
<td>1,784</td>
<td>414.88</td>
<td>829.77</td>
<td>892.00</td>
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<td>3</td>
<td>2,252</td>
<td>523.72</td>
<td>1,047.44</td>
<td>1,126.00</td>
</tr>
<tr>
<td>4</td>
<td>2,720</td>
<td>632.56</td>
<td>1,265.12</td>
<td>1,360.00</td>
</tr>
<tr>
<td>5</td>
<td>3,188</td>
<td>741.40</td>
<td>1,482.79</td>
<td>1,594.00</td>
</tr>
<tr>
<td>6</td>
<td>3,656</td>
<td>850.23</td>
<td>1,700.47</td>
<td>1,828.00</td>
</tr>
<tr>
<td>7</td>
<td>4,124</td>
<td>959.07</td>
<td>1,918.14</td>
<td>2,062.00</td>
</tr>
<tr>
<td>8</td>
<td>4,592</td>
<td>1,067.91</td>
<td>2,135.81</td>
<td>2,296.00</td>
</tr>
<tr>
<td>Each additional Person</td>
<td>+ $468</td>
<td>+ $108.84</td>
<td>+ $217.67</td>
<td>+ $234.00</td>
</tr>
</tbody>
</table>
2. When a change in income is reported or becomes known, including changes not required to be reported to the agency, the worker must take the following steps:

a. Document the case record regarding the rate of pay, number of hours, frequency of payment (i.e., weekly, biweekly, semi-monthly, monthly, etc.) and the payment cycle (i.e., on what day the client is paid) within the VaCMS in Case Comments on the Screen Level page. If, based on the information provided by the client, there is a decrease in benefits, income must be verified by the next renewal.

b. When an increase in income occurs, conduct a prospective determination per Section 305.1.A based on information provided. If the prospective determination renders the case ineligible, close the case as soon as administratively possible, or if ineligibility is expected to exist for only one month the payment may be suspended.

If the case continues to be eligible, calculate the payment reflecting the new or increased income. If the income anticipated to be received during the month following the month the change became known to the agency represents less/more than a full month's income, then the second month following the month the change became known to the agency must be calculated based on the amount of income anticipated to be received in that month.

For increases in contract income, refer to Section 305.1.B.2.a.4.

c. If a decrease in income occurs, the change must be reflected, based on information provided, in the following payment month. Verification must be provided by the second month after the change becomes known. (Refer to Section 503.9 for further guidance concerning underpayments.)

For decreases in contract income, refer to Section 305.1.B.2.a.4.
E. Adding and Deleting Persons With Income

1. When adding/deleting a person with income, conduct a prospective determination per 305.1.A. If eligible, verify anticipated income and reflect the change in the appropriate payment month.

2. Income of persons being removed from the assistance unit will be deleted from consideration at the same time the individual is removed from the unit. Additionally, any income of a stepparent or parent (including the parent of a minor caretaker) who is not included in the assistance unit will be deleted for the month following the month the person leaves the home. In the case of a minor caretaker, income deemed from the minor's parent(s) will be deleted for the month following the month the minor caretaker attains the age of 18.

Example 1 - One of three children is removed from the home by the court on July 15. This child receives Social Security of $75 per month. The August payment should not reflect the income and needs of the child who was removed.

Example 2 - A stepparent moves out of the home on the 23rd of September. Any income deemed available to the unit should be deleted from the October payment calculation. A supplemental payment must be made if the income cannot be deleted from the October 1 payment.

3. When adding/deleting the income of excluded individuals required to be in the assistance unit, the income of any excluded individual required to be in the assistance unit will be treated the same as individuals who are included in the assistance unit and, in the case of earned income, earned income disregards are applicable.

   a. The income of an excluded individual will be deleted the month following the month that the person leaves the home or is no longer required to be in the unit.

   b. When an excluded individual gets an increase or decrease in income, the increase or decrease will be handled in accordance with Section 305.1.D.

F. Applicant's/Recipient's Reporting Responsibilities

The applicant/recipient must be advised according to Section 401.2.B.1. and 2. regarding verification requirements and action that may be taken if verification is not provided. Additionally, the worker must provide the applicant/recipient with information concerning:

1. Documents that constitute acceptable types of verification.

2. Changes that must be reported.
305.2 INCOME TO BE COUNTED - For the purpose of determining the amount of payment for an assistance unit, it is necessary to deduct the net countable income from the monthly standard of assistance applicable to the assistance unit. Net countable income is all income, both earned and unearned, which is available or expected to be available to members of the assistance unit, except for that portion specifically disregarded.

EXCEPTIONS:

(1) Reimbursements for out-of-pocket expenses shall not be considered countable income. These expenses may include reimbursement for travel expenses, such as mileage; reimbursement to the caretaker of a child for child care expenses; reimbursements for expenses incurred as a volunteer, etc.

(2) Money which belongs to another person that is handled by the client to pay expenses for that person is not considered available to the assistance unit. Example: Mrs. C. has a son in the Army who is currently in Germany. He sends her $250 a month to pay his car payment of $250 a month. None of this money is to be considered as income to Mrs. C.

Example:

Mrs. X and Mrs. Y live in the same house which is rented in Mrs. X’s name. Mrs. Y gives Mrs. X an established portion of the rent each month. Mrs. X adds her portion to Mrs. Y’s and pays the rent. Since this is a "shared shelter" arrangement, Mrs. Y’s portion of the rent is not considered income to Mrs. X.

Note: This guidance is not intended to replace roomer/boarder and property rental situations.

(3) The first $30 received by each individual in the assistance unit per calendar quarter for special occasions, such as birthdays, Christmas, etc., will be disregarded. Calendar quarters are January through March, April through June, July through September, and October through December. Any amount in excess of the $30 per quarter anticipated to be received will be counted as income in the payment month in which it is anticipated to be received.*

There is some income that is not currently being received by the assistance unit but is considered available:

A. Support from a spouse or parent (natural, adoptive, or stepparent) living in the home is assumed to be available to the spouse and dependent children under 21 who are also living in the home**

*45 CFR 233.20(a)(3)(iv)
**45 CFR 233.20(a)(3)(vi)
recipient of either program can be counted in determining the amount of an TANF payment, even though the applicant/recipient is the spouse of the needy caretaker or the parent of the eligible children.* When living together, the income of a minor caretaker’s parent(s) will be deemed available to the minor caretaker’s assistance unit until the minor caretaker reaches the age of 18, regardless as to whether the minor caretaker is excluded from the assistance unit, due to SSI receipt, or for any other reason.**

B. If an individual receives income or benefits such as, but not limited to, RR Retirement, other retirement benefits, Unemployment Compensation, Veterans’ benefits, or Social Security benefits, the actual amount of the income or benefit received by the individual may differ from the gross amount to which the individual is eligible. Whether the gross or actual amount is counted for TANF purposes is based on the type of income or benefit reduction.

1. The gross amount of income or benefit, not the actual amount received by the individual, will be counted when:
   * the individual is clearly entitled to the benefit but chooses not to accept it;
   * the income is from wages or benefits garnished by a third party; or
   * a court has ordered that child support be withheld from the income or benefit

(Note: Benefits from which child support can be withheld include, but are not limited to, Social Security benefits, Veteran’s benefits, Unemployment benefits, and Worker’s Compensation benefits. Supplemental Security Income (SSI) and public assistance benefits are exempt from child support claims based on federal and state law.)

Example 1:
Mother applies for TANF for herself and one child. Mother is disabled and receives SSA. Mother’s SSA check is reduced each month to pay a court-ordered child support obligation (court order states that the child support will be deducted from the SSA check). Mother is entitled to receive $200.00 but only receives $100.00. The agency will count the full $200.00 as income for the TANF AU.

Example 2:
Mother applies for TANF for herself and one child. Mother is disabled and receives SSA. Mother’s SSA check is reduced each month to pay an IRS tax debt. Mother is entitled to receive $200.00 but only receives $100.00. The agency will count the full $200.00 as income for the TANF AU.

2. The actual amount of income or benefit received, not the gross amount for which the individual is eligible, will be counted as income when:
   * some, or all, of the income or benefit has been retained by the issuer due to overpayment or program non-compliance; or
   * the TANF child is the beneficiary of the income but only a portion of the income is available to the caretaker.

* Social Security Act, Section 402(a)(24)
** 45 CFR 233.20(a)(3)(xviii)
Policies applicable when the affidavit of support was executed on or after December 19, 1997, are as follows:

a. **Countable Income of Sponsors** - For purposes of determining eligibility, the income of any person who executed an affidavit of support with respect to the alien and the spouse of any person who executed an affidavit on behalf of the alien, shall be considered to be the unearned income of the alien.

b. **Termination of the Sponsor's Obligation** - The evaluation and use of the income of the sponsor and spouse of the sponsor must continue toward the TANF eligibility and benefit level of the alien until the alien:

   1) becomes a U.S. citizen through naturalization; or
   2) has worked, or can be credited with, 40 qualifying quarters of work, provided that the sponsored alien is not credited with any quarter beginning on or after January 1, 1997, during which the sponsored alien receives federal public benefits. (Refer to Section 305 Appendix 4); or
   3) leaves the U.S. or no longer holds permanent resident status; or
   4) dies or the sponsor dies.

c. **Review of Income of Alien Upon Reapplication** - Whenever an alien reapplies for TANF benefits, the worker must review the income attributed to the alien.

d. **Indigence Exception** - If a determination is made by the local agency that a sponsored alien would, in the absence of the assistance provided by the agency, be unable to obtain food and shelter, taking into account the alien's own income, any cash, food, housing, or other assistance provided by other individuals, including the sponsor, the amount of income of the sponsor or the sponsor's spouse which shall be attributed to the sponsored alien shall not exceed the amount actually provided for a period beginning on the date of such determination and ending 12 months after such date.

The local agency must notify the Office of the U.S. Attorney General of each such determination, including the names of the sponsor and the sponsored alien involved. The written notification **should include the reference "Determination under 421(e) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996" and should be sent to the following address:**

**U.S. Citizenship and Immigration Services**

Statistics Branch

425 I Street NW

Washington, D.C. 20536
e. Special Rule for Battered Spouse and Child - Sponsor deeming requirements are suspended for a 12-month period from entitlement to TANF for sponsored aliens who have been battered or subjected to extreme cruelty and the local department of social services has determined that there is a substantial connection to the need for benefits and the battery or cruelty.

After 12 months, the battered spouse or child may continue to receive assistance if the battery or cruelty was perpetrated by the sponsor and has been recognized by a court order or USCIS determination.

To qualify under this special rule, the batterer must not be residing in the same household as the individual who was subjected to the battery.

Note: This provision only applies if the battered or abused alien entered the U.S. prior to August 22, 1996, but is sponsored on or after December 19, 1997.

f. Reimbursement Procedures - Execution of the affidavit of support, coupled with the sponsored immigrant's acquisition of permanent residence, creates a contract which is legally enforceable. The sponsor is obligated to reimburse government agencies which provide public benefits, including TANF, to the sponsored alien. Procedures for requesting and receiving reimbursement will be issued in a future transmittal. If repayment is received from the sponsor before reimbursement procedures are issued, contact the Regional TANF Specialist for interim instructions.

2. Aliens Whose Sponsor Executed an Affidavit of Support before December 19, 1997

Aliens who applied for immigrant visas and those who filed for an adjustment of status before December 19, 1997, are not subject to sponsor deeming, as the sponsor's obligation to support expired after three years.
3. Verification of alien status

E. Support from Relatives

1. **Spouse, parent, or minor sibling in the home** - Under federal regulations, in family groups living together, income of the spouse is considered available for his spouse, income of a parent is considered available for his children under 21, income of the senior parent(s) is considered available to the minor caretaker's assistance unit, until the minor parent reaches the age of 18, and income of the ineligible alien parent is considered available to his child's assistance unit. The deeming of income from the parent only applies to minor caretaker and ineligible alien cases as specified in section 305.4 F.3.

As specified in Section 302.7, the parent and minor siblings of the eligible TANF children living in the home are ordinarily included in the assistance unit, with their needs and income counted in determining the amount of payment. If the parent or child is not included in the assistance unit for any of the reasons listed in Section 302.7.C. or D., his income is considered available to the assistance unit as follows:

a. If the parent or child is receiving SSI, Auxiliary Grants, adoption assistance, or a foster care payment, none of his income can be counted as available to the TANF assistance unit.

*45 CFR 233.20(a)(3)(vi)*

**45 CFR 233.20(a)(3)(xviii)**
f. If the parent is a sponsored alien whose income plus that portion of the sponsor's income deemed available to him/her equals or exceeds the alien's pro rata share of the standard of assistance at 90% for the alien and the remaining members of the assistance unit, the children's pro rata share of the alien's countable income (exclusive of the sponsor's income) is considered available to the assistance unit. Allow the earned income disregards per Section 305.3 B. in determining the alien's countable earnings. Note: A lump sum payment received by a sponsored alien parent excluded under this paragraph is counted as income in accordance with 305.4.C.

If the child is a sponsored alien, none of his income is to be counted.

2. Spouse (Stepparent) or parent outside the home - Child support or child support commingled with alimony received or anticipated to be received by the assistance unit is counted as income in the amount actually received, minus the first $100 each month, in establishing initial eligibility on the basis of need for an otherwise eligible assistance unit.

Child support is considered income belonging to the child. If the child is an SSI recipient or a capped child the support will not be counted.

When a non-custodial parent has been assigned a unitary support order for children included in the AU and children not in the AU, the support must be prorated. The TANF worker must:

1. Prorate the support and key in the VaCMS the prorated amount for each child.
2. Contact the district DCSE office to insure their knowledge of a unitary payment for children who are TANF and non-TANF (SSI/capped).

DCSE will follow their procedures identified in Clearinghouse #03-DD-026R.

When a support payment is for a child no longer in the home, count as income any portion of the support used for the AU. Enter the income in the VaCMS as a ‘Third Party Payment’.

If such support is insufficient to meet the needs, the initial payment(s) is to be computed counting all support received prior to the date that the case approval is keyed into the VaCMS (See Exception d. below).
All support received after case approval must be redirected to the Division of Child Support Enforcement (DCSE). All subsequent payment(s) are to be computed without regard to such income and the amount of the assistance payment will be total needs less all other countable income up to the maximum reimbursable payment. (Refer to 503.9 for retroactive payments at initial application.) The applicant/recipient must be advised that all future support received must be forwarded to DCSE. NOTE: Alimony not commingled with support is to be counted as income. It is not considered as support, is not to be redirected to DCSE, and is not eligible for the $100 disregard.

Exceptions:

a. In the event the caretaker fails to cooperate in redirecting these support payments to the State, the caretaker must be removed from the assistance unit (201.10). All future support, minus the first $100 each month, anticipated to be received by the caretaker must be considered as income available to meet the needs of the remaining members of the assistance unit until such time support is redirected to the State.

b. In the event the caretaker cooperates in redirecting support payments to the Division of Child Support Enforcement and the support is sent back to the client, the support will not be counted as income to the client, neither will an overpayment exist. Benefit workers should contact the district DCSE worker to determine what was sent to the client and the accuracy of the DCSE case status.

c. In situations where the client has cooperated and support is being paid to the Division of Child Support Enforcement but the responsible person is also making a support payment directly to the client, the amount being received by the client is to be counted in total as income to the assistance unit. The $100 disregard is not applicable to the additional support received by the family in this situation. The income will be counted against the payment until the new support obligation has been established.

d. Pending the establishment of a child support obligation by the District Child Support Enforcement Office, payments made to a third party such as a rental agency in lieu of or in addition to child support, whether based on a court order or a mutual voluntary agreement between the client and the responsible person, must be counted as income to the assistance unit. The $100 disregard is not applicable to third party payments.

e. If it is anticipated that an amount less than $100 will not be collected by DCSE after case approval, disregard an amount from the support collected prior to case approval to ensure that a total amount of no more than $100 is disregarded in the initial month of eligibility.
3. Putative fathers outside the home - In cases involving absent putative fathers, cash contributions are counted as income in the amount received, minus the first $100 each month, in establishing initial and continuing eligibility until such time as the contribution is redirected to the State. Note: If a notarized statement of paternity, a copy of an existing court order for support, or a Virginia birth certificate with the father's name exists in the case record, support received from such person, if absent, must be redirected to the State.

4. Other non-responsible persons - Cash contributions from non-responsible persons, such as cohabitants, are counted as income in the amount received or anticipated in establishing initial and continuing eligibility.

A cohabitant is a person cohabiting (as man and wife) with the parent of the TANF children.
F. **Deeming Income** - In certain situations, the income of an individual living in the home with the assistance unit must be evaluated to determine what amount, if any, must be considered available to the assistance unit, or deemed, regardless of whether the income is actually made available to the unit. Income deeming is applicable to the following persons:

- a stepparent living with the assistance unit who is not included in the assistance unit. Income of a stepparent will be counted in determining the eligibility of the spouse. Income of a step-parent will also be deemed available to the spouse's natural or adopted child(ren) when the spouse is living in the home. See 305.4F to determine the amount, if any, of the stepparent's income that will actually be counted in determining the eligibility of the spouse and/or deemed to the step-children. The income of the stepparent will not be deemed available to a minor caretaker's assistance unit. Divorce terminates the stepparent's financial responsibility for the step-children, but not the degree of relationship.

- the parent(s) (but not a step-parent) of a minor parent, when the minor parent resides with the parent(s).

- an alien parent who is ineligible for assistance due to his alien status.

The procedures described below are to be used to determine the amount of income that must be deemed available to the assistance unit.

1. **Stepparent Deeming Procedures** - The two-step procedure in a. below must be followed to determine eligibility and the payment amount when there is a stepparent in the home but not in the assistance unit and the parent is otherwise eligible for inclusion in the assistance unit. If the parent has been excluded from the assistance unit due to any reason other than failure/refusal to cooperate with DCSE, only Step 2 is necessary. If the parent has been excluded due to failure/refusal to cooperate with DCSE, the procedure in b. below is applicable.

   a. **Step 1 - Determining Eligibility of the Parent in the Home** - Compute the amount of the stepparent's income available to the assistance unit by subtracting the following from the verified anticipated gross monthly earned income (use net profit if from self-employment) and gross unearned income:

   1) The first $90 of gross earned income (deeming disregard);

   2) The standard of assistance for household members claimed or who could be claimed as dependents on the stepparent's federal income tax return, excluding members of the assistance unit.

* Code of Virginia, Section 63.2-614
Exceptions: The needs of an individual(s) who is not in the assistance unit due to an IPV penalty, failure to comply with SSN requirements, or failure to cooperate with DCSE will not be allowed.

If the stepparent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the stepparent.

3) Support, including wage assignments paid to individuals not living in the home who are claimed or could be claimed as dependents on the stepparent's federal income tax return.

If the stepparent has not previously filed a return or states that he will claim a different number of dependents for the current year, use the number of dependents he intends to claim for the current year.

Verify by statement from the stepparent.

4) Payments for alimony and child support, including wage assignments to individuals not claimed on the stepparent's federal income tax return and not living in the household.

Verify by statement from the stepparent.

Failure of the customer to verify the income of the stepparent will result in ineligibility of the case.

The amount remaining after the above deductions must be compared to the standard of assistance for the assistance unit. If the stepparent's income is less than the standard of assistance for the number of persons in the assistance unit, the parent's needs are included on the payment, and no stepparent income is deemed available. Only the income of the parent and child(ren) is to be considered in determining the payment amount. (Step 2 is not applicable in this instance.)

If the remaining amount equals or exceeds the standard of assistance for the number of persons in the assistance unit, the parent is not included in the assistance unit, and the child(ren)'s eligibility must be determined according to step 2.

Step 2 - Eligibility Determination For the Children When the Parent's Needs Must Be Excluded From the Payment - Determine the child(ren)'s eligibility and payment amount by counting the parent's income, the child(ren)'s income, and that portion of the stepparent's gross income in excess of 150% of the poverty level for two persons (the parent and stepparent), which is $2,058.00. The latter is a standard amount and must be used in all cases regardless of the actual number of dependents the
stepparent has. Countable income is to be deducted from the standard of
assistance for the assistance unit.

b. **Stepparent Deeming Procedure Used When the Parent in the Home
Refuses/Fails to Cooperate With DCSE** - When it is determined that
the parent of the TANF child(ren) has failed or refused to cooperate with
DCSE, the stepparent's income must be deemed available to the assistance
unit, calculating the deemed amount in accordance with 305.4.F.I.a.1) –
4). The deemed income, in addition to the income of the parent and
child(ren) must be counted to determine the assistance unit's eligibility and
payment amount.

Failure of the customer to verify the income of the stepparent will
result in ineligibility of the case.

c. **Stepparent Deeming When the Parent Is Not in the Home With the
Stepparent** - The income of the stepparent will not be deemed when the
natural/adoptive parent of the TANF children is not living in the home due
to separation, divorce, death or incarceration. However, when the
stepparent and the natural/adoptive parent are living apart due to military
duty, employment, or other reason, and they both consider themselves to
be living as husband and wife, they will not be considered separated and
the income of the stepparent will be deemed.

If the stepparent is included in a TANF assistance unit, policies and procedures
applicable to assistance unit members apply instead of the deeming procedures.

**Note:** A lump sum payment received by an eligible child's stepparent is
considered available to the assistance unit as described at 305.4.C.

**Example 1:**
Ms. P. is applying for TANF for herself and her 3 children. Ms. P. receives
unearned income in the amount of $50 per month, and each of the 3 children
receives unearned income in the amount of $50 per month, as well. Ms. P.'s
husband (not the children's father) is employed and earns $2,065 per month.
Mr. P. has no other dependents.

1. To determine Ms. P.'s eligibility to be included in the AU:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. P.'s income</td>
<td>$2,065.00</td>
</tr>
<tr>
<td>Less $90 deeming disregard</td>
<td>- 90.00</td>
</tr>
<tr>
<td>Less standard of assistance for 1 (Group II)</td>
<td>$1,975.00</td>
</tr>
<tr>
<td>Amount deemed available to Ms. P.</td>
<td>$1,788.00</td>
</tr>
<tr>
<td>Standard of assistance for a 4-person AU</td>
<td>$ 411.00</td>
</tr>
</tbody>
</table>

Since the portion of Mr. P.'s income which is deemed available to Ms. P.
exceeds the standard of assistance for 4 persons, she is not eligible to be
included in the AU.
2. To determine the 3 children's eligibility, and, if eligible, the payment amount:

Stepparent's (Mr. P.'s) income $2,065.00
150% of poverty guidelines for 2 (monthly) -2,058.00
Amount exceeding 150% of poverty guideline $7.00

Standard of assistance for a 3-person AU $344.00

Less total countable income ($7.00-amount of Mr. P.'s income which exceeds 150% of poverty guidelines, plus $50.-Ms. P.'s unearned income, plus $150 the children's unearned income for a total of $207 in countable income.
Payment amount $137.00

Example 2:
Ms. J., who has been receiving TANF on behalf of herself and her 2 children reports that she remarried over the weekend. Ms. J. receives unearned income in the amount of $100 per month. Her husband, Mr. J. is employed, with earnings in the amount of $800 per month. Mr. J. has 3 children who live with his former wife, for whom he pays support in the amount of $400 per month.

1. To determine Ms. J.'s eligibility to be included in the AU:

Mr. J.'s income $800.00
Less $90 deeming disregard -90.00
710.00

Less standard of assistance for I (Group II) -187.00
$523.00
Less support paid by Mr. J. to non-household dependents -400.00
Income deemed available to Ms. J. $123.00

Standard of assistance for a 3-person AU $344.00

Since the portion of Mr. J.'s income which is deemed available to Ms. J. is less than the standard of assistance for 3 persons, she is eligible to be included in the AU. Proceed to payment calculation, since Ms. J. is eligible.

2. To determine the payment amount:

Standard of assistance for a 3-person AU $344.00
Less countable income (Ms. J.'s unearned income) -100.00
Payment amount $244.00
Example 3:
Ms. L. is applying for TANF for herself and her 2 children. Her husband (not the children's father), Mr. L., is employed and earns $2,074 per month. Mr. L. has 1 child, who lives in the household also.

1. To determine Ms. L.'s eligibility to be included in the AU:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. L.'s income</td>
<td>$2,074.00</td>
</tr>
<tr>
<td>Less $90 deeming disregard</td>
<td>- 90.00</td>
</tr>
<tr>
<td>Less standard of assistance for 2 (Group II) to include Mr. L. and his child</td>
<td>- 274.00</td>
</tr>
<tr>
<td>Income deemed available to Ms. L.</td>
<td>$1,710.00</td>
</tr>
<tr>
<td>Standard of assistance for a 3-person AU</td>
<td>$ 344.00</td>
</tr>
</tbody>
</table>

Since the portion of Mr. L.'s income which is deemed available to Ms. L. exceeds the standard of assistance for 3 persons, she is ineligible to be included in the AU.

2. To determine the 2 children's eligibility, and if eligible, the payment amount:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stepparent's (Mr. L.'s) income</td>
<td>$ 2,074.00</td>
</tr>
<tr>
<td>150% of poverty guidelines for 2 (monthly)</td>
<td>- 2,058.00</td>
</tr>
<tr>
<td>Amount exceeding 150% of poverty guidelines</td>
<td>$ 16.00</td>
</tr>
<tr>
<td>Standard of assistance for 2-person AU</td>
<td>$ 274.00</td>
</tr>
<tr>
<td>Less total countable income ($44.00 -amount of Mr. L.'s income which exceeds 150% of poverty guidelines)</td>
<td>- 16.00</td>
</tr>
<tr>
<td><strong>Payment amount</strong></td>
<td><strong>$ 258.00</strong></td>
</tr>
</tbody>
</table>

The two children are eligible for TANF. Though Mr. L.'s gross income exceeds 150% of poverty guidelines, his countable income does not exceed the standard of assistance for an AU of 2.

2. Deeming Income in Minor Caretaker and Ineligible Alien Cases* - Income must also be deemed to an assistance unit in the following situations. Applicable policies and procedures are explained below.

a. **Minor Caretaker Living with Senior Parent(s)** - When living together, the income of a senior parent(s) is to be deemed available to the minor caretaker's assistance unit." The senior parent's income must be considered available to the eligible child(ren) by applying the deeming procedure in Section 305.4.F.2.c. below. A stepparent's income is not deemed available to a minor caretaker's assistance unit.

*45 CFR 233.20(a)(3)(xviii)
Verify by statement from the senior parent, stepparent, or ineligible alien parent.

4. Payments for alimony and child support including wage assignments to individuals not claimed on the senior parent's, stepparent's, or ineligible alien parent's federal income tax return and not living in the household.

Verify by statement from the senior parent or the ineligible alien parent.

The amount remaining after the above deductions will be compared to the Standard of Assistance in determining the eligibility of the AU and the payment amount, if any.

Example 1: The parent of a minor caretaker applies for assistance for the minor caretaker's child. The senior parent explains that she is employed, is able to support her daughter, but does not feel that she should have to support her daughter's child. Because the child of a minor caretaker is not eligible for assistance unless the minor caretaker is also included in the AU, the senior parent must make application for both her daughter and the grandchild. TANF eligibility is determined as follows:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Income of Senior Parent</td>
<td>$1760</td>
</tr>
<tr>
<td>Less $90 Deeming Disregard</td>
<td>-90</td>
</tr>
<tr>
<td></td>
<td>$1670</td>
</tr>
<tr>
<td>Less Standard of Assistance for 1 person, Group III</td>
<td>-260</td>
</tr>
<tr>
<td>Group III Amount deemed available to AU</td>
<td>1410</td>
</tr>
<tr>
<td>Standard of Assistance for 2, Group III</td>
<td>$347</td>
</tr>
</tbody>
</table>

$1410 > $347 (SOA for 2) – AU is ineligible
d. Home Energy Assistance - Payments made directly to a household for home heating or cooling provided by suppliers of home energy, such as electric and gas companies and fuel oil dealers, must be counted as income. * When payments are received jointly by a household composed of TANF and non-TANF individuals, including SSI recipients, the TANF assistance unit's pro rata share, based on the total number of persons in the household, must be considered as income to the TANF unit.

The pro rata share of non-TANF and SSI individuals is not to be counted.** Note: Payments made through the Virginia Energy Assistance Program administered by local departments of social services are not considered home energy assistance and are disregarded per Section 305.4.A.16.

e. Public Assistance Benefits Received From Another State - It is possible for individuals who move from another state to Virginia to receive assistance from both states in the same month. However, the assistance paid by the state of prior residence must be considered in determining eligibility and benefit amount in Virginia. The amount of assistance received by the assistance unit from the former state is to be treated as unearned income in the month received.

Example 1: An applicant applies in Virginia on August 30 and receives a payment from Pennsylvania for $100 in September which covers the period of the last week of August and the first week of September. If the assistance unit is eligible for assistance in September and the SOA is $344, the $100 of unearned income is subtracted from $344, for a payment of $244.

Example 2: A Group II locality receives an application on September 2 requesting assistance for a parent and two children. The family received a TANF payment from another state on September 1 for $100 covering the period September 1-15, and the case is terminated in the former state effective September 15. The agency determines eligibility on September 10 (date of authorization). The first payment is calculated as follows:

\[
\begin{align*}
\$344 - $100 &= $244 & \text{- monthly deficit} \\
\frac{$344}{30} &= $11.47 & \text{- daily rate} \\
$11.47 \times 21 \text{ days} &= $240.87 & \text{-prorated deficit} \\
$240 \text{ payment (rounded down)}
\end{align*}
\]

f. Royalties are considered unearned income.

g. Interest earned on cash assets in excess of $10 a month, such as a bank account or certificate of deposit, is considered unearned income in the month received (available) unless anticipated to be received less often i.e., quarterly, annually, etc., in which case it may be prorated over the period earned if requested by the applicant/recipient. Guidance in Section 305.1.B.2 is applicable in determining if the income is "reasonably certain" to be received and, if so, the methods available to use to calculate the anticipated amount. Exception: Interest accrued on exempted Virginia Individual Development Accounts (VIDA) or Assets for Independence Act (AFIA) funds is not countable income.

* 45 CFR 233.20(a)(3)(xiv)
** 45 CFR 233.53(c)(2)
Establishing Quarters

The term "quarter" means the 3-calendar-month periods ending with March 31, June 30, September 30 and December 31 of any year.

Social Security credits (formerly called "quarters of coverage") are earned by working at a job or as a self-employed individual. A maximum of four credits can be earned each year.

For 1978 and later, credits are based solely on the total yearly amount of earnings. All types of earnings follow this rule. The amount of earnings needed to earn a credit increases and is different for each year. The amount of earnings needed for each credit and the amount needed for a year in order to receive four credits are listed below.

<table>
<thead>
<tr>
<th>Year</th>
<th>Quarter Minimum</th>
<th>Annual Minimum</th>
<th>Year</th>
<th>Quarter Minimum</th>
<th>Annual Minimum</th>
</tr>
</thead>
<tbody>
<tr>
<td>1978</td>
<td>$250</td>
<td>$1000</td>
<td>1999</td>
<td>$740</td>
<td>$2960</td>
</tr>
<tr>
<td>1979</td>
<td>$260</td>
<td>$1040</td>
<td>2000</td>
<td>$780</td>
<td>$3120</td>
</tr>
<tr>
<td>1980</td>
<td>$290</td>
<td>$1160</td>
<td>2001</td>
<td>$830</td>
<td>$3320</td>
</tr>
<tr>
<td>1981</td>
<td>$310</td>
<td>$1240</td>
<td>2002</td>
<td>$870</td>
<td>$3480</td>
</tr>
<tr>
<td>1982</td>
<td>$340</td>
<td>$1360</td>
<td>2003</td>
<td>$890</td>
<td>$3560</td>
</tr>
<tr>
<td>1983</td>
<td>$370</td>
<td>$1480</td>
<td>2004</td>
<td>$900</td>
<td>$3600</td>
</tr>
<tr>
<td>1984</td>
<td>$390</td>
<td>$1560</td>
<td>2005</td>
<td>$920</td>
<td>$3680</td>
</tr>
<tr>
<td>1985</td>
<td>$410</td>
<td>$1640</td>
<td>2006</td>
<td>$970</td>
<td>$3880</td>
</tr>
<tr>
<td>1986</td>
<td>$440</td>
<td>$1760</td>
<td>2007</td>
<td>$1000</td>
<td>$4000</td>
</tr>
<tr>
<td>1987</td>
<td>$460</td>
<td>$1840</td>
<td>2008</td>
<td>$1050</td>
<td>$4200</td>
</tr>
<tr>
<td>1988</td>
<td>$470</td>
<td>$1880</td>
<td>2009</td>
<td>$1090</td>
<td>$4360</td>
</tr>
<tr>
<td>1989</td>
<td>$500</td>
<td>$2000</td>
<td>2010</td>
<td>$1120</td>
<td>$4480</td>
</tr>
<tr>
<td>1990</td>
<td>$520</td>
<td>$2080</td>
<td>2011</td>
<td>$1120</td>
<td>$4480</td>
</tr>
<tr>
<td>1991</td>
<td>$540</td>
<td>$2160</td>
<td>2012</td>
<td>$1130</td>
<td>$4520</td>
</tr>
<tr>
<td>1992</td>
<td>$570</td>
<td>$2280</td>
<td>2013</td>
<td>$1160</td>
<td>$4640</td>
</tr>
<tr>
<td>1993</td>
<td>$590</td>
<td>$2360</td>
<td>2014</td>
<td>$1200</td>
<td>$4880</td>
</tr>
<tr>
<td>1994</td>
<td>$620</td>
<td>$2480</td>
<td>2015</td>
<td>$1220</td>
<td>$4880</td>
</tr>
<tr>
<td>1995</td>
<td>$630</td>
<td>$2520</td>
<td>2016</td>
<td>$1260</td>
<td>$5040</td>
</tr>
<tr>
<td>1996</td>
<td>$640</td>
<td>$2560</td>
<td>2017</td>
<td>$1300</td>
<td>$5200</td>
</tr>
<tr>
<td>1997</td>
<td>$670</td>
<td>$2680</td>
<td>2018</td>
<td>$1320</td>
<td>$5280</td>
</tr>
<tr>
<td>1998</td>
<td>$700</td>
<td>$2800</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A current year quarter may be included in the 40-quarter computation. Use the current year amount as the divisor to determine the number of quarters available.

If you need to use quarters before 1978:

- A credit was earned for each calendar quarter in which an individual was paid $50 or more in wages (including agricultural wages for 1951 - 1955);

- Four credits were earned for each taxable year in which an individual's net earnings from self-employment were $400 or more; and/or

- A credit was earned for each $100 (limited to a total of 4) of agricultural wages paid during the year for years 1955 through 1977.
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502.1 AMOUNT OF PAYMENT -

A. In the TANF Program - The amount of the monthly payment is the amount of the budgetary deficiency (the appropriate standard of assistance for the assistance unit, as specified in Section 304, less countable income, as specified in Section 305), adjusted to the next lower dollar, except as provided below:

1. Maximum Reimbursable Payment in TANF - The State Board has approved an overall maximum amount of payment established for each group of localities, as shown in Appendix 2 to Section 304.

2. Minimum Payment - If the budgetary deficiency is less than $10.00, no payment is made. However, if an assistance unit's ineligibility is based solely on this minimum payment provision, the case will be approved and retained as an active TANF case.

B. In Emergency Assistance to Needy Families with Children - The total payment which may be granted to a family under the Emergency Assistance program must not exceed $500.
502.2 PERIOD COVERED BY PAYMENT

A. The payment covers the entire calendar month of eligibility (Section 401.1.I.), except when eligibility is determined in the same month in which an application for financial assistance is received or when an individual is added to an existing case. No payment may be issued prior to the date of application. The effective date of payment is the date that initial eligibility for assistance or a change in amount of assistance begins.

No payment shall be made on an approved application for periods prior to the date of application. If the beginning date of assistance is not the first of the month, the payment for that month must be prorated. This is accomplished by dividing the amount payable by 30 days, regardless of the total number of days in such month. This amount is then multiplied by the actual days in the month including and following the date of authorization. Additionally, when an individual is added to an existing case, the individual's portion of the payment must be prorated for the first month of eligibility with the beginning date of payment established in accordance with Section 401.2.B.2.c.

Example 1: A Group II locality receives a signed application from Ms. Doe on August 18. She requested assistance for herself and two children and reports no income. The agency determined she is eligible to receive an assistance payment on August 24. The beginning date of assistance for Ms. Doe is August 18. Her first month's payment is calculated as follows:

1. 14 days = number of days for which Ms. Doe is eligible to receive assistance in August.

2. $344.00 = payment amount for full month's payment.

The method of computation is as follows:

$344.00 \div 30 = $11.46 \times 14 = $160.58

$160.00 payment (rounded down)

Example 2: A Group II locality receives an application on August 5 requesting assistance for a mother and two children. The family receives Social Security of $88.50 each month. The agency determines eligibility on August 10. The beginning date of assistance for Ms. Doe is August 5. The first payment will be computed as follows:

$344.00 - $88.50 = $255.50 full month deficit
$255.50 \div 30 = $8.51 daily rate
$8.51 \times 27 days = $229.77 prorated deficit
$229.00 payment (rounded down)
Example 3: On September 5, a timely report is received that on that date a sibling of the child(ren) in the assistance unit moved back into the home. The child being added has unearned income of $30 per month. Eligibility for the child is established on September 13. However, the payment is prorated for the period beginning September 5 (26 days), the date the required unit member entered the home.

<table>
<thead>
<tr>
<th>Current payment</th>
<th>$344</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full payment after adding child</td>
<td>$411 - $30 = $381</td>
</tr>
<tr>
<td>Child's portion to be prorated</td>
<td>$381 - $344 = $37</td>
</tr>
<tr>
<td></td>
<td>$37 ÷ 30 = $1.23</td>
</tr>
<tr>
<td></td>
<td>$1.23 x 26 days = $31.98</td>
</tr>
<tr>
<td>Supplement for September</td>
<td>$31.00 payment (rounded down)</td>
</tr>
</tbody>
</table>

If the individual's presence in the home is not reported timely, payment for the first month of eligibility will be prorated from the date the change was reported or became known to the agency. Or, if the unit failed or refused to cooperate in establishing eligibility without good cause, payment will be prorated from the date the last categorical verification is received or eligibility condition is met. (Refer to Section 401.2.B.2.c.)

B. TANF-UP - Follow guidance in 502.2 A. except when a second parent enters the home in an existing TANF case. Guidance in 401.2 B.2.c addresses handling the addition of a second parent.

C. Emergency Assistance - Payment covers specified needs related to the emergency as specified in Section 203.2. Payment is also limited to coverage of needs arising or anticipated during the 30-day period following initial authorization of Emergency Assistance.
502.3 **METHOD OF PAYMENT** - Financial assistance under the TANF program is a money payment which is made available to eligible recipients in the form of a check, direct deposit, or debit card payment.

**Note:** The following restrictions apply to the use of the TANF debit card - Recipients shall not use the TANF debit card to buy alcohol, lottery tickets, tobacco products, or sexually explicit visual materials; or, in a Virginia Alcoholic Beverage Control (ABC) store, an establishment in which para-mutual wagering or charitable gaming is conducted, or in an establishment in which tattooing or body-piercing is performed for hire, or any establishment that provides adult-oriented entertainment in which performers or other individuals connected with the business appear nude or partially nude.*

In some instances, a payment is not made directly to a client:

A. **TANF** - A "protective" vendor payment may be made under conditions specified in Section 502.7.

B. **Emergency Assistance** - A payment may be made either as a money payment to the recipient or by the vendor method to the provider of goods or services,** which ever is more practicable and advantageous to the family.

502.4 **DESIGNATED PAYEE** - The persons who may be designated as payee are as follows:

A. **Money Payment**
   1. The grantee-relative with whom the eligible child(ren) is living. The grantee-relative is ordinarily the caretaker, but may be someone other than the caretaker in some situations. Examples:
      a. A child's father receives SSI and is the grantee-relative for the TANF payment which includes the mother as needy caretaker.
      b. A 16 year old mother is the caretaker in a TANF payment, but her mother, with whom she lives, is the grantee-relative; such a grantee-relative, if needy, may be included in the assistance unit (see Section 302.7.A.).
      c. An assistance unit consists of a 22-year-old parent and her children. However, a relative also residing in the home is exercising primary responsibility for care and control of the children and, therefore, is the grantee-relative.
   2. The legal representative of the grantee-relative, if one has been appointed and has qualified.
   3. The protective payee, under conditions specified in Section 502.7.
   4. An emergency payee in an existing case, when a situation, such as sudden death, desertion, imprisonment, or commitment to a mental hospital, unexpectedly deprives the child of the care of the grantee relative. Payment to an emergency payee is for a temporary period, limited to the time necessary to make and carry out plans for the child's continuing care and, in any event, not to exceed 60 days.

* PL 112-96, 4004 (a) (12), Code of Virginia, Section 63.2-621
** 45 CRF 233.120(b)(2)(i)
B. Vendor Payment - The provider of goods and/or services.

502.5 ISSUANCE OF PAYMENT

A. Issuance Date -

1. The Monthly Money Payment - If the effective date is either the date of application or the first of the month following the month of application, payments should be authorized at the time of approval. **VACMS** will begin the process to issue the payment on the same business day the payments are authorized in **VACMS**. (Check payments will be mailed by the third business day following this action. Electronic payments will be deposited to the individual’s account on the next business day.) Subsequent ongoing monthly payments will be issued on the first of the month to cover the needs for that month.

2. Supplemental Payment - A supplemental payment is defined as a payment given in addition to the pre-authorized assistance payment as a result of a change in circumstances which increases need for a specific month.

   Supplemental payments are to be issued immediately using an effective date of the first of the month for which the payment is being issued.

3. Support Disregard Payments are issued to the custodial parent (CP) by the **VACMS** system based on support collection information received from the DCSE automated system, **APECS**. These payments are issued the week after the NCP pays the support when:

   - the non-custodial parent (NCP) is obligated to pay at least $100 per month in child and/or spousal support and the NCP has paid at least $100 in current child support or child and spousal support during the month.
   - the NCP is obligated to pay less than $100 per month in child and/or spousal support during the month and the NCP has paid the obligated amount of current child and/or spousal support for the month.

Support Disregard Payments are issued to the CP on the first day of the following month when the NCP is obligated to pay at least $100 per month in child and/or spousal support and the NCP has not paid at least $100 during the month. Note: If the NCP has not paid any support during the month, no disregard payment will be issued.

Support disregard payments that have to be reissued require the EW to cancel the payment in **VaCMS** then the DCSE worker to complete a manual adjustment in APECS. After action is completed by the EW and the DCSE workers, the replacement payment will be issued by **VaCMS** as part of an automated process.
4. **TANF Child Support Supplement Payment (304.4) – TANF Child Support**

Supplement payments are issued in the month following the month support is collected and are issued as a payment separate from the TANF payment and the disregard payment.

B. **Mailing of Checks** - All checks, including the initial money payment, are mailed via the United States Postal Service unless the recipient has a justifiable reason for requesting to appear in person at the office to pick-up the check. Such reasons should be stated by the recipient in writing and his signed and dated written request should be filed in the case record. A receipt should be secured for any checks delivered personally in the office. Proper identification should be requested if there is any doubt as to the identity of the recipient.

C. **Direct Deposit** - The process by which TANF payments are electronically posted to a client’s bank account. The client must be provided the Direct Deposit Enrollment Authorization form (032-03-672) if she requests direct deposit. The form is available at [http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi](http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi). Direct deposit procedures are found See Section 500, Appendix II, Direct Deposit Procedures.

D. **Debit Card** - The process by which TANF payments are electronically posted to a state-issued debit card. Debit card procedures are found, at Section 500, Appendix III.

E. **Emergency Payments** – Emergency payments shall be issued by local boards in emergency situations or in the event of delay or error in a state issuance of checks for payments of assistance.* The Virginia Department of Social Services is to reimburse the local board for such payments. In emergency situations which result from lost or stolen checks, the Virginia Department of Social Services shall assume liability for losses incurred by local agencies due to fraudulent acts by recipients provided the local agency referred the case to the Commonwealth Attorney who has made the decision to prosecute the case or not.

1. In the event of lost or stolen checks, a replacement check will not be issued when the payee fails to report the lost/stolen check within 45 days of issuance. A replacement check cannot be issued prior to the fourth mail delivery day and completion of the stop payment process. The Virginia Department of Social Services and the local agency must ensure that no undue delays occur in issuing replacement checks. A replacement check must be issued upon receipt of notification that the stop payment process has been completed. This includes receipt of the notarized affidavits by the Virginia Department of Social Services Fiscal Processing Unit (FPU). For a stolen check, the payee must file a police report and provide a copy of the police report or the police report number to the EW at the time of the completion of the three required affidavits. See Chapter 500, Appendix I for detailed check handling procedures. The Affidavit on Check Endorsement (032-06-118) is available at [http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi](http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi).

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* Code of Virginia, Section 63.2-323
B. Transferring Agency Responsibility

The transferring agency must complete a desk review to assure the correctness of the next payment as the transferring locality is responsible for the accuracy of this payment. The desk review entails reflecting all changes known or reported prior to the recipient's move which affect eligibility or payment and any changes occurring as a result of the recipient's move. As part of the review, the EW will verify the accuracy of the VIEW 24-month clock and the Federal 60-month clock and correct the clocks if they are inaccurate. The desk review also entails making sure that any other follow-up or special reviews have been completed. If the case is overdue for review, the transferring locality does not have to complete a renewal prior to transferring the case.

Local social services agencies may not transfer TANF cases in the following instances:

- The case has a suspension status due to temporary ineligibility for any reason (one month).
- The case has a suspension status because net support is greater than the current TANF payment.
- The TANF application is pending. The original agency must process the application. The agency must secure sufficient information to process the application unless the applicant elects to withdraw the application.

Cases that have been sanctioned for non-compliance with a VIEW requirement must be transferred, including cases that have been reopened so that payments can be issued during an appeal of the sanction.

The transferring agency must send the recipient a Notice of Transfer (032-03-0658) providing notice that their case has been transferred and listing the name, address, and telephone number for the receiving agency. If any changes during the desk review result in ineligibility or a decrease in the payment, procedures with respect to the Advance Notice of Proposed Action (032-03-018) are applicable.

The transferring locality will specify on the Case Record Transfer Form that the month following the month in which they send the form and case record to the new locality is the last month for which they will make payment. If the TANF case was receiving SNAP benefits, the transferring locality must note the impact of the transfer on the SNAP case on the Case Record Transfer form. If the case is open to services, the transferring locality will immediately notify the service worker of the client's move and new address, and upon completion of the Case Record Transfer Form, will forward a copy to the service worker. Verification of changes which could not be made for the next payment, due to the advance notice requirements, will be included in the case record and will also be specifically noted on the Case Record Transfer Form under additional remarks. The receiving locality will take the necessary action to make the change(s) and send the Advance Notice of Proposed Action immediately.
Payment adjustments necessary to conform with the standard of assistance in effect in the locality to which the recipient has moved must be made effective for the month following the recipient's move. If the adjustment results in a decrease or termination of assistance, timely notice must be given to the client. It is the responsibility of the transferring locality to give timely notice.

C. Receiving Agency Responsibility

The receiving locality is responsible for completing a desk review within 5 working days of receiving the case and acknowledging receipt to the transferring agency using the Case Record Transfer form.

1. For an on-going TANF case, the desk review must verify the following:
   - the presence of an eligible child in the home
   - new employment earnings

   Additionally, if the client is a VIEW participant, any change that might impact VIEW participation, including changes in employment, education/training, or child care, must be reviewed.

2. For an open VTP case, the EW must determine if the client continues to meet all of the eligibility requirements to continue to receive the VTP.

The receiving agency must impact these changes, affecting eligibility or payment for the first of the month following the month in which the transferring locality specifies as the last month they will make payment. This is the payment month for which the receiving locality will assume responsibility for the accuracy of the payment.

If the receiving locality determines that the case is no longer eligible, or is eligible for payments in an amount less than the prior payment, the receiving agency is responsible for sending the Advance Notice of Proposed Action (ANPA) to the client. If the case is a VTP case and the client is no longer eligible to receive the payment, the receiving agency is not required to send an ANPA. In these instances, the EW will send the client a Notice of Action stating that the VTP will end.

There are no circumstances under which it is permissible for the receiving locality to return the case to the transferring locality (other than if the recipient subsequently moving back to the original locality).
D. Handling of Appeals

1. If the desk review done by the transferring locality results in a determination of ineligibility, that locality will close the case. When the appeal is validated, the transferring locality will reinstate the payment in the original amount (if client remains in same group) or the amount appropriate to the locality in which the recipient is living. The case should then be transferred to the new locality. The Case Record Transfer form will advise the receiving agency of the appeal, and, if appropriate, the reinstatement of payments.

   When the appeal decision is final, the transferring locality will immediately notify the new locality of the appeal decision so that the appropriate action can be taken. If the case continues to be eligible, the receiving locality will be responsible for recouping any overpayments, by establishing the claim in VaCMS entering the FIPS code for the agency where the overpayment occurred. The FIPS for an agency other than the current FIPS can be entered in VaCMS on the Claim Information Screen. If the case is found to be ineligible, the transferring locality will be responsible for recovering any overpayments.

2. If the desk review done by the transferring locality results in a reduction of payment, and the client appeals the action, the appeal will be against the transferring locality, but the locality who is making the next payment will be responsible for restoring the payment to the correct level. The transfer procedure is to proceed as usual.
The Hearings Officer will send the receiving locality a copy of the appeal validation and notify them as to the original amount of assistance which must be restored. If the case continues to be eligible, the receiving locality will be responsible for recouping any overpayments. If the case is found to be ineligible, the transferring locality will be responsible for recovering any overpayments.

3. If an appeal is filed due to a decrease resulting from adjustments in the standards of assistance, the hearing will be allowed.

E. Situations Affecting the Transfer Process

1. Subsequent Moves During the Transfer Process - If the recipient moves to a third locality before the receiving locality can complete their redetermination, the redetermination does not have to be completed. The procedures outlined earlier in this section will be followed to effect this subsequent transfer.

2. Reapplications in Another Agency After Case Closings - If a former recipient of TANF reapplies in another locality, that locality may request the case record from the former locality. The former locality must comply with this request and forward the case record to the requesting locality within five working days of receipt of the request. The former locality should retain the financial and statistical forms.

3. Applicant Moving to Another Locality within the State - In the event an applicant moves to another locality, with the intent to remain there, prior to completion of the initial determination of eligibility, the sending agency must process the application. If eligibility exists, the case must be transferred following guidance under Transferring Agency Responsibilities (502.6.B.). If the application is denied, the agency will notify the applicant using the Notice of Action.

Note: There are no provisions for interstate transfer of cases. If a recipient moves to another state, assistance must be terminated and timely notice sent advising the recipient of the case action.
502.7 PROTECTIVE AND VENDOR PAYMENTS - According to federal regulations* protective and/or vendor payments are to be made in TANF cases in the following situations:

A. Need for Protective or Vendor Payment

1. The use of a protective or vendor payment is appropriate only when there is specific evidence that funds are being mismanaged in such a way that the well-being of the child(ren) is threatened, in making diversionary assistance payments, or if the caretaker who is on probation or parole fails a drug test.**

   a. Prior to making a determination of mismanagement, the following conditions must be considered:

      1) whether the family has experienced some emergency or extra-ordinary event for which it was appropriate for available funds to be spent;

      2) whether expenses for necessary bills exceed the recipient's payment and other income.

      The above-mentioned conditions or any other relevant consideration would not be just cause for making a protective or vendor payment.

   b. A protective or vendor payment should ordinarily be made only when a caretaker has persistently demonstrated an inability to manage funds in the best interest of the child(ren) and when continued receipt and management of the TANF payment would represent a threat to the health or safety of the child(ren).

      Evidence of mismanagement includes but is not limited to:

      1) continued evidence that the child(ren) is not properly fed or clothed and that expenditures for the child(ren) are made in such a way as to threaten the child's chances for healthy growth and development.

      2) persistent and deliberate failure to meet obligations for rent, food, school supplies, and other essentials.

      3) use of the TANF debit card to buy alcohol, lottery tickets, tobacco products, or sexually explicit visual materials; or, use of the TANF debit card at a Virginia Alcoholic Beverage Control (ABC) store, in an establishment in which para-mutual wagering or charitable gaming is conducted, or in an establishment in which tattooing or body-piercing is performed for hire, or in any establishment that

* 45 CFR 234.60
** Code of Virginia, Section 63.1-105.8
The protective payee should be a person who is interested in or concerned with the welfare of the grantee-relative and his child. The selection of the protective payee should be made by the grantee-relative, or with his participation and consent insofar as possible. The local department must have evidence that such protective payee has the ability and will in the best interest of the grantee-relative and his child. The agency will take appropriate action to protect recipients when it appears that problems are beyond the capacity of the protective payee to handle.

The protective payee must not be executive head of the local department of social services; the person determining financial eligibility for the family; the special investigator or member of the staff handling fiscal processes related to the recipient; the landlord; grocer, or other vendor of goods and services dealing directly with the recipient. Additionally, service workers, private agency staff, and staff of other organizations can only serve as protective payees in situations per 502.7.A.1. or 502.7.A.5.

2. In some situations, it may appear more appropriate to make certain portions of the assistance payment to a vendor, continuing to make the remainder of the payment to the family. Vendor payments may be made in TANF to appropriate persons providing goods and services, with the selection of such person being made by the recipient or with his participation and consent insofar as possible.

The local department must have evidence that vendors have the ability and will act in the best interest and protection of the grantee-relative and his child.

Authorization for vendor payments will be made according to current local agency procedures.

C. Provision of Services - In protective situations referral to social services staff must be made, to assure protection of recipients, where problems and needs for services are obviously beyond the ability of the protective payee to handle.

D. Periodic Review of Need for Protective or Vendor Payment - A review of the need for protective or vendor payments on the behalf of children and of the way in which a protective payee's responsibilities are being carried out will be made as frequently as indicated by the individual circumstances and at least every 12 months. This review can be coordinated with the eligibility renewal.

Appropriate controls are to be established by the local department to insure that cases are reviewed within the specified period. The case documentation should include an evaluation of the situation at the time of review and a statement of the basis for the decision at that time to continue or to terminate protective or vendor payments.
503.5 REPAYMENT PROCEDURES - The local department must notify the Division of Finance of the TANF/VIEW overpayment by entering the overpayment information into VaCMS.

If the overpayment was caused by agency error, it must be entered into both VaCMS and the Locality Automated System for Expenditure Reimbursement (LASER). The Division of Finance will deduct the amount from the next reimbursement made to the locality.

When an overpayment is entered into VaCMS, the originating FIPS field will default to the FIPS of the worker initiating the claim. The originating locality in which the overpayment occurred is responsible for entering the claim.

503.6 SUSPENSION OF COLLECTION FOR CERTAIN OVERPAYMENTS – The collection for certain overpayments to individuals no longer receiving assistance may be suspended. In the case of temporary suspension of overpayments, collection efforts will be resumed at the point the individual again begins to receive assistance.

A. Permanent Suspension of Collection for Overpayments less than $125 - All overpayments to individuals no longer receiving assistance which are less than $125 are to be permanently suspended after the local agency has: 1) notified the individual, or attempted to notify the individual if her whereabouts are unknown, in writing, that an overpayment has occurred which must be repaid; and 2) the individual fails to respond or refuses to cooperate with the request for repayment. No further action to recover the overpayment is to be taken. The case record must be documented. (Note: The agency must allow at least 10 days from date of mailing for the individual to respond to the request for repayment prior to permanently suspending recovery of the overpayment.)

B. Temporary Suspension of Collection for Overpayments of $125 or More - In situations where the outstanding overpayment of TANF/VIEW to an individual no longer receiving assistance is $125, or more, the local agency may temporarily suspend collection of the overpayment after reasonable efforts to recover the overpayment have been taken and it is determined that further efforts would not be cost-effective. The agency must notify the individual that an overpayment, which must be repaid, has occurred by sending a letter requesting repayment to the individual's last known address. In order to demonstrate reasonable efforts, the agency must take the actions listed below. The actions must be taken in the following order; however, the agency may evaluate whether further efforts would be cost-effective after any one of the actions to collect the overpayment is unsuccessful.

1. Attempt to locate the individual. If the individual's present whereabouts are unknown and attempts to locate the individual has been unsuccessful, the case record must contain documentation of attempts made to locate the individual, such as mail returned to the local agency;

2. Determine that the former recipient has no means with which to repay the overpayment. The case record must contain documentation of evidence used by the agency to determine the individual has no income or cash reserves;
Example: In June the worker discovers that an eligible child left the home on August 5 of the previous year. The child should have been reported no later than September 10. Overpayments must be calculated beginning with the October payment. The overpayment amount is the difference between the payment received each month and the correct payment for the actual number of eligible members living in the household.

G. Overpayments Resulting from Incorrect Composition of the Assistance Unit - When it is discovered that an individual required to be in the assistance unit is living in the home, it must be determined if an overpayment occurred. This determination is to be made as follows:

1. Redetermine eligibility for each month beginning with the month following the month the individual entered the home or was required to be in the assistance unit, including the individual's needs, and actual income. Any resulting overpayments must be recouped/recovered.

2. If during the period in which the individual was required to be in the unit he had no income or his needs exceeded his income, an under-payment has occurred only for the months in which all categorical requirements were met and the conditions of eligibility are retroactively deemed to be met per Section 401.2.B.2.c. (See Section 503.9).

H. Determining the amount of the overpayment when support has been paid for a child in the TANF assistance unit.

1. The agency must determine the amount of support paid for children in the AU using the report, TANF Cases Current Collected Support Report.

2. Current monthly support paid to DCSE not redirected to the recipient must be subtracted from the total TANF payment issued for the month:

Example: A $274 TANF payment was made for the month of April. The amount subject to recoupment is $274 (Group II, AU = 2), minus total current support collected by DCSE in April (the month the overpayment occurred), which was $150; therefore, the April overpayment is $124.

I. Determining Overpayments Resulting from Redirected Support Paid to the Client

1. An overpayment must be determined when a TANF recipient who was receiving support at the time of TANF application fails to redirect following TANF case approval.

2. An overpayment will not exist when DCSE returns to the client support which the recipient has redirected to DCSE.

3. An overpayment amount will be determined for new support not redirected to DCSE only when the support amount will cause the total income for the AU to exceed 130% of the Federal Poverty Level.
503.8 NOTIFICATION, RECOUPMENT AND RECOVERY OF OVERPAYMENTS - The local department must promptly recoup or recover any overpayments including overpayments resulting from assistance paid pending hearing decisions. Repayment by either a former or current recipient of the overpayment can occur through recoupment or recovery or both. The agency should discuss voluntary repayment with the client prior to initiating a recoupment.

A. Notification to the assistance unit must be given before recoupment or recovery of an overpayment begins. After calculating the total amount of the overpayment, the local department of social services must send the Request for Repayment of TANF Payments and/or Payments for VIEW Services’ form. The form is available in the Forms Drawer on the SPARK page. The first page of the form displays the period over which the overpayment occurred and the total amount of the overpayment. The second page allows the individual to select the method of repayment.

A copy of the form must be sent to the TANF recipient or payee or previous TANF recipient or payee and a signed copy filed in the case record. The signed form must remain in the case record until the overpayment has been satisfied. Note: If the recipient or payee fails to sign the form, the unsigned copy must be retained in the case record.

When the signed form is not returned, if 30 days have passed since the initial demand letter was sent on an active TANF case or on a case receiving a VIEW Transitional Payment (VTP), recoupment should begin the following month. When the TANF case closes prior to the month in which recoupment was scheduled to begin and the recipient or payee later reapplies for TANF assistance, she will be advised that recoupment will begin in the first month that the case is eligible for assistance.

B. Recoupment consists of withholding all or part of the assistance payment. An overpayment made to a current recipient or payee must be recouped by reducing the amount of any future assistance payable to any assistance unit of which the individual is a member or payee.

1. When the recipient or payee has no cash reserve or countable income (payment equals the Standard of Assistance for the AU), 10% of the assistance payment may be recouped until the overpayment has been repaid. Under the Repayment Agreement Section on the Claim Information Screen, enter the amount that equals 10% in the “Amount Agreed To Pay” field or the percentage amount in the percentage field.

Example: TANF Payment of $347; Recoup 10% ($34.70); amount of recoupment = ($34.70); New payment amount is $312.30.

2. In situations where a recipient (but not a payee) has earned income, unearned income, or any combination thereof, in addition to the assistance payment, part or all of the assistance payment may be recouped as long as the assistance unit retains at least 90 percent of the standard of assistance when the total gross income and the amount of the current payment are considered.

To calculate the client’s ability to repay the overpayment, the worker will follow steps a - d below:

a. Determine the amount of the overpayment.

*45 CFR 233.20(a)(13)(i)
*§63.2 - 512
b. Combine all gross income including any income that would be disregarded for TANF purposes (such as SSI) and the current payment to determine the amount of income available to the AU.

c. Determine 90% of the standard of assistance for a family of equal size in the same locality. This represents the amount of money the client must have available.

d. Subtract the amount in step c from the amount in step b. The difference represents the amount the client is able to repay on the overpayment.

Note: When the additional income or the TANF payment amount is either increased or reduced, the recoupment amount is to be recalculated.

Example 1:
Step a: Determine the amount of the overpayment.
Step b: Available income
   ($344 gross wages + $274 payment amount) $618.00
Step c: Minimum amount AU retains ($274 X 90%) - $246.60
Step d: Maximum amount that can be paid = $371.40

The EW will recoup the entire payment amount of $274.

If the amount that can be paid is equal to or greater than the Standard of Assistance (payment amount), the amount to be recouped will be equal to the payment.

Example 2:
Step a: Determine the amount of the overpayment.
Step b: Available income
   ($50.00 gross wages + $344 payment amount) $394.00
Step c: Minimum AU retains ($344 X 90%) - $309.60
Step d: Maximum amount that can be paid = $ 84.40

The EW will recoup $84.40 from the payment.

If the amount that can be paid is less than the Standard of Assistance (payment amount), the amount to be recouped will be equal to the amount that can be paid.

The monthly assistance payment will be reduced according to B (1) and (2) above until such time as the overpayment has been repaid. If, however, income and/or cash reserves have been counted in establishing the client's ability to repay, recovery of the overpayment may also be accomplished through voluntary repayment. This option is to be offered to the client prior to initiating a recoupment.

If recoupment reduces the payment to zero, the case will be retained as TANF eligible with no money payment.

C. Recovery consists of making arrangements with a former or current recipient or payee for voluntary repayment of all or a portion of the overpayment even though the client may no longer be eligible for assistance. If a former recipient or payee fails to make the voluntary repayment, the agency must initiate action under Section 63.2-512, Code of Virginia, to collect the amount as a debt.
Failure or refusal of a current recipient or payee to voluntarily repay the overpayment will result in court action only when recoupment is not possible because the payment amount is less than $10.00.

D. Responsibility for Outstanding Overpayments - Outstanding overpayments must be recovered or recouped when a former recipient or payee reapplies for assistance and is found eligible. The schedule of repayment is to be based on the current situation of the client.

The allowable amount of recoupment or recovery of the overpayment from the client is limited to the total amount of the overpayments.

1. When TANF payments or VIEW supportive services are overpaid, the caretaker(s) included in the assistance unit at the time the overpayment occurred shall be responsible for repayment of the overpayment. If there is no parent or non-parent caretaker included in the assistance unit, the payee for the case at the time the overpayment occurred shall be responsible for the overpayment. Individuals who were children on the case at the time of the overpayment are not responsible for repaying the overpayment either while they are children or when they become adults. A minor parent is not liable for the overpayment unless she is living with someone who is standing in loco parentis.

2. Recoupment process:
   a. Identify the liable individual(s) in VaCMS by selecting the liable person(s) from the “Client Name” drop-down on the Liable Persons Screen.
   b. For payee cases, select the name of the payee.
   c. Minors are not responsible for overpayments unless included as a minor parent described in (1) above.

Example 1: Ms. Thomas loses her job and requests assistance for her son, her daughter, and her daughter’s baby. She returns to work one month after the case is approved but does not report her income (which exceeds 130% of the federal poverty level) until her next renewal. The agency establishes an overpayment for Ms. Thomas. The other three persons, including her daughter who is a minor caretaker, are children on the case and are not liable for the overpayment.

Example 2: Mrs. Allen is the payee on a case for her teenage grandsons. She is not needy and is not included in the payment. An overpayment occurs when the children move out to live with their father and Mrs. Allen does not report the change. The agency establishes the claim in VaCMS, making Mrs. Allen the liable person by selecting her name from the “Client Name” drop-down on the Liable Persons Screen before closing the case. Mrs. Allen agrees to voluntary repayment and begins sending the agency a small check each month. After three months, Mrs. Allen refuses to make any more payments. The agency begins to initiate legal action to collect the balance of the overpayment as a debt. (See 503.8C).
E. Prompt Correction of Overpayments - An overpayment must be recouped or recovered as soon as administratively feasible. One of the following actions must have occurred by the end of the calendar quarter following the quarter in which the overpayment was first identified.

1. Repayment must have already been accomplished.

2. Action to locate and/or recover from a former recipient must have been initiated.

3. Repayment from current recipient occurring either through recoupment or voluntary repayment.

If instances occur where none of the three actions have been taken by the time stated above, the overpayment must still be recouped or recovered.

If prosecution for an IPV occurs, then the amount of court ordered restitution will be the amount of the overpayment to be recovered from that case.

F. Determining Intentional Program Violations (IPV) - A client error may or may not be an IPV, which exists when there is evidence clearly establishing that the recipient willfully withheld information or gave false information affecting his eligibility or the amount of assistance. (See Section 102 for further procedures.)

G. Reporting Overpayments - In instances where the assistance payment is reduced or suspended to recoup an overpayment previously repaid to the Department of Social Services, or cash amounts are received as recovery of money previously repaid to the Department of Social Services from local funds, an adjustment must be reported on LASER in order that the locality can recover local funds paid to the State. The amount of the deduction made from the current payment, the amount of the suspended payment, or the cash amount received as recovery should be shown as an addition to expenditures in LASER.

H. Retention of Overpayment Records - All overpayment records must be maintained for three years after the claim is paid, administratively closed, or written off. (See 100.4 for information about the Library of Virginia schedule for retention of specific types of information). All documentation pertinent to the overpayment should be attached to the screen print of the overpayment and maintained in the case file. The file should contain the following screen prints: the “Liable Person” screen, which will include the individuals liable for the claim and the “Benefits Adjustment” screen showing the calculation.

* 45 CFR 233.20(a)(13)(ii)
503.9  **CORRECTION OF PRIOR UNDERPAYMENTS** - The agency is to correct any underpayment to any person who is currently in need, regardless of whether they are current recipients. (See 305.1.D.2.C.) The local agency shall notify a case not currently receiving assistance, in writing, of requirement to demonstrate their current need (that they would currently be eligible for TANF if they applied) in order to receive underpaid payments. Additionally, when the agency discovers that a household was incorrectly denied/terminated, the former applicant/recipient must provide verification that the assistance unit was actually eligible for each month subsequent to the incorrect denial/termination. An underpayment will only be calculated for each month such verification is provided.

When it is learned that an underpayment has been made as a result of any (client or agency) error, there must be correction of the prior underpayment by repayment to the client as follows:

1. The total allowable repayment to the client shall be the amount of the underpayments.

2. Retroactive repayment of prior underpayments shall be made either in one lump sum payment or by monthly installment payments to the client until the full allowable repayment is made. The method of payment is to be selected by the local agency.

3. The retroactive corrective payment shall not be considered as income in determining need and the amount of the continuing assistance payment for which the recipient is eligible in the month in which it is paid or the next following month. The TANF maximum payment may be exceeded by the amount of such corrective payment.

The agency must also correct outstanding underpayments to former recipients who have reapplied and are found to be eligible.

The above instructions are not applicable when a corrective payment is made as a result of an appeal to the State Board or a court decision. In such cases, the terms of the State Board decision or court order apply.

At the time a payment is made or increased for the purpose of correcting a prior underpayment, the recipient must be informed in writing of the purpose of this special allowance; the amount and the period for which it will be made; and the fact that it will automatically terminate at the end of the specified period. If this is done and the recipient, at the time the special allowance is terminated, appeals within the advance notice period, assistance need not be continued in the original amount.

503.10  **OFFSETTING OVERPAYMENTS AND UNDERPAYMENTS** - In cases which have both an underpayment and overpayment, the agency will offset one against the other in correcting the payment.
CHECK HANDLING INFORMATION AND PROCEDURES

This appendix explains check handling procedures for cancellation or re-issuance of returned TANF checks and VTP checks, replacement of lost/stolen or mutilated checks, reimbursement of localities for locally issued checks, and obtaining a copy of a cashed check. Note: The VaCMS transactions below indicate how to complete fields related to check handling procedures. Routine procedures for completing screens and transmitting to view the next screen have been omitted.

A. Glossary

1. **VaCMS - Virginia Case Management System**

2. Cancelled Check - A cashable check that is returned to the State and redeposited in a State account. A check cannot be cancelled if it cannot be cashed, i.e., if there is a stop payment against the check, if the check has already been cashed or if the check is mutilated. When a check is cancelled, any recoupment is null.

3. EW - The eligibility worker or other local department of social services staff with check handling responsibility.

4. Forgery - A payee states that the signature on the back of a State check is not hers/his. The account of the first cashier is debited, and the money is deposited into a special State account.

5. FPU - Fiscal Processing Unit. The FPU is the unit within the Virginia Department of Social Services, Division of Finance, which processes returned/undelivered checks, lost/stolen checks, cancelled, and mutilated TANF checks.

6. Fraud - The payee signs affidavits stating she did not cash the check, but the payee has cashed or cashes the check or receives payment of the check. The local agency must get local or state money back from the payee if any was given to the payee.

7. LASER - The Locality Automated System for Expenditure Reimbursement.

8. LDSS - The local department of social services.

9. Mutilated Check - A check is mutilated if it cannot be cashed, e.g., the magnetic ink has been torn, the amount or payee has been tampered with, or if one-half of the check cannot be recovered. If less than one-half of the check can be recovered, stop payment procedures must be followed.

10. **Issuance Summary/Search screen** - A history in VaCMS of the payments received by a case.

11. Replacement Check - A State check that is written to the payee to replace a check that is mutilated or has a stop payment placed against it.

12. Specific Payment Inquiry - Information specific to an individual payment on the Payment History.
13. Stop Payment - An action placed against a check so that it will not be honored, i.e., in the case of a lost/stolen or mutilated check. The check is stopped, not the payment to the client. Recoupment is not affected. A check generated through VaCMS should be issued to the payee.

14. VIEW Transitional Payment (VTP) - An incentive payment provided to prior VIEW participants after the TANF case has closed.

B. TANF Checks - Schedules and Mailing Information

1. Mailing - TANF and VTP checks are mailed by the State Treasurer's Office. The check date is the mailing date.

2. Monthly Cycle - Ongoing State-generated TANF and VTP checks to be issued/mailed on the first of each month.

3. Daily Cycle - Initial TANF, supplemental and VTP checks generated by the State.

C. Undelivered Check Procedures

1. Check Returned to VDSS by the Post Office

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>FPU</td>
<td>As soon as a check is returned to VDSS, FPU will enter the check status code of “Returned to FPU” (undelivered) in VaCMS on the Check/Direct Deposit Action screen.</td>
</tr>
</tbody>
</table>

FPU and LDSS • A task and reminder will be generated to the LDSS worker that a check was returned to the FPU.

Note: If the LDSS worker does not complete the Check/Deposit Action by selecting an Action Requested within 10 days, VaCMS generates a task and reminder to notify FPU worker to cancel the check.
a. To re-mail the undelivered check within the 10-day time frame:

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>LDSS</td>
<td>• Upon receipt of the task and reminder, from the Left Navigation, the LDSS worker will access the Maintain Check screen by selecting Benefit Issuance → Maintain Checks. Search by check number or other appropriated fields. The Check/Direct Deposit Action screen displays. Select the appropriate Action Requested from the drop down menu: Remail – New Address, Remail - Same Address or Cancel. If the action requested is Remail – New Address, a comment box is enabled. Enter the new address in the comment box for the Home Office FPU worker to reference. Click Continue.</td>
</tr>
</tbody>
</table>

Notes: 1. VaCMS generates a task and reminder to notify the FPU worker of the action requested. 2. When applicable, remember to change the address in Data Collection for an open case or from the Case – Search/Summary screen for a closed case.

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>FPU</td>
<td>• FPU will select Benefit Issuance and then Maintain Checks. Search by Check Number or other appropriate fields. Click the pencil icon to edit a specific issuance. The Finance Check/Direct Deposit Action screen displays. Update the Finance Status based on Action Requested: Re-mailed - New Address, Re-mailed - Same Address, or Cancelled. Notes: 1. VaCMS will dispose of the task and reminder that notified the FPU worker of the action requested. 2. If the Cancelled status is selected, the VaCMS generates a task and reminder to notify the LDSS worker that the check was cancelled by the FPU. Upon receipt of the task and reminder, the LDSS worker should follow the next steps.</td>
</tr>
</tbody>
</table>

b. To cancel the undelivered check within the 10-day time frame:

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>LDSS</td>
<td>• From the Left Navigation → Benefit Issuance → Maintain Checks → Search by Check Number or other appropriate fields. Click the pencil icon to edit the specific Issuance. The Check/Direct Deposit Action screen displays. The Benefit Re-Issuance section is enabled and defaulted to prior check information. Update to a different Name and Address as appropriate. Enter Comments as appropriate. Click Continue.</td>
</tr>
</tbody>
</table>

Notes: 1. If Re-Issuance is Yes, Check/Warrant is generated overnight with Issuance Type of Replacement. Entry will display in Benefit Details and Maintain Checks the following morning. 2. When applicable, remember to change the address in Data Collection for an open case or from the Case – Search/Summary screen for a closed case.
2. **State Check Returned to LDSS**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>LDSS</td>
<td>• If a check was mailed to the incorrect address and is returned to the local agency, the local agency should re-mail the check to the correct address. If the check cannot be mailed to the correct address, the local agency should send the check to Home Office FPU. <strong>Action in the Maintain Checks link is not required.</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> 1. Do not write VOID on the check. 2. When applicable, remember to change the address in Data Collection for an open case or from the Case – Search/Summary screen for a closed case.</td>
</tr>
<tr>
<td>FPU</td>
<td>• FPU cancels the check and the cancellation can be seen in <strong>Maintain Checks with check status “Cancelled”.</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> When applicable, remember to change the address in Data Collection for an open case or from the Case – Search Summary page for closed cases.</td>
</tr>
</tbody>
</table>

3. **Check Reported Undelivered by Payee**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>LDSS</td>
<td>• When the payee is a vendor who reports non-receipt of a Diversionary Assistance check, the EW will contact the Fiscal Processing Unit at Home Office to confirm the status of the check prior to taking any steps to reissue the check.</td>
</tr>
<tr>
<td></td>
<td>• When the payee reports non-receipt of the check, the EW determines if the payee has moved since the last check was received.</td>
</tr>
<tr>
<td></td>
<td>• If the payee has moved, the payee should inquire at the former address about the delivery of the check there. The EW must immediately update the address section in Data Collection and select the appropriate Address Type (Physical or Mailing) to ensure that future checks are sent to the new address.</td>
</tr>
<tr>
<td></td>
<td>• The EW must verify that the check in question was issued. To do this, access the <strong>VaCMS Issuance Summary/Search screen.</strong> <strong>Note:</strong> The EW must search Issuance Summary/Search screen in VaCMS daily.</td>
</tr>
<tr>
<td></td>
<td>• If VaCMS shows a check was processed, follow the lost/stolen procedures. If VaCMS shows anything other than processed, follow the procedures for that status.</td>
</tr>
</tbody>
</table>
4. **Check Reported Lost/Stolen/Mutilated by Payee**

   a. **The payee reports non-receipt of a TANF check:**

      A payee must report that a check has been lost or stolen within 45 days of issuance in order to be eligible for a replacement check. Additionally, the payee must complete three affidavits (which will include a Lost Check Report or Stolen Check Report forms) within 45 days of issuance of the original check. In the case of a Stolen Check Report, the payee must also file a police report and provide the LDSS with a copy of the report, or the report number, (within 45 days of issuance of the original check) in order to receive a replacement check.

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>LDSS</td>
<td>• The pay FIPS reflected on the SNAP/TANF Detail Screen in VaCMS is the LDSS that issued the check, regardless of the present locality of residence. The original locality will initiate the stop payment action, and issue the replacement check.</td>
</tr>
<tr>
<td></td>
<td>• Before initiating an action, review the Issuance Summary/Search screen to ensure the check has not been cancelled, undelivered, re-issued, mutilated or stopped.</td>
</tr>
<tr>
<td></td>
<td>• From the Left Navigation → Benefit Issuance → Maintain Checks. If FPU has received the check, it will display on the Maintain Checks screen. If the check does not display go to step b.</td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> A FEP recipient check must be a State-issued check. VaCMS does not have the capability to reimburse for local checks.</td>
</tr>
</tbody>
</table>

   b. **Obtain three signed affidavits and the police report or police report number:**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
</table>
| LDSS              | • If a check was issued, have the payee complete and sign three State affidavits (Form 032-06-0118) and two Wells Fargo Bank forms. The entire affidavit (including the Lost/Stolen Check Report form) must be completed in full. The FW should allow the payee to complete (fill out) as much of the report as possible. The EW must ensure that all
questions are answered. The EW must also ensure that the payee is aware that by signing the affidavits/reports, he is agreeing to cooperate with the Department of Social Services and any law enforcement agencies in the investigation and/or prosecution of any person(s) who may be responsible.

- If the payee is reporting the check as stolen, the payee must agree to file a police report and provide a copy of the report, or the report number, within 45 days of issuance of the original check to the LDSS in order to be eligible to receive a replacement check.

- The EW should contact FPU to determine if a copy of the cashed check can be faxed to the LDSS while the payee is in the office to complete the affidavits. If not, schedule an appointment for the payee to return to the LDSS within 48 hours of receipt of the Lost/Stolen Check Report and the Wells Fargo Bank form. The payee must return to the LDSS to review the signature on the check prior to the LDSS issuing a replacement check to see if he recognize the signature.

- The affidavits must be notarized and stamped with the notary seal. (See Section D for mutilated check procedures.)

- If the affidavits are incomplete, incorrect, or are photocopies, FPU will return them to the LDSS for correction. FPU will not make corrections to the forms. All three affidavits must be original copies with an original signature.

Note: The payee for the check is the only person allowed to sign the affidavits. If the payee and recipient are two different people, be sure the payee is signing the affidavits.

- Send two of the affidavits (which will include the Lost Check Report or Stolen Check Report containing the police report number to the FPU in a large envelope. The affidavits forms must not be folded. Send the affidavits via overnight pouch to:

**FPU –TANF Affidavits**
VDSS Home Office
Division of Finance
Fiscal Processing Unit

- File the third affidavit (which will include the Lost Check Report or Stolen Check Report with police report/ police report number) in the eligibility record.

- Furnish the police report to the Fraud Unit upon request.
c. Enter stop payment request in VaCMS:

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
</table>
| LDSS              | • After the fourth mail delivery day from the check date (same as the mail date), if the payee still has not received the check and the check has not been reported by the FPU as undelivered, initiate action to stop payment.  
|                   | • Note: If the payee reports that the check has been lost or stolen after receipt, the stop payment procedures still apply.  
|                   | • To stop payment, from the Left Navigation → Benefit Issuance → Maintain Checks → Search by Check Number or other appropriate fields. Click the pencil icon to edit the specific Issuance. The Check/Direct Deposit Action screen displays. Enter Action Requested from the dropdown menu: Stop Payment – Check Lost, Stop Payment – Check Stolen, or Stop Payment – Check Mutilated. Enter date all required documents are submitted, click Save and Continue.  
|                   | • Note: VaCMS generates a task and reminder to notify the FPU worker of the action requested.  
|                   | • Under no circumstances should a LDSS request a stop payment without having three completed affidavits with original signatures. A LDSS that requests a stop payment without first obtaining affidavits risks non-reimbursement.  
|                   | In order to be reimbursed, local checks are to be issued only in emergencies and with the approval of the TANF Program Manager.  

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
</table>
| FPU               | • FPU receives a task and reminder of the EW’s actions.  
|                   | • Upon receipt of two correctly completed affidavits which will include the Lost Check Report or Stolen Check Report, the stop payment request through VaCMS, FPU takes action to stop payment on the check. From the Left Navigation, the FPU Worker selects Benefit Issuance → Maintain Checks. The FPU worker will search by Check Number or other appropriate fields. Click the pencil icon to edit specific issuance. The Check/Direct Deposit Action screen displays. This screen is read only for the FPU worker. Click Continue to access the Finance Check/Direct Deposit Status screen. Update Finance Status to: Payment Stopped – Affidavit Received/Check Cashed, Payment Stopped – Affidavit Received/Check Not Cashed, or Payment Stopped – Other Certified Documents Received. Click Save.  

Notes: 1. VaCMS disposes the task and reminder that notified the FPU worker of the action requested. 2. VaCMS generates a task and reminder to notify the LDSS worker that the payment was stopped for the check by the FPU worker.

D. For Mutilated Checks – Workers are to use the same instructions as the Lost or Stolen Checks instructions to replace checks that cannot be cashed, i.e. the check may have been tampered with, the check or the magnetic strip is torn, or less than ½ of the check is recovered. Do not cancel a mutilated check. A signed affidavit is not needed to replace a mutilated check. You may not need a police report for a mutilated check unless it was mutilated on purpose.
### E. Lifting a Stop Payment Order

<table>
<thead>
<tr>
<th>Responsible Part</th>
<th>Action</th>
</tr>
</thead>
</table>
| LDSS             | - Contact the Fiscal Processing Unit and request that the stop payment be lifted.  
|                  | - If the stop payment can be lifted and another state check has not been issued, the LDSS may inform the payee she may cash the original check.  
|                  | - Local checks are to be issued only in an emergency and with the prior approval of the TANF Program Manager in order to be reimbursed. |

### F. Check Cashed After Stop Payment Placed Against Check

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>FPU</td>
<td>- The bank voids the stop payment request if the check has been cashed on the same day. If the check is cashed the next day and the stop payment is in place, the cashier must request replacement from the recipient who received the cash.</td>
</tr>
</tbody>
</table>

### G. Check Cashed Before Stop Payment Request

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>FPU</td>
<td>- The bank is checked for the status of the check. Fraud action will be initiated by FPU.</td>
</tr>
<tr>
<td>LDSS</td>
<td>- The locality will issue the replacement check following procedures in C.4.c. above.</td>
</tr>
</tbody>
</table>
H. Procedure to Ensure Reimbursement for a Locally Issued Check - VaCMS does not support reimbursement of locally issued checks. In order to be reimbursed, local checks are to be issued only with the prior approval of the TANF Program Manager.

I. How to request a copy of a cashed check

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
</table>
| LDSS              | • The LDSS sends a written request for a copy of a cashed check to the FPU. The letter must include the payee name and address, case number, warrant number, date of check and amount or send a printed copy of the Issuance Summary/Search screen.  
• Note on the request if a certified copy is needed for court and include the court date. |
| FPU               | • Upon receipt of the request, the FPU will send a copy of the check to the LDSS. |
COMMONWEALTH of VIRGINIA
Department of Social Services

Affidavit on Check Endorsement

Locality: ___________________________ VaCMS Case No: ____________________________
Category: ___________________________ Worker Name/No.: ____________________________

I hereby state that the Commonwealth of Virginia, Department of Social Services Assistance Check
No. ___________, dated ________________, in the amount of $______________, made payable to me,
__________________________________________, by the Treasurer of Virginia, was not endorsed by me. I also state that I did
not authorize any other person to endorse my name thereon. I further state that I have not received payment or
payment of the said check directly or indirectly in any way, shape or manner, nor authorized anyone to receive
payment of the said check.

I understand and agree to notify and return to the Department of Social Services the original check in the event I
receive it after signing this statement.

I agree by signing this affidavit, to cooperate with the Department of Social Services and any law enforcement
agencies in the investigation and/or prosecution of any person(s) who may be responsible. If I am reporting the
said check stolen, I agree to file a police report and provide a copy of the report, or the report number, within 45
days of the original check issuance to the Department of Social Services in order to receive a replacement check.

I have read the above statement, or it has been read to me, and I state this information is true and correct. I
understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by
fines and/or imprisonment.

_________________________________________       _________________________________
Signature of Payee/Client                        Date

SSN: ___________________________ Address: _______________________________________

_________________________________________       __________________________________
Subscribed and sworn to me, a Notary Public for the City/County of ____________________________ in the State
of Virginia, this ___________ day of ______________, 20 ___________.
My commission expires ___________, 20 ___________. Notary Public

032-06-0118-11-eng (10/18)
Page Intentionally Left Blank. Wells Fargo Bank Form Removed.
AFFIDAVIT ON CHECK ENDORSEMENT

FORM NUMBER- 032-06-0118-11-eng (10/18)

PURPOSE OF FORM – This is a three-part form which includes sections for the Affidavit on Check Endorsement, Lost or Stolen Check Report and Wells Fargo Bank. These forms are to be completed when requesting a stop payment. The form should be completed by the payee (as much as possible) to allow the Fraud Investigator to compare the handwriting on the form to the payee’s signature.

USE OF FORM – To be used by the local social services agency when a check is reported lost or stolen to secure the payee’s statement that he or she did not endorse the check.

NUMBER OF COPIES – Three original signed affidavits.

DISPOSITION – Submit two original signed affidavits (which will include the Lost Check Report or Stolen Check Report) to the VDSS Home Office, Division of Finance, Fiscal Processing Unit (FPU). File the third original signed affidavit (which will include the Lost Check Report or Stolen Check Report in the eligibility record). Additionally, when a copy of the police report is provided for a Stolen Check Report, file the report in the eligibility record and give a copy to fraud unit in the local agency upon request.

INSTRUCTIONS FOR PREPARATION OF AFFIDAVIT ON CHECK ENDORSEMENT

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Locality</td>
<td>Locality that listed check on warrant register</td>
</tr>
<tr>
<td>Category</td>
<td>Type of check issued</td>
</tr>
<tr>
<td>VaCMS Case No.</td>
<td>Complete case number</td>
</tr>
<tr>
<td>Worker Name and #</td>
<td>Complete worker’s name and number</td>
</tr>
<tr>
<td>Check No.</td>
<td>Complete 8-digit check (warrant) number</td>
</tr>
<tr>
<td>Dated</td>
<td>Show date on the check</td>
</tr>
<tr>
<td>$</td>
<td>Entire amount of the check, including cents</td>
</tr>
<tr>
<td>Payable to</td>
<td>Payee name</td>
</tr>
<tr>
<td>Signature</td>
<td>Only PAYEE signature</td>
</tr>
<tr>
<td>Date</td>
<td>Date the affidavits are signed</td>
</tr>
<tr>
<td>SSN</td>
<td>Payee’s social security number</td>
</tr>
<tr>
<td>Address</td>
<td>Address as shown on the warrant register. Must have City, State and Zip</td>
</tr>
<tr>
<td>Notary</td>
<td>Blanks must be completed with Notary information, signed by Notary, and imprinted with the Notary seal.</td>
</tr>
</tbody>
</table>

TANF Transmittal 65
<table>
<thead>
<tr>
<th>What Relationship</th>
<th>If YES box is checked, answer how suspect is related to payee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moved in last 60 days</td>
<td>Check YES or NO</td>
</tr>
<tr>
<td>Police report number</td>
<td>Number given to police report by local police department</td>
</tr>
<tr>
<td></td>
<td>MUST BE COMPLETED</td>
</tr>
<tr>
<td>Sign name</td>
<td>10 original payee signatures</td>
</tr>
</tbody>
</table>

**Instructions For Preparation Of Lost Check Report**

<table>
<thead>
<tr>
<th>Date of Report</th>
<th>Date affidavit is signed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payee</td>
<td>Name of person check is made payable to</td>
</tr>
<tr>
<td>Address of Payee</td>
<td>Address as shown on warrant register, including City, State</td>
</tr>
<tr>
<td></td>
<td>and ZIP</td>
</tr>
<tr>
<td>Home Phone</td>
<td>Payee’s home telephone number</td>
</tr>
<tr>
<td>Work Phone</td>
<td>Payee’s work telephone number</td>
</tr>
<tr>
<td>Cell Phone</td>
<td>Payee’s cell phone number</td>
</tr>
<tr>
<td>Check Number</td>
<td>Complete 8 digit check (warrant) number</td>
</tr>
<tr>
<td>Amount</td>
<td>Entire amount of check, including cents</td>
</tr>
<tr>
<td>Date of Check</td>
<td>Date on check</td>
</tr>
<tr>
<td>Check Received</td>
<td>Check YES or NO</td>
</tr>
<tr>
<td>Where did the loss occur</td>
<td>Location of where check was lost</td>
</tr>
<tr>
<td>Other ID lost/missing</td>
<td>Check YES or NO</td>
</tr>
<tr>
<td>If so, what type</td>
<td>List each piece of lost identification</td>
</tr>
<tr>
<td>Sign name</td>
<td>10 original payee signatures</td>
</tr>
</tbody>
</table>
INSTRUCTIONS FOR PREPARATION OF AFFIDAVIT OF CHECK FRAUD BY PAYEE FORGED ENDORSEMENT

Endorsement Forged
The payee should check the box if check was not signed or authorized by the payee

Check No.
Enter the complete 8-digit check (warrant) number

Date
Enter the date on the check

Amount
Enter the entire amount of the check, including cents

Made Payable to
Enter the payee name

Payee Name and Title/Signature
Enter the payee printed name then signature

Date
Enter the date the affidavit is signed

Address
Enter the current address (as shown in VaCMS)
City, State and Zip Code

Phone Number
Enter payee telephone number

Notary
Blanks must be completed with Notary information, signed by Notary, and imprinted with the Notary seal
DIRECT DEPOSIT INFORMATION AND PROCEDURES

This appendix explains procedures for direct deposit cases including mailing a check when a direct deposit did not post to a client’s account. **Note:** The VaCMS transactions below indicate how to complete fields related to direct deposit procedures.

A. **Glossary**

1. **VaCMS – Virginia Case Management System.**

2. Direct Deposit – The process by which TANF payments are electronically posted to a client’s bank account.

3. EW - The eligibility worker or other local department of social services staff with check handling responsibility.

4. FPU - Fiscal Processing Unit. The FPU is the unit within the Virginia Department of Social Services, Division of Finance, which processes returned/undelivered checks, lost/stolen checks, cancelled, and mutilated TANF checks as well as direct deposits that did not post.

5. Fraud - The payee signs affidavits stating she did not receive the benefit of the payment. The local agency must get local or state money back from the payee if any was given to the payee.

6. LDSS - The local department of social services.

7. **Issuance Summary/Search Screen** - A history in VaCMS of the payments received by a case.

8. **Benefit Issuance Details** - Information specific to an individual payment on the Issuance summary/Search screen.

B. **TANF Payments - Schedules Information**

1. Monthly Cycle - Ongoing State-generated TANF and VTP payments to be issued on the first of each month.

2. Daily Cycle - Initial and supplemental payments generated by the State.
C. **How to Process a Direct Deposit Request**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client</td>
<td>- The client must provide a completed and signed Direct Deposit Enrollment Authorization Form (032-03-672) and a voided check.</td>
</tr>
<tr>
<td></td>
<td>- The client is to complete Section 1 of the form. Section 2 must be completed by the bank if the client does not have a voided check.</td>
</tr>
<tr>
<td>EW</td>
<td>- The case must be in on-going mode. The case name must be on the bank account. The bank account can be a checking or savings account.</td>
</tr>
<tr>
<td></td>
<td>- From Left Navigation in VaCMS, the Eligibility Worker selects: Data Collection → Eligibility → Method of Issuance.</td>
</tr>
<tr>
<td></td>
<td>- Enter the case number → Click Search → Enter the appropriate dates.</td>
</tr>
<tr>
<td></td>
<td>- The account name is pre-filled with the name of the TANF Benefit Recipient selected on the SNAP/TANF Case Level - Details screen. The bank account must be in the TANF Benefit Recipient name. In the Issuance Method drop-down, select Direct Deposit.</td>
</tr>
<tr>
<td></td>
<td>- Under Direct Deposit Information, if using a voided check, enter the account’s “First” name → Enter the account’s “Last” name → Enter the bank name.</td>
</tr>
<tr>
<td></td>
<td>- For Account Type select checking or savings from the drop-down. Enter the account number which is the second set of numbers located at the bottom of the check. Enter the account number a second time.</td>
</tr>
<tr>
<td></td>
<td>- Enter the bank routing number, which is the first set of numbers at the bottom left of the check. The routing number and account number is separated by a colon. Click Submit. The message “Request has been Successfully Submitted” will display.</td>
</tr>
<tr>
<td></td>
<td>- If you are entering information from the Direct Deposit Enrollment form completed by the bank, enter the routing number and account number that is on the form. Click Submit. The message “Request has been Successfully Submitted” will display.</td>
</tr>
</tbody>
</table>
The direct deposit request is put into Pending status for seven days from the date it is entered. Once the information is verified by the client’s bank that the account is valid the direct deposit becomes active.

Information will be sent from VaCMS to the client’s bank. If the account is not valid, an ACH Reject Notice for TANF is generated to the client directing her to contact her eligibility worker. The notice also informs her that payments will be issued by check until direct deposit is set-up successfully.

D. Procedures to reissue payments that did not electronically post (direct deposit) to client’s bank account.

NOTE: A direct deposit payee has 45 days from the issuance date to report non-receipt of a payment that was not posted to his bank account.

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>FPU</td>
<td>If a direct deposit is returned, VaCMS displays Cancel on the Check/Direct Deposit Status screen. An alert is sent to FPU notifying them of the direct deposit reject.</td>
</tr>
</tbody>
</table>
| VACMS             | The Issuance Summary/Search screen will be updated to display “Cancel”.
A task and reminder will generate to the eligibility worker. |
| EW                | The “Cancel” status will update to the Maintain Check screen. Upon receipt of the task and reminder. The EW will contact the client and discuss the incorrect information and inquire if the client wants to provide the correct information. The client will receive a notice from VaCMS automatically informing her about the status of her direct deposit.

Confirm the direct deposit has been canceled by FPU. If the client would like to give new banking information, obtain this information prior to initiating the reissuing process.

To reissue, the EW will select Benefit issuance ➔ Maintain Checks ➔ the Check/Direct Deposit Search Screen displays ➔ Click the pencil icon to edit a specific issuance. If the issuance you are searching for or no additional issuance displays, at the top of the screen enter the case number, or warrant number, and select program type from drop-down menu. Click Search. The Finance Status should display as Cancel. Select the pencil icon by the cancelled issuance.
On the Check/Direct Deposit Action screen complete the Check/Direct Deposit Action section. Enter the date and Save and Continue. Under the Finance/Benefit Issuance section, enter the Date All Required Documents were Submitted. Select Yes or No from the Reissue drop-down. If yes is selected the Issuance Method page is enabled and mandatory.

On the Issuance Method page, if direct deposit method is selected for reissuance, VaCMS will verify if the customer has direct deposit information entered. If debit card is selected as the reissue method, the system will verify that the customer has a valid social security number. Check may also be selected. Ensure the mailing address is correct.

**Note:** If direct deposit is chosen and new banking information is provided there will be a delay because the system has to verify the banking information is correct and in the interim a check will be issued. (Make sure the direct deposit information is correct prior to reissuing to direct deposit.)

### E. How to cancel a direct deposit

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>EW</td>
<td>Client Request</td>
</tr>
</tbody>
</table>

- Upon receiving a request in writing or the Request for Change of Issuance Method form (032-03-0996) completed by the client, the worker will select from the VaCMS Left Navigation, Eligibility → TANF Method of Issuance screen. Select the new issuance method from the drop-down. Click Save and Continue. The direct deposit information will disappear.

- The request to cancel the direct deposit must include the client’s name, address, social security number, signature and date.

**Note:** Once the direct deposit is cancelled, send the client the Direct Deposit Cancel Verification Letter (032-03-0676).
DEBIT CARD INFORMATION AND PROCEDURES

This appendix explains procedures for debit card cases. Note: The VaCMS transactions below indicate how to complete fields related to debit card procedures. Routine procedures for completing screens and transmitting to view the next screen have been omitted.

A. Glossary

1. **Conduent** - through its Electronic Payment Processing and Information Control (EPPIC) system, is responsible for the processing and maintenance of debit cards for clients (including the creation, delivery, and replacement of the physical debit card to the client). The name of the card has been changed to Way2Go but the EPPIC acronym is still used in VaCMS. Clients may contact Way2Go Card Customer Service at 1-800-961-8423 or Way2go.com regarding account specific questions.

2. **VACMS** - Virginia Case Management System

3. Comerica - is the designated financial issuer for Conduent.

4. Debit Card – **an electronic payment option for receiving and accessing TANF payments**. TANF payments are electronically posted to an account which can be accessed through the use of a state-issued Virginia Debit MasterCard® (also referred to as Way2Go Card).

5. EW - The eligibility worker or other local department of social services staff with payment issuance responsibility.

6. LDSS - The local department of social services.

7. **Issuance Summary/Search screen** - A history in VaCMS of the payments received by a case.

8. **Benefit Issuance Details** - Information specific to an individual payment on the Issuance summary/Search screen.

B. TANF Payments - Availability Schedules

1. **Monthly Cycle** - Ongoing TANF and VTP payments will be available on the debit card on the first day of each month. **Note: Payments are typically posted on the first of the month.**

2. **Daily Cycle** - Initial and supplemental payments generated by the State will be available on the debit card by the fourth business day after approval of the payment for individuals who have requested debit card as the TANF issuance method but do not have a debit card. This will allow time for the card to be mailed and the client to activate the card. Payments will be available on the next business day after approval of the case for individuals who have a pre-existing TANF debit card account.
C. **How to Process a Debit Card Request**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client/EW</td>
<td>• As part of the interview with new applicants and re-applicants, the EW will advise the client of the issuance methods available for TANF payments. The EW will advise the client that only one debit card will be issued for each TANF case. (The card will be issued to the individual who is listed as the <strong>name of the TANF Benefit Recipient selected on the SNAP/TANF Case Level - Details screen</strong>. The EW should advise the client that a debit card will only be issued to individuals with a valid social security number.</td>
</tr>
<tr>
<td>EW</td>
<td>• Debit card (EPPIC Card) will be the default issuance method for <strong>VaCMS</strong>. If the client chooses debit card as the issuance method, the EW will complete the required fields and verify that the “Pay To” the prefilled case name is correct, then Click Save and Continue.</td>
</tr>
</tbody>
</table>

D. **How TANF Payments Will Be Issued When the Request to Establish a Debit Card Account (Request a Debit Card) Is Rejected**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>VaCMS</td>
<td>• When a debit card request is rejected, VaCMS will update the Benefit Issuance History and Benefit Details screen with the word “Check” and VaCMS will issue the first payment by check.</td>
</tr>
<tr>
<td>EW</td>
<td>• The EW will inquire the Issuance Summary/Search screen to view the details of the issuance. Once the issuance method is confirmed, the EW will inform the client payments were issued by check and the EW will research why payments did not go out by debit card.</td>
</tr>
</tbody>
</table>

• The EW is to contact the Regional Consultant when a debit card rejects and sends a payment by check.
E. **How TANF Payments Will Be Issued When a Payment Fails to Post to an Existing Debit Card Account**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>VaCMS</td>
<td>• If the client already has an existing account/Debit Card (not initial request) and the TANF payment fails to post to the debit card account (with another program such as VEC Unemployment Insurance), VaCMS will issue the payment by check. VaCMS will update the Issuance Summary/Search screen with the Issuance Method of “Check”.</td>
</tr>
<tr>
<td>EW</td>
<td>• The EW will inquire the Issuance Summary/Search screen to view the details of the issuance. Once the issuance method is confirmed, the EW will inform the client payments were issued by check and the EW will research why payments did not go out by debit card.</td>
</tr>
<tr>
<td></td>
<td>• The EW is to contact the Regional Consultant when a debit card rejects and sends a payment by check.</td>
</tr>
</tbody>
</table>

F. **How to Change the Payment Issuance Method from Check to Debit Card**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client Request</td>
<td>• Upon receiving a request in writing or a completed Request for Change of Issuance Method form (032-03-0996) available at <a href="http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi">http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi</a>, the EW will select from the Left Navigation, Eligibility ➔ TANF Method of Issuance ➔ Enter the case number ➔ Search.</td>
</tr>
<tr>
<td>EW</td>
<td>• The TANF Method of Issuance screen displays, the “Pay To” field will be prefilled with the name of the TANF Benefit Recipient selected on the SNAP/TANF Case Level - Details screen. From the drop-down, select Debit Card ➔ Submit.</td>
</tr>
<tr>
<td></td>
<td>• If the client has a valid social security number, the message “Request Submitted Successfully” will display in the upper left corner of the screen.</td>
</tr>
</tbody>
</table>
G. How to Change the Payment Issuance Method from Direct Deposit to Debit Card

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>EW</td>
<td>Client Request</td>
</tr>
<tr>
<td></td>
<td>- Upon receiving a request in writing or a completed Request for Change of Issuance Method form (032-03-0996) available at <a href="http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi">http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi</a>, the EW will select from the Left Navigation, Eligibility → TANF Method of Issuance → Enter the case number → Search.</td>
</tr>
<tr>
<td></td>
<td>- The TANF Method of Issuance screen displays, the “Pay To” field will be prefilled with the name of the TANF Benefit Recipient selected on the SNAP/TANF Case Level - Details screen.</td>
</tr>
<tr>
<td></td>
<td>- At the Method of Issuance field, from the drop-down select Debit Card → Submit. Debit Card will display as the issuance method and the direct deposit information will disappear.</td>
</tr>
<tr>
<td></td>
<td>- On the upper left corner of the message “Request Submitted Successfully” will display. The debit card request will be sent to Conduent.</td>
</tr>
<tr>
<td></td>
<td>- If the client already has an account, including an account establishment with another program such as DCSE or Unemployment Insurance, a separate TANF Program account will be set up for her TANF payments. A new card will not be sent unless it is time for a new card or the client requests a new card. If the client does not have an existing debit card account a new account will be set up. A MasterCard package with her debit card and instructions will be sent to her.</td>
</tr>
</tbody>
</table>

H. How to Change the Payment Issuance Method from Debit Card to Check

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>EW</td>
<td>Client Request</td>
</tr>
<tr>
<td></td>
<td>- Upon receiving a request in writing or a completed Request for Change of Issuance Method form (032-03-0996) available at <a href="http://localagency.dss.state.va.us/divisions/bp/tanf/">http://localagency.dss.state.va.us/divisions/bp/tanf/</a>. From the Left Navigation, the EW will select Eligibility → TANF Method of Issuance → enter the case number. “Pay To” will be prefilled with the TANF Benefit Recipient selected on the SNAP/TANF Case Level - Details screen. At the Method of Issuance field click on the down-box and choose Check. Click Submit.</td>
</tr>
<tr>
<td></td>
<td>- Check will display as the issuance method. The direct deposit information will disappear. Click Submit. At the top left hand side of the screen the message “Request Submitted Successfully” will display.</td>
</tr>
</tbody>
</table>
I. How to Change the Payment Issuance Method from Debit Card to Direct Deposit

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>EW</td>
<td>Client Request</td>
</tr>
</tbody>
</table>

- Upon receiving a request in writing or a completed Request for Change of Issuance Method form (032-03-0996) available at [http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi](http://localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi), the EW will select from the Left Navigation, Eligibility → TANF Method of Issuance → Enter the case number → Search.

- The TANF Method of Issuance screen displays, the “Pay To” field will be prefilled with the name of the TANF Benefit Recipient selected on the SNAP/TANF Case Level - Details screen. At the Method of Issuance field click on the drop-down and select “Direct Deposit”. Click Submit.

- The bank account must be in the case name. Beside Issuance Method in the drop-down select the Direct Deposit.

- Under Direct Deposit Information, if using a voided check, enter the account “First” name. Enter the account “Last” name. Enter the “Bank” name.

- For Account Type select Checking or Savings from the drop-down. Enter the account number which is the second set of numbers located at the bottom of the check. Enter the account number a second time.

- Enter the routing number, which is the first set of numbers at the bottom of the check on the left hand side. The routing number and account number are separated by a colon. Click Submit. On the upper left corner of the message “Request has been Successfully Submitted” will display.

- If you are entering information from the Direct Deposit Enrollment form completed by the bank, enter the routing number and account number that is on the form from Section 2 of the form (032-03-0672). Click on Submit.

- On the upper left corner of the message “Request has been Successfully Submitted” will display.
### J. Debit Card Reported Lost/Stolen by Cardholder

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client</td>
<td>• The cardholder will contact Way2Go customer Service at 1-800-961-8423 to report a lost/stolen card and obtain a replacement card.</td>
</tr>
<tr>
<td>EW</td>
<td>• No action is required. The EW should advise the cardholder to contact Way2Go customer service to report the lost/stolen card.</td>
</tr>
</tbody>
</table>

### K. Debit Card/Debit Card Funds Returned by Cardholder

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>EW</td>
<td>• When a cardholder attempts to return a debit card to the LDSS, staff should refuse to accept the card and provide the cardholder with a copy of the Returned TANF Debit Cards information sheet (032-03-0200). (See the exception for overpayments in the note below).</td>
</tr>
</tbody>
</table>

**Note**: Funds received by debit card may be used to repay a previous overpayment. The cardholder will have to obtain the funds from the card and provide the funds to DSS as a cash payment.

If the cardholder mails the debit card to the LDSS, the EW should mail the card back to the cardholder along with a copy of the Returned TANF Debit Cards information sheet (032-03-0200).
L. **Change of Address Reported by Cardholder**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>EW</td>
<td>• When a debit cardholder reports a change of address the EW is to make the corrections on the TANF case. The information will be transmitted to Conduent.</td>
</tr>
<tr>
<td>Client</td>
<td>• If the client needs to request a replacement card, she will contact Way2Go customer service after the EW has received confirmation the address has been updated in the Way2Go System.</td>
</tr>
</tbody>
</table>

M. **A Social Security Number and/or Date of Birth Has Been Corrected for a Debit Cardholder**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>EW</td>
<td>• When an EW corrects a date of birth and/or a social security number in VaCMS for a debit cardholder the information will be transmitted to Conduent.</td>
</tr>
</tbody>
</table>

N. **A Name Change for a Debit Cardholder**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>EW</td>
<td>• When an EW changes a name in VaCMS for a debit cardholder, the information will be transmitted to Conduent.</td>
</tr>
<tr>
<td>Client</td>
<td>• If the client wishes to receive a new debit card with the new name on it, she will contact Way2Go customer service after the EW makes the changes in VaCMS.</td>
</tr>
</tbody>
</table>
O. **Reporting Non-Receipt of Debit Card Funds**

<table>
<thead>
<tr>
<th>Responsible Party</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client</td>
<td>The cardholder must contact the EW within 45 days of the issuance date to report non-receipt of <strong>payment</strong> into his <strong>Way2Go account</strong>.</td>
</tr>
<tr>
<td>EW</td>
<td>Whenever a client reports non-receipt of payments deposited to his <strong>Way2Go account</strong>, the EW will check the <strong>Issuer Summary/Search screen in VaCMS</strong> to review the payment and the issuance method.</td>
</tr>
<tr>
<td></td>
<td>Once this information is reviewed and the EW notes that all the information is correct, she will inform the client that the payment was issued by check and the EW will research why the payment did not go to the debit card.</td>
</tr>
<tr>
<td></td>
<td>The EW will contact the Regional Consultant who will then contact Home Office to inquire if this case ‘Rejected’.</td>
</tr>
<tr>
<td></td>
<td>If the client does not report non-receipt of payment within 45 days of issuance, no assistance will be offered by the agency to obtain the payment.</td>
</tr>
</tbody>
</table>

Note: Once payments are posted to a debit card, the payment cannot be taken off the debit card by Virginia Department of Social Services.
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TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) GUIDANCE MANUAL

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Appendix I - TANF VIEW Payment Calculation
Appendix II - VIEW Payment Calculation
Appendix III - Federal Poverty Level
The Virginia Initiative for Employment not Welfare Program (VIEW) is a program of employment opportunities to assist individuals in attaining the goal of self-sufficiency.*

The program goals are to offer Virginians living in poverty the opportunity:

- To achieve economic independence by removing barriers and disincentives to work and by providing positive incentives to work;
- To provide work skills necessary for self-sufficiency;
- To allow families living in poverty to contribute materially to their own self-sufficiency;
- To set out the responsibilities of and expectations for recipients of public assistance;
- To obtain work experience through the Virginia Initiative for Employment Not Welfare (VIEW).

901.1 PARTICIPATION - As a condition of eligibility, each recipient of TANF and TANF-UP must participate as required in VIEW, unless otherwise exempt.

The eligibility worker in the local agency must determine which applicants and recipients are not required to participate (exempt) and which are required to participate (non-exempt). The eligibility worker will refer to the VIEW Program a non-exempt individual at the time of application approval or when an individual's VIEW status changes.

Note: JOINT TANF AND SNAP APPLICATIONS: In situations requiring joint processing of TANF and SNAP applications, the work registration form or affidavit, whichever is appropriate, is to be used for SNAP purposes in the event that the TANF application is denied. (Refer to Volume V, Part VIII, A. of the SNAP Manual).

901.2 EXEMPTION CRITERIA - An applicant/recipient of TANF or TANF-UP must participate in the VIEW Program unless the individual meets one of the following exemption criteria:

A. Any child, (including minor caretakers) age 17 and under.

B. Any minor, age 17 and under, who is a parent on his/her own case.

C. Individuals at least 18, but no more than 19 years of age, who are enrolled in elementary or secondary school, including vocational or technical school programs. The vocational or technical school must be equivalent to secondary school.

* Code of Virginia, Section 63.2-608
D. Individuals unable to participate because of a temporary medical condition that prevents entry into at least 20 hours per week of employment and training activities, as determined by a medical professional. For these individuals, the EW must complete the Disability - Details screen in VaCMS. (Note: Pregnancy does not exempt an individual from participation. However, complications of pregnancy, as diagnosed by a medical professional, may result in a medical exemption).

A medical professional is defined as a medical doctor, including psychiatrist, or doctor of osteopathy, or a licensed physician’s assistant or nurse practitioner working under the auspices of a medical doctor or doctor of osteopathy. This definition of medical professional also applies in 901.2F below.

The individual must provide the local agency a completed Medical Evaluation (form 032-03-0654) completed by the medical professional that states the nature and scope of the incapacity, including abilities and limitations of the individual, and the duration of the incapacity. The medical exam for which a medical evaluation is based, must have been conducted no more than 90 days prior to the date the medical professional signs the form. The duration indicated is measured from the date the form was completed and signed by the medical professional. If the medical form does not specify the duration of the medical condition, or if the form is otherwise incomplete, the eligibility worker must contact the medical professional to obtain the missing information before acting on the medical.

The form is to be completed by a medical professional with thorough knowledge of the condition(s) that are believed to limit or prohibit the client’s ability or participate in VIEW. Typically, this is the doctor or other medical professional who is currently treating the client for the condition. If, however, in the opinion of the agency, the client’s condition is such that a specialist should evaluate it, then the specialist should make the evaluation, complete and sign the form.

Medical exams necessary to determine exemption status for VIEW or to assess a VIEW participant’s ability to participate in the program will be arranged through Medicaid when possible. When medical coverage does not exist, the agency will pay for the first medical exam using VIEW funds, or other funds the agency deems appropriate. The agency may pay for additional exams, but is not required to do so.

The agency may choose to request and pay for a 2nd evaluation from a medical professional whenever the 1st evaluation is deemed by the agency to be inadequate to determine the client’s exemption status, or ability to work or participate, or is otherwise questionable.

Note: If the agency is unable to secure a medical evaluation for a person required to participate in VIEW, the individual will be referred to VIEW. The ESW will work with the participant to secure a medical evaluation as part of the VIEW assessment process.

If the individual is unable to participate in VIEW for at least 20 hours per week because of a temporary medical condition substantiated by a medical statement, the eligibility worker must obtain a new medical and reevaluate the exempt individual's incapacity immediately following the

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anticipated end of the incapacity as originally noted. If the duration indicated on the form is for
more than 12 months, or is identified as permanent, a new form must be obtained every 12
months. Disability is defined at 101.1D and in Chapter 1000, VIEW definitions).

If the physician indicates that the individual is able to participate in employment and training
activities but is limited in the types of activities that can be performed, or the hours of
participation, the eligibility worker must refer the individual to VIEW and share the information
with the ESW so suitable accommodations can be arranged. The employment services worker
must work with the individual to find suitable component assignments, taking into account any
limitations indicated by the physician. The agency shall ensure that reasonable accommodations
are made if needed.

Note: If there are two parents in the assistance unit and one parent is exempt because of a
temporary medical condition or disability, the case is a TANF case rather than a TANF-UP case.

E. Individuals who are incapacitated, as determined by receipt of Social Security Disability (SSDI)
benefits or Supplemental Security Income (SSI). The EW must complete the Disability –
Details screen in VaCMS.

The eligibility worker must provide all applicants/recipients who have a permanent incapacity
with information about services provided by the Department for Aging and Rehabilitative
Services to assist SSI/SSDI recipients in finding employment. This information is available at

Note: If there are two parents in the assistance unit and one parent is exempt because of a
permanent incapacity as determined by receipt of Social Security Disability benefits or
Supplemental Security Income, the case is a TANF case rather than a TANF-UP case.

F. Any individual 60 years of age or older.
G. An individual who is needed on a substantially continuous basis to care for a family member living in the household. The family member must have a verified disability. The family member must have “caretaking needs” that will prevent the individual from participating in work activities. Caretaking needs that prevent the individual from participating in work activities include the need for attendance, supervision and home care, and other needs related to the family member’s disability. When the family member who requires care is also a member of the AU, the EW must complete the Disability – Details screen for the disabled individual. The EW must also answer “Yes” to the question, “Is the individual taking care of the disabled individual in the household?” on the caregiver’s Client Demographics screen. The EW must set a task and reminder to reevaluate the need for a caretaker to act as a caregiver.

A medical professional must complete a Statement of Required Presence of Caregiver form (032-032-03-0020) to verify the family member’s condition, and the need for the individual to be available on a substantially continuous basis. The date the form was completed will be used in conjunction with the anticipated duration of the need for the caregiver’s presence to determine when the exemption will end. For example, if the individual provides a form on November 1, which states the medical professional completed the form on October 1 and the expected duration of the need for a caregiver is 60 days, the exemption would be allowed until November 30 (60 days after October 1). If a new form was not provided by November 30, the caregiver would be referred to the Virginia Initiative for Employment not Welfare (VIEW) program.

It is the responsibility of the EW to request a new Statement of Required Presence of Caregiver form immediately following the anticipated end of the need for the caretaker. If the duration indicated on the form is for more than 12 months, or is identified as permanent, a new form must be obtained every 12 months. Exception: if the disabled individual who requires a caregiver is an SSI or SSDI recipient and the medical professional does not provide a specific duration of less than one year for the anticipated need for a caregiver, the form will be completed annually and the exemption allowed for one year.

If the documentation does not result in exemption from VIEW, the documentation must be forwarded to the ESW. If the disabled family member is out of the home for substantial parts of the day, for example, to attend school, then the caretaking individual does not meet the requirement for this exemption.
H. A parent or caretaker/relative of a child under twelve months of age who personally provides the care for a child.

Effective July 1, 2011, Virginia implemented the federal 12-month lifetime limit exemption for caring for a child under 12 months in the AU, or caring for a child under 12 months in the household, but not in the AU. Beginning with that date, an individual is eligible for no more than 12 months of the "caring for a child under 12 months" exemption in a lifetime.

Example: In 2016, Ms. Able used eight months of the "caring for a child under 12 months" lifetime limit exemption, with her first child. On January 5, 2018, at reapplication, Ms. Able notifies the agency that she is now caring for her newborn who is a SSI recipient. Based on receipt of SSI, the newborn is not included in the assistance unit. However, Ms. Able is eligible for the remaining four months of the "caring for a child under 12 months" lifetime limit exemption.

In a double caretaker TANF assistance unit in which one parent is incapacitated, the eligibility worker must refer the other caretaker for participation unless he can provide a written doctor's statement indicating that the incapacitated caretaker is unable to care for the child under twelve months.

Note: A parent who gives birth to a child subject to the family cap provision (refer to Section 201.12) may be granted a temporary exemption of not more than six weeks after the birth of the child. This exemption status will also be used for a parent who has reached the 12-month lifetime limit for the use of the "caring for a child under 12 months" exemption and then gives birth to a child who is not capped.

In the VIEW Program, a parent whose needs are removed from the payment must participate unless otherwise exempt. Reasons why the parent's needs have been removed from the payment include, but are not limited to: noncooperation with DCSE; disqualification for IPV violation; a drug felony conviction; failure to provide a Social Security number; and failure to establish citizenship, eligible alien status, or legal presence. In addition, a parent whose needs are not included in the payment due to the stepparent deeming requirements, 305.4.F., or due to the sponsored alien deeming requirements, 305.4.D., must participate in VIEW, unless otherwise exempt.

A parent who does not meet TANF categorical requirements (parent is an SSI recipient or parent is an ineligible alien) is not required or eligible to participate in VIEW. For aliens who are in the country illegally, the EW must complete the Alien Details screen. For other individuals who are ineligible because they have not been in the country for five years from date of entry, including individuals who are lawful permanent residents, the EW must complete the Alien Details screen. Because these individuals are not part of the TANF AU, they will not be referred to VIEW.

Unless otherwise exempt, a parent who is a court convicted offender serving a sentence while still living in the home should be referred to VIEW if he is allowed by the court to leave home to work or attend education/training activities.
TANF-UP - In a TANF-UP case, both parents must be referred for participation, unless one meets an exemption; only one parent can be exempt. If both parents meet an exemption criterion, they must decide who will be referred for participation. If the household's situation changes and the recipients wish to change the VIEW participant, they may do so upon request and after advisement from the ESW or EW. Exception: The recipients may not switch VIEW participants in order to avoid termination of the case or in order to avoid or cure a sanction.

When both parents in a TANF-UP case are under the age of 18, they are exempt.

Volunteers - TANF recipients under the age of 18 cannot volunteer for VIEW. Additionally, recipients of SSI benefits and ineligible aliens cannot be included in the TANF assistance unit and therefore cannot volunteer to participate in VIEW. Ineligible aliens include individuals who are in the country illegally and those who are lawful permanent residents who have been in the country for less than five years.

To the extent that funding is available, agencies may serve TANF recipients who are exempt from VIEW and who choose to volunteer. Applicants can volunteer for VIEW only after the TANF application has been approved. They are eligible for the VIEW enhanced disregards in the month following the month the VIEW APR is signed. (Note: The APR cannot be signed before the initial VIEW assessment except when it must be signed prior to TANF approval as a condition of eligibility).

An individual who is exempt from participation can volunteer for VIEW only if she is able to meet the same participation requirements as a mandatory recipient. Volunteers unable to meet VIEW program requirements will no longer be enrolled in VIEW. An exempt individual who volunteers for VIEW gives up her exempt status and becomes a mandatory participant subject to the same participation requirements and penalties for non-participation as other mandatory VIEW participants. The EW will notify the ESW of the individual's request to volunteer for VIEW. The ESW will be required to create a manual referral in the ESP module for individuals with an exemption status that choose to volunteer.

If an individual volunteers and does not participate as required in the assigned activity, that individual will be referred for sanction. A sanction will be imposed unless the individual has good cause for not participating. Following the end of the fixed sanction period and compliance, the individual will continue as a mandatory participant. Exception: In the case of an individual with a caring for a child under 12 months exemption who fails to comply and is sanctioned, the individual can reclaim her caring for a child under 12 months exemption following the end of the fixed sanction period if she no longer wishes to participate in VIEW. Her caring for a child under 12 months exemption will end when the child turns one year old or once she has used the balance of the caring for a child under 12 months exemption period. She will then be referred to VIEW as a mandatory participant.

If the TANF case of an exempt client who volunteers for VIEW closes, and the client reaps the, the client’s exemption status will be determined as part of the eligibility process. The client will be referred to VIEW if she is no longer exempt. If the client’s previous exemption was for a temporary medical condition or for caring for a disabled household member, she must secure a new medical if she states she is unable to participate in VIEW for either of those reasons. If the client is determined to be exempt at reapplication and again wishes to give up her exemption and participate, she may do so if funding is available.
Note: Non-parent caretakers who meet the financial requirements of Section 304.2 and are included in the assistance unit must participate in VIEW unless otherwise exempt. These individuals are mandatory VIEW participants, not VIEW volunteers. However, these individuals are not subject to sanction for failure to participate as required. Instead, the non-parent caretaker will be removed from the TANF payment and the TANF case will remain open as a child only case. If the case closes and the household reapplies for TANF, the non-parent caretaker who was removed from the TANF payment for failing to participate in VIEW must be referred to VIEW (unless otherwise exempt) if the individual wishes to be included on the TANF payment.
901.3 RESPONSIBILITIES OF THE ELIGIBILITY WORKER - Regarding VIEW, the eligibility worker must:

A. Determine VIEW or exemption status prior to the initial approval, at redetermination when adding an individual to the assistance unit, or when a change in the individual’s situation would affect her VIEW status. Such determinations should be documented on the Case Narrative - Details screen in VaCMS.

Explain the exemption criteria to all applicants at application and to recipients at redetermination, and explain their obligation to report changes affecting their status. The recipient must provide information and verify all reported changes in exemption status. The eligibility worker must change the exemption status in the month in which the change is verified.

Exempt individuals who lose their exemption status must be referred to VIEW within three working days after the exemption ends. Changes that result in VIEW status changing from exempt to non-exempt but which are reported late, do not constitute an overpayment.

Mandatory individuals who become exempt must be advised of the status change and their right to participate in VIEW as volunteers.

B. Provide a copy of the completed “Do You Have a Disability?” form (for the adult applicant or payee who completed the application for TANF) to the ESW for the VIEW record when the adult is referred to or volunteers for VIEW.

C. Explain the requirements of the VIEW Program and the related supportive services to all applicants/recipients at application and redetermination. The EW should also cover transitional services that may be available when the TANF case closes: transitional childcare, transitional medical/dental services, transitional work-related expenses, transitional emergency intervention, transitional employment and training services (TET), transitional transportation, and VIEW Transitional Payment (VTP). All applicants and recipients, including non-parent caretakers in the assistance unit, who are not mandatory, must be offered the opportunity to volunteer for the VIEW Program.

D. Advise all applicants/recipients of the sanctions/penalties that apply for failing/ refusing to participate in VIEW, without good cause. The ESW will evaluate good cause.

E. Provide to persons with an incapacity, information from the Department for Aging and Rehabilitative Services (DARS) that explains employment services provided by DARS. The information is available at www.vadrs.org/downloads/drsflyer.pdf.

F. Review the individual's exempt/non-exempt status when changes are reported and as a part of the TANF eligibility redetermination process, unless the eligibility worker determined the individual to be 60 years old or older, or permanently incapacitated.
G. When the APR/POP Signed Date field is completed by the ESW, the APR signed date will automatically be populated on the Program Request – Client screen for the individual(s). The EW will receive a task and reminder that the APR has been signed and to run eligibility to update the Program/TOA on the TANF – Eligibility Summary screen to TANF/VIEW or TANF-UP/VIEW.

Note: The ESW will be responsible for maintaining the 24-month clock.

H. Advise applicants/recipient who are exempt from VIEW that they may volunteer to participate in VIEW, unless: they are SSI recipients; a parent who is a court convicted offender serving a sentence while still living in the home who is not allowed to leave the home to work or attend education/training activities; or illegal aliens.

In the case of a recipient who has become employed and wants to volunteer for VIEW in order to receive the VIEW enhanced disregards, the EW will advise the individual to contact the ESW to schedule the VIEW initial assessment appointment.

I. Advise all volunteers that once they enter VIEW by signing the VIEW APR they become mandatory participants subject to the same participation requirements and penalties for non-participation as other mandatory VIEW participants.

J. Make appropriate changes in VaCMS that affect the individual's VIEW status. The ESW will be notified via task and reminders of these changes. These changes include, but are not limited to, the individual:

1. Losing employment;
2. TANF/VIEW or TANF-UP/VIEW case closes;
3. VTP case established;
4. Changes to VTP status; or
5. TANF case has been reinstated on a case with a prior VIEW enrollment.

K. Upon notification from the ESW indicating that a non-exempt individual claims to be exempt, verify the exemption claim and notify the ESW of the findings within thirty (30) days. If the eligibility worker is unable to verify an exemption claim, the individual will continue in non-exempt status in VIEW until verification is received.

L. Sanction the TANF case by suspending the payment based on the ESW's recommendation. The EW will send the ANPA (032-03-0018) within three working days of receipt of the notification from the ESW.

M. Upon notification by the ESW, that prior to the scheduled date of the initial VIEW assessment date, the recipient has made a request that the TANF case be closed, the EW will close the TANF case per the recipient's request. The EW will send the ANPA (032-03-0018) within three working days of receipt of the notification from the ESW.

If the recipient subsequently requests that the TANF case be reopened prior to the effective date of the case closure, she must complete the initial assessment appointment before the TANF case will be reopened.
N. Upon receiving a task and reminder that the recipient has refused to attend an initial assessment appointment or refused to sign the Agreement of Personal Responsibility without good cause, close the TANF case. Note: The client will be required to sign the Agreement of Personal Responsibility as a condition of eligibility if she reapplies for assistance. The EW will send the ANPA (032-03-0018) within three working days of receipt of the notification from the ESW.

O. Obtain verification and impact the assistance payment when a recipient obtains employment.

P. Send the Advance Notice of Proposed Action to the recipient at least 60 days prior to the case termination effective date when the 24 months time limit is to expire.

Q. Upon notification from the ESW indicating that the VIEW participant is being placed in a Full Employment Program (FEP) placement, the EW will update the employment details information and run Eligibility. The TANF payment will stop per 901.14. The eligibility worker must conduct a prospective determination of eligibility in the last month of the FEP placement.

R. When closing a TANF case with a VIEW participant, determine VTP eligibility. Inform the ESW when a VTP is started or terminated in VaCMS.

S. Close the VTP case when the client is no longer eligible.

T. Transfer the VTP case when a client moves to another locality in Virginia. Note: It is the responsibility of the receiving agency to determine if the client continues to meet all of the VTP eligibility requirements.
901.4 RESPONSIBILITIES OF THE EMPLOYMENT SERVICES WORKER - The ESW must:

A. Send a Communication form, within three working days, to advise the EW when a recipient requests the closure of the TANF case prior to the scheduled date of the initial VIEW assessment.

Note: If the recipient subsequently requests that the TANF case be reopened prior to the effective date of the case closure, she must complete the initial assessment appointment before the TANF case will be reopened. The ESW will make every effort to schedule this appointment prior to the effective date of the TANF case closure. Additionally, the recipient will be advised that if she fails to attend the appointment, the TANF case will be closed based on her original request.

B. Have the recipient sign the VIEW Agreement of Personal Responsibility as part of the initial assessment interview.

Note: Explain Intentional Program Violation (IPV) reporting requirements and penalties to the participant. See Section 102.

Obtain a copy of the “Do You Have a Disability?” form from the EW. If the EW failed to have the client complete the form, the ESW will complete the form with the client and give a copy to the EW for the TANF record.

C. Enter the date that the recipient signs the VIEW Agreement of Personal Responsibility as the assessment date in the ESP module of VaCMS. The action will begin the 24-month clock which is maintained by the ESW.

D. Advise the eligibility worker, within three working days, when a non-exempt recipient refuses to sign the VIEW Agreement of Personal Responsibility.

E. Determine in which component(s) an individual must participant and whether he complies.

F. Report to the EW, within three working days, any changes that have occurred in the VIEW activities that will impact the VIEW participant financially, e.g. securing employment or entering the Full Employment Program (FEP).

G. Advise the eligibility worker that a case is to be sanctioned and the appropriate sanction period. The EW will send the ANPA (032-03-0018) within three working days of receipt of the notification from the ESW.

H. The ESW will advise the eligibility worker of the date the individual began to comply. However, the sanction will not be removed until the sanction time frame elapses. If participation begins after the fixed period, the payment will be prorated for the month in which he begins to participate.
I. Notify the eligibility worker of changes associated with FEP participation that require action. Changes may include initiation of a FEP stipend, issuance of a supplemental payment to the participant, issuance of a replacement check to the employer, or evaluation of continuing eligibility upon termination of the placement. Notification is sent using the FEP Communication Form (032-03-0655). The form is available online and may be sent by email. The online version can be accessed on the intranet at http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms.cgi.

J. Inform VIEW participants of his or her right to request a disability screening if the individual is having difficulty participating in an assigned activity. The participant has the right to be referred for an assessment, by a qualified professional, if the screening indicates a possible disability.

K. Inform VIEW participants that screening and assessment to identify disabilities and other barriers to program participation are voluntary. Ensure that a copy of the “Do You Have a Disability?” form is in the VIEW record.

L. Inform VIEW participants that they have a right to meet with the ESW to discuss the need to revise the Activity and Service Plan to reflect disabilities, or those of household members that affect the ability to engage in work activities or require accommodations.

M. Inform VIEW participants that they have a right to an Activity and Service Plan that includes the supports, services and any needed accommodations that will be provided to the individual that will enable the individual to participate in work activities or other program requirements.

N. Complete job follow-up for VTP and inform the EW when the participant is no longer eligible for the VTP.

O. Federal regulations require that protective services be made available to any child on whose behalf TANF is being requested or received when it appears that the child is being neglected, abused, or exploited or is in a situation which is otherwise detrimental to his welfare. If the ESW has reason to believe that a child, on whose behalf TANF is being applied for, or received, is in an unsuitable environment because of known or suspected instances of physical or emotional injury, it is the responsibility of the ESW to make a referral to the services staff for protective services.

Known or suspected instances of physical or emotional injuries include instances of sexual abuse or exploitation, and negligence and/or maltreatment of such child under circumstances which indicate that the child's health or welfare is threatened.
901.5 PARTICIPATION AND COOPERATION REQUIREMENTS

A. Agreement of Personal Responsibility - As a condition of eligibility, all non-exempt individuals must sign a written APR. (Because applicants for DA are not required to meet all conditions of eligibility, including participation in VIEW, they are exempt from signing the VIEW APR). Except in the circumstance outlined in D below, an individual who signs an APR is a VIEW participant at the point the APR has been signed and will be considered to be participating in VIEW unless notice is received from the ESW that he has failed or refused to participate. If an individual fails/refuses to participate/cooperate without good cause, the case is not eligible to receive a payment.

The APR, at a minimum, will explain the 24-month time limit and the following participant responsibilities:

1. To seek employment to support his own family.
2. To participate in assignments made by the case manager.
3. To notify the case manager of any change in the participant's circumstances which will impact the participant's ability to satisfactorily participate in the program.
4. To accept a job offer. Refusal to accept a job offer may result in a sanction if so determined by the ESW.
5. To arrange and find transportation and day care. The case manager will assist the participant if he has tried, but has been unable to find transportation or day care.

B. When an APR Must Be Signed:

1. At the initial VIEW assessment and upon re-referral following a reapplication or a period in which the individual was exempt.
2. When a TANF case was closed while a sanction was still in effect and the sanctioned individual later reapplies for TANF, a new APR must be signed at the time the individual returns to the VIEW program. (The individual will return to the VIEW program only after the sanction has been lifted because the minimum fixed sanction period has been served and the individual has completed an act of compliance.)
3. At the time of application, if the client reapplies for assistance after the case was previously terminated for failure to sign the APR.
C. Refusal to Sign the Agreement of Personal Responsibility (APR) - Refusal to sign the APR means overt refusal to sign or failing to appear without good cause for an initial assessment interview in which the APR was to be signed. If the ESW advises the EW that a mandatory individual has refused or failed to sign the APR, the TANF case must be closed as soon as administratively possible. When the ESW completes the Compliance/Non-Compliance Details screen in the ESP module for failure to sign the APR, the non-compliance information will populate on the Non-Compliance Details screen in Data Collection. A task and reminder will be generated to the EW to run eligibility to close the case. Note: If the individual who failed to sign the APR is a non-parent caretaker, the EW will remove that individual’s needs from the TANF payment and the case will remain open as a child only case. The individual cannot be included in the payment until an APR has been signed or the individual has become exempt.

D. Subsequent Reapplication after Refusal to Sign the Agreement of Personal Responsibility (APR) - Upon a subsequent re-application for TANF, the applicant(s) determined to be VIEW mandatory must sign the APR before a final determination of eligibility and the issuance of payments, if appropriate. However, the signing of the APR is not a condition of eligibility for TANF if the case has been closed for 24 months or more.

Either the EW or ESW may obtain the applicant's signature on the APR. This is the only instance in which the EW may obtain the signed APR and the only instance when an APR is to be signed prior to approval of the TANF application.

If the APR has not been signed within the application processing time frame (refer to Section 401.1.E), the TANF application must be denied.

- No Countable Earnings
  If the APR is signed within the application processing time frame and the household has no countable earnings, the EW will enter the date the APR is signed on the Program Request - Client screen and run Eligibility. The Program/TOA on the TANF - Eligibility Summary screen will change from TANF or TANF-UP to TANF/VIEW or TANF-UP/VIEW the month following the month after the APR was signed. The EW will scan and upload the signed APR to the TANF record in VaCMS.

- Countable Earnings
  If the APR is signed within the application processing timeframe and the household has countable earnings, the earnings will be screened in accordance with guidance at Section 305 (which does not include the VIEW enhanced disregard). The APR date should not be entered in VaCMS at this time.

  - If the applicant is eligible for TANF without the VIEW enhanced disregards, the application will be approved. The EW will then enter the date the APR is signed on the Program Request Screen, then run eligibility. The client will be referred to VIEW. The EW will scan and upload the signed APR to the TANF record in VaCMS.
If the applicant is not eligible because the countable earnings exceed the countable income limit, the application will be denied. **The EW should still have the applicant sign an APR as part of the application process.** The EW will not enter the date the APR was signed in VaCMS. The signed APR must be scanned and uploaded to VaCMS. The TANF case record must be thoroughly documented, **on the Case Narrative Details screen,** so the individual will not have to sign another APR as a condition of eligibility at a subsequent application. Additionally, a Communication Form will be sent to the ESW to notify him that the individual has signed an APR but the TANF application was denied.

If the individual reapplies, **the system will automatically refer him to VIEW.**
901.6 SANCTIONS - Participants who fail to participate in the VIEW Program will be sanctioned.

A. The sanction will be imposed by suspending the TANF payment for the period of time specified at 901.6F.

B. For needy non-parent caretakers, the caretaker is to be removed from the payment, rather than suspending the payment. The caretaker may not be added back to the TANF payment during the current period of TANF assistance. If the case closes and the caretaker files a new TANF application, and will be included on the TANF payment, she will be referred to VIEW unless otherwise exempt.

C. The ESW must advise the EW of the decision to sanction and the sanction count.

D. The EW is to sanction the participant unless otherwise advised by the ESW. If the participant requests that the TANF case be closed following the referral of the case for sanctioning, the EW must still enter the sanction in VaCMS prior to closing the case.

1. If the EW is aware that the participant might have been exempt during the required participation period, or was unable to participate for reasons of disability or language barrier, the EW must advise the ESW.

The ESW is responsible for making the final decision as to whether to proceed with the sanction. If the ESW determines that the participant was exempt, or was unable to participate for reasons of disability or language barrier, the ESW will advise the eligibility worker not to impose the sanction.

Exception: The EW will not impose the first sanction when the client obtains and provides verification of full-time employment (at least 30 hours per week) prior to the effective date of the proposed sanction. The EW will delete the sanction information from VaCMS and inform the ESW of the employment and that the 1st sanction was not imposed. Employment prior to the imposition of a 2nd or 3rd sanction will not impact the proposed sanction; the eligibility worker will impose 2nd and 3rd sanctions regardless of client employment status.
2. When a participant becomes exempt during a sanction period and the verified exemption still exists at the end of the minimum fixed sanction period, the EW will remove the sanction.

If the EW is notified by the ESW that the sanction was imposed in error or that the client’s failure to participate was due to disability or language barrier, the sanction must be lifted immediately by the ESW and deleted from the automated system by the EW. The sanction will not be included in the client’s overall sanction count.

3. When a sanctioned individual becomes disabled or becomes required to care for a disabled family member living in the household during the 24-month POI, and such disability or situation prevents the individual from being self-supporting, the individual must serve the fixed sanction period before the individual can be eligible for TANF due to his/her disability, or need to care for the disabled family member, during the 24-month POI.

Example: A VIEW sanction was imposed effective July 1, 2017 for six months. The client’s 24th month of assistance is September 2017. The 24-month POI begins October 1, 2017. The client becomes disabled (unable to work) and applies for TANF on October 13, 2017. She still has to serve the remaining two months of the fixed sanction period (in this example, six months) before she can be eligible for TANF due to disability. The earliest date that she can be eligible for TANF due to disability is January 1, 2018.

E. The EW must apply the sanction effective the month following the month in which she receives notice to sanction, if administratively possible. If this cannot be done, the action must be taken for the second month. The EW must mail the Advance Notice of Proposed Action as soon as possible after receipt of the Notice to Sanction. The advance notice must indicate the duration of the sanction.

Exception: In the case of a TANF-UP household, when one parent is participating in a FEP placement and the VIEW sanction is the result of non-compliance by the other parent, the ESW will advise the EW to delay imposition of the sanction until the month following the end of the FEP placement. This will allow the FEP placement to continue and not be disrupted by the closure of the TANF-UP case due to the sanction.

F. The sanction time frames are as follows:

1. For the first sanction, the payment will be suspended for a minimum period of one month and will continue to be suspended until the client complies.

2. For the second sanction, the payment will be suspended for a minimum period of three consecutive months and will continue to be suspended until the client complies.

3. For the third and subsequent sanctions, the payment will be suspended for a minimum period of six consecutive months and will continue to be suspended until the client complies.

In determining the length of time that the sanction will be imposed, if the ESW determines that a previous sanction was due to an unaccommodated disability which
prevented compliance, the current sanction should be imposed as if the previous sanction had not occurred. For example, if this would have been the second sanction but the ESW determines that non-compliance with program requirements that resulted in the first sanction was the result of a disability, the second sanction will be treated as if it is the first sanction and the penalty for a first sanction will be applied.

G. While a payment is suspended for a sanction period, the assistance unit members are considered TANF recipients for all other purposes. The time clock for VIEW participants continues during the sanction.

H. The ESW will advise the eligibility worker of the effective date of compliance. If the date of compliance is during the fixed sanction period, the sanction will be lifted effective the first day of the month following the end of the fixed period. (Note: If the case is approved in a sanction, and the payment suspended, each of the month(s) of suspended payment, including a partial month, will count toward the fixed sanction period.) If the date of compliance is after the fixed period has ended, the sanction will be lifted as of that date and the payment for that month will be prorated.

I. When the sanctioned individual becomes exempt after the minimum sanction period has elapsed, the sanction will be lifted effective with the date the exemption was verified.

An underpayment will not exist when an exemption change, which should result in an increased payment amount, is reported or verified late.

Exception: If the ESW verifies that the non-compliance with program requirements that resulted in the sanction was the direct result of a disability, the need to care for a household member with a disability, or limited English proficiency, the ESW will notify the EW, who will immediately lift the sanction, reinstate payments, and enter the exemption information into the computer system.

J. Sanctions when a client reapplys following case closure:

1. If the sanction is in the fixed period when the case closes, the sanction resumes at approval at the point it left off when the case closed.

Example: A second VIEW sanction was imposed effective 1/1. Client requested that her TANF case be closed effective 1/31. Client reapplyed for TANF on 6/15. The application is approved on 7/12 with payments suspended for June and July since the minimum sanction period has not been served. June (though a partial month) and July will count as the second and third months of the three-month sanction period. Once the fixed period has ended and the client has complied with program requirements, the ESW will schedule the client for reassessment at which time a new APR will be signed.

2. If the fixed sanction period passed while the client’s case was suspended but still open, and she did not cure the sanction, the TANF case will be approved in a suspended status if she applies for assistance again.
The eligibility worker will not issue a payment until notified by the ESW that the client has complied.

Example: The client failed to complete her job search assignment and was sanctioned for one month beginning 4/1. She notified the worker on 4/12 that she had moved and was now living out of state. Her case was closed effective 4/30. On 8/15, the client reapplied for assistance. Because the sanction was still in place, she was instructed to contact the ESW in order to cure the sanction. She agreed to complete a job search assignment, but because she did not do so by the end of the 30-day processing timeframe, her application was approved in a suspended status. The client successfully completed the job search assignment on 10/27 thereby curing the sanction. The ESW notified the EW of the client’s compliance on that date, the suspension was lifted and the client’s payments began 10/27, the date she completed the activity.

In both sanction situations, the time clock for the twenty-four month time limit, which includes months in which partial payments were made, resumes at re-approval. The client is still allowed the VIEW disregards when employed and in a sanction.

K. Sanctions when a client moves to another case: When a sanctioned individual moves from one case to another, the sanction continues uninterrupted. The sanction always follows the adult VIEW participant; it does not follow the children or the case.

L. When a sanctioned VIEW participant leaves the household in a sanctioned month, the payment for the remaining household members will be reinstated for the following month. The agency must verify the date on which the sanctioned individual left the home.

Example: Household consists of mom, father, and three children. The father of the children was sanctioned effective 7/1 for non-compliance with VIEW. The payment to the family is suspended as a result of the sanction. The father leaves the household 7/8 and this is verified by the landlord. The month of July remains a sanctioned month. The payment is reinstated effective 8/1 as long as the father has not returned to the home.

M. VIEW Appeal Procedures: The following procedures must be followed at all appeals involving VIEW Sanctions:

1. A representative from the Employment Services Program Service Staff (VIEW) must be present during the appeal hearing.

2. The hearing officer will notify Employment Services Staff of the date and time of the appeal hearing.

3. The summary of facts must be prepared jointly by the Eligibility Staff and Employment Services Staff to ensure that both ESP eligibility and participation issues are stated in the summary.

4. If the appeal is filed timely and payments continue pending the hearing decision, the sanction must be imposed as soon as administratively possible when the decision sustains agency action. There is no overpayment in this situation.
901.7 VIEW PAYMENT CALCULATION - To reward work, a VIEW participant may earn up to the assistance unit's federal poverty level (or up to 150% of the federal poverty in the case of TANF-UP households) and remain eligible for TANF for up to twenty-four months from the date that the initial Agreement of Personal Responsibility is signed.

A. The VIEW payment calculation applies to the following:

1. Unsubsidized employment and,
2. Paid on-the-job training listed at 1000.13.G.

B. This calculation does not apply to the following:

1. FEP Program at 1000.13.D, and
2. Hardship cases (Section 901.9).

The VIEW payment calculation differs from the TANF payment calculation located in Section 305, Appendix 3.

An individual who is working when she signs the Agreement of Personal Responsibility is entitled to the VIEW earned income calculation the month following the month in which she signs the Agreement. If it is not administratively possible to impact that payment, a supplement must be issued.

For those VIEW participants who obtain unsubsidized employment during VIEW participation, the VIEW earned income calculation is to be used for payments effective the month following the month when employment begins. If it is not administratively possible to impact that payment, a supplement must be issued.

VIEW participants do not have earned income screened at 185% and the standard of assistance. They may receive the standard deduction from gross income and 20% of the remainder,* and child or adult care costs as disregards.

See Chapter 900, Appendix 1 for the VIEW Payment Calculation, Appendix 2 for VIEW Income Examples, and Appendix 3 for the Federal Poverty Level table.

A TANF recipient who enters the VIEW program erroneously, i.e., the recipient did not report earnings that he received or expected to receive prior to entering VIEW that would have made the case ineligible for assistance using the 185% and standard of assistance income screenings, must have continuing eligibility determined by using 185% and standard of assistance screenings (see Section 305.1.A.) If the case does not pass the 185% and standard of assistance screenings, the case must be closed as soon as administratively possible. If the case is eligible at the standard of assistance screening, the VIEW payment calculation is appropriate for the month following the month in which the earnings were reported to the agency. Overpayments should be calculated per 503.7.

Note: For a case that contains an individual who is a VIEW participant, the VIEW payment calculation applies to the total countable earnings of all required assistance unit members.

*22 VAC 40-295-50
901.8 VEHICLE VALUE LIMIT - Repealed effective December 1, 2003.

901.9 TWENTY-FOUR MONTH LIMIT FOR TANF ELIGIBILITY - An assistance unit participating in the VIEW Program is limited to twenty-four months of TANF eligibility. The twenty-four months of eligibility is an accumulated period of time, which includes any month that an individual was a mandatory participant on the first day of the month.

A month in which the TANF payment is suspended is counted as a month of participation. When a mandatory VIEW participant becomes exempt, the case is placed in inactive status, or the TANF case closes, the 24-month count stops. If a TANF case closes with months remaining in the 24-month period, the count will resume at the point it stopped, when a new TANF application has been approved and a new Agreement of Personal Responsibility has been signed.

An assistance unit (AU) that had time left on the clock when the TANF case closed begins a new 24-month period if the AU did not receive TANF for at least 24-months after case closure. (Note: This does not apply to cases that were not closed but were in a suspended status. For TANF purposes, a suspended TANF case is considered an open TANF case even though no payments are issued for the month of suspension. Therefore, if the reason the AU did not receive TANF for a particular month was due to suspension instead of closure, that month will not be included in the count of months in which the AU did not receive TANF.) Sanctions will not carry over into a new twenty-four month period.

Hardship Exception to the Twenty-Four Month Time Limit:
The ESW may grant a hardship exception according to the hardship criteria found in Section 1000.24. The ESW must notify the eligibility worker when the hardship exception is to end, allowing time for the ten-day Advance Notice of Proposed Action to be mailed by the eligibility worker to the participant. The eligibility worker must close the TANF case. A hardship exception is an extension of the time limit and cannot be granted during the period of ineligibility (see 901.11).

A TANF case that is granted a hardship extension is not eligible for the VIEW payment calculation. (See 901.7.)

24-Month Time Limit Rules for Two-Parent Cases:
Prior to March 2008, the 24-month clock advanced simultaneously for both parents even if only one parent participated in VIEW. Effective March 1, 2008, the 24-month clock advances based on actual months of VIEW participation for each parent.

1. Each parent has his own VIEW clock. The months on the clock will advance only when the parent participates in VIEW, or is in a VIEW sanction.

When a VIEW participant leaves the assistance unit for any reason, the time on his clock stays on his individual clock. If the other parent did not participate in VIEW, she does not have a 24-month clock. If she has participated in VIEW, her VIEW months will stay with her.

Note: When either parent reaches 24 months on the VIEW clock, the TANF case will close. All family members in the household at the time of the TANF case closure will be subject to a VIEW period of ineligibility.
Example: Mr. and Mrs. X and their children receive TANF-UP. Mr. X enrolled in VIEW in December, and his VIEW clock started in January. He has six months on his clock. In June, Mr. X moved out along with one child, and applied for TANF for himself and the child. The months on the VIEW clock for Mrs. X are zero because she did not participate in VIEW due to the “caring for a child in the AU under 12 months” exemption.

2. When one parent leaves, the children are subject to the time limit and period of ineligibility of the parent with whom they reside.

3. When a caretaker who has never participated in VIEW is added to a case with a person who has a VIEW clock he is not subject to a clock until he participates in VIEW.

Example: Mr. Y and his six-month-old child move into the home with Mrs. Y. Mr. Y is the father of Mrs. Y’s child, so this will be a TANF-UP case. Mr. Y has never received TANF. He does not have a VIEW clock and is exempt from VIEW because he is the caretaker for his six-month-old child. Mrs. Y has a clock count 10 months. Mr. Y will not have a VIEW clock until he begins to participate.

4. When a caretaker who has participated in VIEW (has a VIEW clock) is added to a case where the other caretaker has also participated in VIEW (has a VIEW clock), each caretaker will retain his/her individual VIEW clock.

Example: Both Mr. and Mrs. Y have received TANF and participated in VIEW for the past six months. Mr. Y leaves the household and moves in with Ms. A, who is a VIEW participant with a VIEW clock of three months. Mr. Y will have a clock count of six months and Ms. A will have a clock count of three months.

5. When a caretaker who participated in VIEW is added to a case with a non-VIEW participant, he will keep the months on his clock. The non-VIEW participant will not have a clock until she begins to participate in VIEW.

Example: Mr. and Mrs. Y receive TANF and each has six months on their VIEW clock. Mr. Y leaves the household and moves in with Ms. A and their three-month-old child. Ms. A is exempt from VIEW as the caretaker for the three-month-old child and does not have a VIEW clock. Mr. Y will have a clock count of six months and Ms. A will not have a VIEW clock until she begins to participate.
901.10 NOTICE AND APPEAL OF THE TIME LIMIT* - VaCMS will generate the TANF 24-month Advance Notice of Proposed Action on the 15th day of the twenty-second month of VIEW participation and a copy will be retained in the forms history within VaCMS. The notice will inform the VIEW participant that their payments will be terminated at the end of the 24th month. The notice will also inform the participant of their right to appeal a case closure and the circumstances which constitute a hardship exception and how a hardship application is made. In addition, the ESW must make a good faith effort to inform the person verbally.

If a case is not in approved status in the system on the first of the month of month twenty-two, the eligibility worker must send a manual Advance Notice of Proposed Action. This notice must inform the recipient that financial assistance is scheduled to terminate due to the twenty-four month time limit and that she and her family will be ineligible for financial assistance for at least twenty-four months after termination of TANF. Information regarding circumstances which constitute a hardship and how to apply for a hardship exception must also be provided.

If an applicant is reapplying for TANF, and has already received a 60-day notice, the agency must note the number of remaining VIEW months on the Notice of Action to approve the case.

In the event the notice is not issued in a timely manner, the agency must not close the case due to the 24-month time limit until the full 60-day advance notice period has expired. Any payments received after the 24th month are an overpayment and must be recovered.

If a hearing is requested prior to the effective date of the proposed change to terminate payments due to the 24-month time limit, a participant appealing such change shall have the right to continued direct payment of TANF payments pending final administrative action on such appeal.

Termination of financial assistance due to expiration of the time limit is the only circumstance which requires a 60-day notice. For any other action, adhere to policy found at manual sections 401.1 - 401.6 regarding notification.

* Code of Virginia, §63.2-612
901.11 PERIOD OF INELIGIBILITY

A. A VIEW participant, and all other adults and children in the assistance unit at the time of TANF case closure due to receipt of twenty-four months of assistance, is ineligible for TANF (including Diversionary Assistance) for a period of twenty-four months. The period of ineligibility (POI) begins with the effective date of TANF case closure. Individuals subject to the twenty-four month VIEW period of ineligibility include:

1. A parent who is a VIEW participant;

2. A non-parent caretaker who is a VIEW participant. (Note: In no circumstance can the non-parent caretaker be removed from the assistance unit after the 60-day ANPA has been sent in order to create a child-only case for the purpose of avoiding imposition of the period of ineligibility);

3. Any other adult who is part of the VIEW participant’s assistance unit, including a second caretaker or a person considered essential to well-being (EWB);

4. An individual whose needs are not included on the payment due to a penalty but who otherwise is a required member of the assistance unit;

5. All children in the assistance unit. (See 305.4A(36) for treatment of income of a child who is ineligible for assistance as the result of a VIEW POI);

6. All natural or adoptive children of the participant who move into the participant’s home during the period of ineligibility, even if the child did not receive TANF with the participant during VIEW participation or received assistance only for part of the time. The same child will no longer be subject to the POI if he/she subsequently leaves the participant’s home;

7. A baby who is born to the participant or to a minor caretaker who is part of the assistance unit during the period of ineligibility. (Note: See Exception (2) at 901.11A for child of a minor parent who applies in her own right after becoming 18); and,

8. A child subject to the family cap provision.

The 24-month period of ineligibility status remains with any participating family member who moves out of the caretaker’s home during the period of ineligibility unless the individual meets one of the exceptions outlined in 901.11B.

The eligibility worker must inform the individual who applies for TANF for such children when the period of ineligibility expires.

Example 1: Ms. Smith’s TANF case was closed effective January 2018, due to expiration of the period of eligibility while she was participating in the VIEW Program. Her son, Joe, who was an assistance unit member while Ms. Smith participated in the VIEW Program, moved to his grandparent’s home in June 2018.

In that same month, Joe’s grandmother filed an application for TANF, for herself and Joe. The application for TANF is denied because Joe was an assistance unit member during Ms. Smith’s VIEW participation in which the period of eligibility had expired. Joe will remain ineligible for receipt of
TANF until the entire 24-month period of ineligibility has expired.

Example 2: Ms. Smith, who is a TANF recipient with her sons Josh and Joe, began participating in the VIEW Program in March 2018. Josh moved out of Ms. Smith’s home in June 2018 to move in with his aunt. The aunt applied for TANF, on Josh's behalf, in June 2018. The aunt's TANF application for Josh may be approved, if Josh is otherwise eligible, because Ms. Smith's TANF case was not in a period of ineligibility when Josh left.

B. EXCEPTIONS: (1) If the caretaker dies during the period of ineligibility, the children may receive TANF with another relative, if otherwise eligible. (2) A minor parent or child who turns 18 during the period of ineligibility may apply and receive TANF in her own right for herself and her child(ren), if otherwise eligible. (3) If it is determined that the caretaker (both caretakers in a two-parent TANF household) became totally disabled during the period of ineligibility or became required to care for a disabled family member living in the household, and such a disability or situation prevents the individual from being self-supporting, the caretaker and children in the family may receive TANF payments without regard to the period of ineligibility. The worker must assist the parent in pursuing other benefits, as appropriate. (4) If a child is removed from the home of a parent as a result of a child protective services report or complaint during the period of ineligibility and is placed in the home of a relative, the relative may be eligible to receive assistance if otherwise eligible.

A Medical Evaluation (032-03-0654) completed by a medical professional will be used to verify the disability of the caretaker. (The client’s disability will be considered total if the medical indicates that she cannot work 20 hours a week or more). The disability must be re-evaluated based on new verification at the end of the anticipated duration as noted on the medical statement or every 90 days whichever occurs first. If the medical form is incomplete, the eligibility worker must contact the medical professional to obtain the missing information before acting on the medical.

When the caretaker is needed on a substantially continuous basis to care for a family member who is living in the household (the family member does not have to be included on the TANF payment), the family member must have a verified physical or mental disability and must have caretaking needs that prevent the caregiver from being self-supporting. These caretaking needs include the need for attendance, supervision, and home care, and other needs related to the family member’s disability. A medical professional must complete a Statement of Required Presence of Caregiver form (032-03-0020) to verify the family member’s condition, and the need for the caregiver to be available on a substantially continuous basis. If the disabled family member is out of the home for substantial portions of the day, the caretaker will not be considered to be needed on a substantially continuous basis, and the TANF payments will not be extended beyond the 24th month.

When the disabled caretaker is eligible to receive Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI), on-going verification of the disability will not be required. When the disabled family member who requires a caregiver is eligible to receive SSI or SSDI, additional verification of the need for a caregiver for the disabled family member will
be required annually. In addition, when the medical professional has indicated a specific duration that the caregiver will be needed, the eligibility worker will request verification of the need for the caregiver at the end of the anticipated duration as noted on the Statement of Required Presence of Caregiver form.

The TANF case is to be closed as soon as administratively possible upon verifying that the caretaker is able to work or is no longer needed to care for a disabled family member living in the home. Once the TANF case is closed, the 24-month POI will resume.

Example: Mrs. Waters began her 24-month POI on August 1, 2017. On October 15, 2017, she applied for TANF. On the date of application, she provided a medical form verifying she was expected to be disabled from September 20, 2017 to June 30, 2018. She is approved for TANF beginning October 15. Since any month the client receives TANF is not counted toward the 24-month POI, October will not be a POI month.

Mrs. Waters furnished additional medical forms every 90 days as required to verify her continued disability. A medical form was submitted on June 15, 2018, which indicated she was no longer disabled. The worker closed the case effective June 30, 2018. Mrs. Waters had 22 months (24 months minus the two POI months she completed – August and September) remaining in her 24-month POI. The POI resumed July 1, 2018. Mrs. Waters’ VaCMS case was updated to reflect the new POI period on the 24-month VIEW Clock – Details screen for all AU members for July 1, 2018 to April 30, 2020.

901.12 TRANSFERS - Active VIEW cases transferred to another agency should be treated as follows:

A. After notification from the EW that the TANF case transfer to the new locality/agency has been completed, the ESW will transfer the open ESP enrollment to the new locality/agency. All attempts should be made to transfer the ESP enrollment within five working days of notification. Whenever possible, the benefit and the VIEW record should be transferred together.

B. The receiving agency’s ESW will make sure the appropriate months are reflected on the 24-month clock. The 60-month clock continues to advance for each month TANF is received.

C. When a VIEW case with earnings transfers to another agency, the VIEW clock continues. In the case of a UP household in which one participant is employed, there will be no break in the months on the individual’s clock. When the new agency opens the client’s ESP enrollment, the ESW should make sure the appropriate months are reflected on the 24-month clock. The clock for the other participant will stop unless she was in a sanction at the time of the transfer. Her clock will resume in the month after the ESW completes an assessment and updates her APR.

Example: Mr. and Mrs. Waters’ case is transferred from locality A to locality B on May 26. Mr. Waters is employed when the case transfers. Locality B will restart his clock beginning with the month of June. Mrs. Waters is participating in VIEW but is not employed and not sanctioned. Locality B will restart her clock the month after an assessment is completed and the APR is updated.

D. A sanction period continues when a sanctioned VIEW case transfers to another agency.
901.13 Transitional Benefits - VIEW participant may be eligible for transitional services for up to 12-months beginning with the month following TANF case closure. VIEW transitional services are child care, medical/dental services, work-related expenses, emergency intervention services, transportation, Transitional Employment and Training Services (TET) and the VIEW Transitional Payment (VTP). The exact period of eligibility will depend on the specific service and the client’s employment status. Eligibility criteria for transitional child care paid from Child Care funds are located in the Child Care Guidance Manual. Eligibility for all other transitional services, including transitional child care paid from VIEW funds, is located in Chapter 1000 of this manual.

A. VIEW Transitional Payment (VTP)

The purpose of the transitional payment is to encourage job retention. The amount of the VTP is $50 for each VIEW participant who meets the criteria listed below. The VTP amount is $100 for a two-parent household in which both parents meet the VTP criteria. If one parent leaves the home, the payment must be reduced by $50.

Criteria for Receipt of the VTP:

1. The TANF case closes for any reason other than:
   a. when there is no eligible child in the home (including a child ineligible due to truancy);
   b. when the client cannot be located; or
   c. when the renewal has not been submitted and completed by the 30th day after the renewal end date.

2. The TANF recipient must not be in an IPV penalty period for TANF at the time of the TANF case closure.

3. The TANF recipient is a VIEW participant at time of the TANF/VIEW or TANF-UP/VIEW case closure. (Note: It is important that the EW confirm that the ESW has an open ESP enrollment before closing the TANF case to establish the VTP).

4. The VIEW participant must be employed at least 30 hours per week, and earning at least minimum wage at the time of TANF case closure. (Note: If the client’s scheduled hours of employment for a given week fall below 30, a VTP may still be established as long as the average weekly scheduled hours for the month are 30 or more).

   Note: In a two-parent household, if either parent has been referred for a VIEW sanction or is currently in a VIEW sanction at the time of the TANF case closure, the entire household is ineligible for a VTP.

Additional Considerations in Establishing a VTP:

1. An individual is considered a VIEW participant if she has been assessed, has a current APR and an open TANF/VIEW or TANF-UP/VIEW case, even if she does not have a current component assignment. In most circumstances, a VIEW participant will be assigned to a component activity at the time she becomes eligible for a VTP. In some rare circumstances, this will not be the case but the client will still meet the definition of a VIEW participant and may be determined eligible for a VTP.
Example: Client is sanctioned, but reports employment after the end of the fixed sanction period, thereby curing the sanction. Prior to any action by the EW, the ESW will open the VIEW enrollment and notify the EW to lift the sanction. If the client’s income from employment makes the client ineligible for the next month, the client will still be evaluated and approved for VTP if she meets the VTP eligibility criteria. The ESW will close the VIEW enrollment and open the VTP enrollment in the ESP module. (Note: Individuals who report employment during the fixed sanction period do not meet VTP eligibility criteria.)

2. Prior to establishing a VTP, the EW must verify the client’s wages. For previously reported employment, the wage verification cannot be more than 30 days old. If the wage verification is more than 30 days old, the client must provide current verification of employment prior to the effective date of the TANF case closure. For new employment, the client will have 10 days from the date the new employment is reported to verify the employment. This 10-day period may extend beyond the effective date of the TANF case closure. (For example, TANF case is closing effective April 30. Client reports new employment on April 29. The client will have until May 9 to provide verification of the new employment.

3. The client may be eligible for VTP if he/she meets all other VTP eligibility criteria. Client statement may be used for prospective calculations to determine ongoing TANF eligibility but not for the establishment of the VTP. In all instances, a VIEW case must already be open prior to the establishment of a VTP.

The first of the twelve VTP payment months should be the month established by the VaCMS system following TANF case closure. This will be either the month immediately after the TANF case is closed or the next month.

Example: The EW enters the TANF case closure on February 14 effective February 28. The EW does not enter the VTP until February 27, after the February 26 cut-off date. The VTP period will then begin April 1, the first month when the action can be implemented. The client will not receive a TANF payment or a VTP payment for March. However, the client will be entitled to a full twelve months of VTP as long as she continues to meet VTP eligibility criteria. The VTP period will run from April 1 through March 31.

4. When the client is eligible for a VTP, the EW will contact the ESW to make sure that the ESP enrollment is open prior to closing the TANF/VIEW or TANF-UP/VIEW case. The EW will then enter information in VaCMS to establish the VTP and generate the monthly payment. A Notice of Action will generate through Central Print to notify the individual of the VTP approval, the TANF/VIEW or TANF-UP/VIEW case closure and reporting requirements.

5. If a client who is approved for, and begins receiving a VTP, appeals the TANF case closure and requests that the TANF payment be reinstated during the appeal, the VTP will be stopped. If the client loses the appeal and the TANF case is closed, the EW will again evaluate eligibility for a VTP following VTP guidelines. If the client is eligible for VTP, the 12-month VTP eligibility period will begin with the month after the second TANF case closure.
6. If the client relocates to another locality in Virginia, the agency will transfer the VTP case. The client will continue receiving VTP as long as VTP eligibility requirements are met. If the client is no longer eligible, a notice must be sent to advise the client of this.

Criteria for Termination of VTP:

1. The client is no longer working at least 30 hours per week.

2. The client's earnings fall below the current federal minimum wage.

3. There are no TANF eligible children in the home. Note: If the only eligible child(ren) in the home at the time the TANF case closed reaches the age of 18 (or has already reached the age of 18 but had remained eligible for TANF because he/she was scheduled to graduate before reaching age 19 and he/she has now graduated) during the VTP period, the caretaker's eligibility for VTP will not be affected.

4. The client files a TANF reapplication.

Additional Considerations in Terminating a VTP:

1. If the VTP closes for any of reasons listed above, or if the VTP is closed automatically by VaCMS at the end of the 12-month period, no notice is required prior to case closure. If the VTP closes per client request, a notice is required.

2. When employment ends, hours fall below 30 per week, wages decrease to below the current federal minimum wage, or the only eligible child leaves the home, the VTP must be closed and cannot be re-established. The VTP must be terminated if there is a job change causing a break in employment which results in the average hours for the month falling below 30 per week.

3. The VTP must also be ended if the employment is with an educational or training institution and the job ends because the employer closes for summer break (lasting more than thirty days).

Official closures by educational or training institution employers for quarter or semester breaks (lasting less than thirty days) during which the client cannot work will not impact the VTP payment.
901.14 Full Employment Program - The Full Employment Program (FEP) is a subsidized, training-oriented employment activity for VIEW participants who have been unable to find a job on their own. FEP uses government funds to directly subsidize wages paid by the employer. Wages are paid through the regular employer payroll based upon hours worked in lieu of TANF payments. A monthly stipend is issued to the employer for the duration of the FEP placement. The VIEW participant is an employee of the FEP employer and receives a paycheck rather than a TANF payment.

The FEP placement and stipend periods are a fixed six-month period unless the case will reach either the 24-month or 60-month limit on the receipt of TANF. Under those conditions, a shorter placement (of at least three months) can be established so that the placement end will coincide with the end of the receipt of TANF payments. The placement begins the month FEP employment begins and ends on the last day of the final month of the placement, e.g., placement begins June 10 and continues through November 30, and the corresponding stipend period begins on July 1 and ends on December 1. The begin date of placement cannot be a date within the last 11 days of the placement month due to notification requirements for TANF recipients since no TANF payment will be made during the FEP placement.

Any caretaker who is participating in VIEW may participate in FEP. Generally, only one person in a case should be in FEP at any time. However, if the employer agrees (in writing) to accept one stipend for two case members who will be assigned to an FEP placement for the same time period, the ESW can enroll more than one person in FEP. No member of a case serving a VIEW sanction can participate in FEP unless the minimum sanction period has elapsed.

A. TANF Payment Diverted To Employer - When notified by the VIEW worker of the FEP placement, the eligibility worker must take action in VaCMS to enroll the individual as a FEP participant and divert monthly payments to the employer. The EW must send an Advance Notice of Proposed Action informing the recipient that the TANF payment will be suspended. Note: Suspension in the context of FEP participation means that no monthly payment will be issued to the FEP participant while in the placement. It does not mean that action to suspend the payment should be taken in VaCMS, as this would prevent issuance of the monthly stipend to the employer. The recipient is enrolled in FEP by completion of the Activity and Employer/Employment Details screens in the ESP module of VaCMS.

If the Eligibility worker receives notification of a FEP placement during the 10-day notice period, the VaCMS system should not be updated until the first of the following month. It will be necessary to issue the initial employer stipend out of Benefit Adjustment. The EW should act on the reported change within three business days whenever possible. However, the EW must act on the reported change within 10 days.

Example: On May 23, the Eligibility Worker receives the FEP Communication Form from the ESW indicating a FEP Placement began on May 18. The Eligibility Worker should wait until June 1 to enter the information into the VaCMS system. A TANF payment will be made to the client for June.

This is not an overpayment since the Eligibility Worker was not able to provide timely notice. The initial employer stipend for the month of May should be issued out of TANF Benefit Adjustment at the beginning of June. The June employer stipend will be issued through the monthly batch process and will be received by the employer at the beginning of July.

B. TANF Eligibility During FEP Placement - A participant remains eligible for TANF, despite no payment being made to the client for the duration of the FEP placement, with two exceptions:
1. no eligible children remain in the home, and
2. a VIEW sanction is imposed on the FEP case as a result of non-compliance with the VIEW program by the FEP participant. See 901.6.
Eligibility continues during FEP participation even though changes reported would otherwise cause the case to be ineligible, e.g., a parent with income in excess of 130% of the federal poverty level.

1. During placement in FEP employment, the recipient must continue to report required changes (Section 401.2.B.2.), and the changes must be entered in VaCMS. Although the information entered does not affect eligibility of the TANF case, the changes must be evaluated in accordance with SNAP and Medicaid requirements and may impact the assistance unit’s eligibility for SNAP or Medicaid.

2. If a redetermination is due anytime during the FEP placement and the case is receiving TANF and SNAP, the redetermination must be completed when due. Changes in the participant’s circumstances will not affect TANF eligibility during the FEP placement, except as noted in paragraph B above.

3. If the case is TANF only, the eligibility worker may postpone the redetermination until the last month of the FEP placement, since a full evaluation of eligibility must be completed at that time. In determining ongoing eligibility following termination of the FEP placement, the EW must take into account any changes that have occurred during the placement. If the FEP participant is retained by the employer following termination of the placement, wages received are evaluated the same as for unsubsidized employment.

C. Issuance of Stipend Payments to the Employer - The employer stipend is a monthly payment paid as partial reimbursement of expenses incurred by the employer for wages and training provided to the FEP participant. The stipend is a predetermined, fixed amount of $300 monthly. Stipends are normally issued on the first of each month through the monthly batch process. However, the first stipend must be issued through Benefit Adjustment when VaCMS cannot be updated because of the 10-day timely notice period.

Stipends are paid beginning the month after the participant enters a FEP placement. FEP stipends are issued for up to six consecutive months unless notified by the ESW to discontinue the payments prior to the end of the placement. In no instance are stipends to be paid for more than six months.

D. Issuance of TANF Payments during the FEP Placement - A supplemental payment to the recipient may be issued in the following situations:

1. The EW is notified by the ESW that the participant worked less than an average of 20 hours per week, with good cause. Good cause means that the failure to work was outside the control of the FEP participant, such as, but not limited to, loss of child care, transportation, illness of the FEP participant or a family member, or another emergency situation. The number of hours worked and good cause are determined by the ESW. If the ESW determines good cause does not exist, no supplement is to be issued.
The EW will issue a supplemental payment through Benefit Adjustment using gross earnings information provided by the ESW and other countable income received in the month for which the supplement is issued. The amount of the payment is determined using the VIEW calculation. If an overpayment or penalty is in effect, the payment to the FEP participant must be reduced accordingly.

2. Both a TANF payment and monthly FEP stipend must be issued in the final month of the FEP period.

E. Issuance of Employer Bonus - The ESW will notify the eligibility worker on the VIEW Full Employment Program Communication Form (032-03-0655) when a bonus payment must be issued. The bonus payment is a predetermined, fixed amount of $500 payable to the employer. A bonus is paid if the participant is hired permanently at any time during the placement period or within 30 calendar days after the placement has ended. The EW will issue the bonus payment through Benefit Adjustment. Only one bonus payment may be issued per VIEW participant per FEP placement.

The bonus cannot be issued in the same month a stipend has been issued. For example, if the final stipend payment is issued in October, the bonus payment cannot be issued until November.

F. Treatment of Child Support Payments - FEP participants must continue to redirect all support to the Division of Child Support Enforcement (DCSE) while in a FEP placement. DCSE will issue to FEP participants all child support payments they would otherwise be entitled to receive. This includes $100 disregard payments and other support payments they would receive if they were receiving a TANF payment.

G. Replacement of Stipend or Bonus Checks - The FEP employer will contact the ESW if check replacement is necessary, and the ESW will notify the EW using the VIEW Full Employment Program Communication Form (032-03-0655). If a stipend is reported as lost, stolen, or mutilated, follow procedures in Section 502.5.D. and Appendix I to Chapter 500 to stop payment.

The employer must complete the required three copies of the Affidavit on Check Endorsement. The employer will determine the appropriate person to complete and sign the affidavit. This is usually an employee in the accounting department with responsibility for endorsing checks received. If the employer endorses his checks with a stamp, the endorsement stamp should be stamped once on the signature section at the end of the affidavit.

FEP check replacements follow the same process as reissuing or replacing TANF or DA checks. Once the worker is notified of a lost/stolen/mutilated/cancelled/returned check, the worker must update the status and reissue the check through Maintain Checks. Under no circumstances should a local check be written to replace the original check as no process exists to reimburse the locality.
VIEW PAYMENT CALCULATION

STEP 1: Determine the total gross earned income of all required assistance unit members. Compare the total gross earned income to the Federal Poverty Level (see Federal Poverty Level Chart found in Appendix 3 of this Chapter) for the appropriate assistance unit size. The federal poverty level is to be applied uniformly in all of locality groupings of localities in Virginia.

If the gross countable earned income equals or exceeds the federal poverty level, the case is ineligible.

If the countable gross earned income is less than the federal poverty level, go to STEP 2.

STEP 2: Determine countable unearned income and compare it to the standard of need for the assistance unit. If the countable unearned income equals or exceeds the standard of need, the case is ineligible.

If the countable unearned income is less than the standard of need, the difference is the deficit amount. Go to STEP 3.

STEP 3: Use the gross earned income total of all required assistance unit members.

In the following order:

a. Deduct the standard deduction* per assistance unit from total gross earned income if the assistance unit qualifies for this deduction and the income is not exempted. The standard deduction is defined in Section 305.3.B.3; standard deduction amounts by family size are listed at 305.1.A.1.b.

b. Deduct 20% of the remainder. *

c. Deduct anticipated expenses, up to the allowable maximum as specified in Section 305.3.B.5 for care of each child or incapacitated adult included in the assistance unit if the member qualifies for this disregard.

* 22 VAC 40-295-50
STEP 4: Add the total net countable earned income and the TANF deficit from STEP 2. The net countable earned income plus the TANF deficit shall not exceed the federal poverty level. (Note: If the net countable income plus the TANF deficit exceeds the federal poverty level, reduce the TANF payment so the poverty level is not exceeded.)

STEP 5: Subtract any penalties from the TANF payment.

Note: If the TANF payment calculates to $9.99 or less, the assistance unit will be ineligible for a money payment but the case will be deemed eligible for TANF (VIEW) and will be carried as an active TANF case.

**TANF-UP PAYMENT CALCULATION**

STEP 1: Determine the total gross earned income of all required assistance unit members. Compare the total gross earned income to 150% of the Federal Poverty Level (see Appendix 3 of this Chapter) for the appropriate assistance unit size. One-hundred fifty percent of the federal poverty level is to be applied uniformly in all locality groupings in Virginia.

If the gross countable earned income equals or exceeds 150% of the federal poverty level, the case is ineligible.

If the countable gross earned income is less than 150% of the federal poverty level, go to STEP 2.

STEP 2: Determine countable unearned income and compare to the standard of assistance for the assistance unit. If the countable unearned income equals or exceeds the standard of assistance, the case is ineligible.

If the countable unearned income is less than the standard of assistance, the difference is the deficit amount. Go to STEP 3.

STEP 3: Use the gross earned income total of all required assistance unit members.

In the following order:

a. Deduct the standard deduction as defined in Section 305.3.B.3 for the assistance unit from total gross earned income if the assistance unit qualifies for this deduction and the income is not exempted.

b. Deduct 20% of the remainder*

c. Deduct anticipated expenses, up to the allowable maximum as specified in Secion 305.3.B.5 for care of each child or incapacitated adult included in the assistance unit if the member qualifies for this disregard.
STEP 4: Add the total net countable earned income and the TANF-UP deficit from STEP 2. The net countable earned income plus the TANF-UP deficit shall not exceed 150% of the federal poverty level. If necessary, reduce the TANF-UP payment so that the total of the net earned income plus the TANF-UP payment equals 150% of the federal poverty level.

If the TANF-UP payment calculates to $9.99 or less, the assistance unit will be ineligible for a money payment; but the case will be deemed to be eligible for TANF-UP (VIEW) and will be carried as an active TANF-UP case.
VIEW PAYMENT CALCULATION

Example 1: Earnings

Assistance unit of 2 in a Group II locality. Mom earns $456 gross income each month.

Step (1) Screening at Federal Poverty Level

$ 456.00 Gross Monthly Earnings <
$1372.00 Monthly Federal Poverty Level for 2

Step (2) Unearned Income

$ 274.00 Standard of Assistance for 2
- 0.00 Unearned Income
$ 274.00 TANF Deficit

Step (3) Earned Income Disregards

$ 456.00 Gross Monthly Earnings
- 164.00 Standard Deduction for 2
$ 292.00 x 20% = 58.40
- 58.40 Net Earned Income
$ 233.60

Step (4) Add Net Earned Income and TANF Deficit

$ 233.60 Net Earned Income
+ 274.00 TANF Deficit
$ 507.60 < Monthly Federal Poverty Level for 2

$ 274.00 = VIEW Payment (TANF Payment)
Example 2: Earned and Unearned Income

Assistance unit of 2 in a Group II locality. Mom earns $305 gross monthly and the assistance unit also receives $120 unearned income monthly.

Step (1) Screening at Federal Poverty Level

- $ 305.00 Gross Monthly Earnings <
- $1,372.00 Monthly Federal Poverty Level for 2

Step (2) Unearned Income

- $ 274.00 Standard of Assistance for 2
- $120.00 Unearned Income
- $ 154.00 TANF Deficit

Step (3) Earned Income Disregards

- $ 305.00 Gross Monthly Earnings
- $164.00 Standard Deduction for 2
- $ 141.00 x 20% = 28.20
- $ 28.20 Net Earned Income

Step (4) Add Net Earned Income and TANF Deficit

- $ 112.80 Net Earned Income
- $154.00 TANF Deficit
- $ 266.80 < Monthly Federal Poverty Level 2
- $ 154.00 = VIEW Payment (TANF Payment)

Example 3: Earnings Result in Ineligibility

Assistance unit of 4 in a Group III locality. Mom earns $2,092 monthly gross income.

Step (1) Screening at Federal Poverty Level

- $2,092.00 Gross Monthly Earnings
- $2,092.00 Monthly Federal Poverty Level for 4

The assistance unit is ineligible.
Example 4: Maximum Reimbursable

Assistance unit of 6 in a Group II locality. Mom earns $457 gross monthly income.

<table>
<thead>
<tr>
<th>Step (1)</th>
<th>Screening at Federal Poverty Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ 457.00</td>
</tr>
<tr>
<td></td>
<td>$2,812.00</td>
</tr>
</tbody>
</table>

Gross Monthly Earnings < Monthly Federal Poverty Level for 6

<table>
<thead>
<tr>
<th>Step (2)</th>
<th>Unearned Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ 543.00</td>
</tr>
<tr>
<td></td>
<td>- 0.00</td>
</tr>
<tr>
<td></td>
<td>$ 543.00</td>
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</tbody>
</table>

Standard of Assistance for 6
Unearned Income
TANF Deficit

|          | $516.00        |

Maximum Reimbursable Amount

<table>
<thead>
<tr>
<th>Step (3)</th>
<th>Earned Income Disregards</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ 457.00</td>
</tr>
<tr>
<td></td>
<td>- 234.00</td>
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<tr>
<td></td>
<td>$ 223.00</td>
</tr>
<tr>
<td></td>
<td>- 44.60</td>
</tr>
<tr>
<td></td>
<td>$ 178.40</td>
</tr>
</tbody>
</table>

Gross Monthly Earnings
Standard Deduction for 6
x 20% = 44.60

Net Earned Income

<table>
<thead>
<tr>
<th>Step (4)</th>
<th>Add Net Earned Income and TANF Deficit</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$ 178.40</td>
</tr>
<tr>
<td></td>
<td>+ 516.00</td>
</tr>
<tr>
<td></td>
<td>$ 694.40</td>
</tr>
</tbody>
</table>

Net Earned Income < Maximum Reimbursable TANF Deficit
< Monthly Federal Poverty Level for 6

|          | $ 516.00            |

= VIEW Payment (TANF Payment)
Example 5: Earned Income Case with Immunization Penalty

Assistance unit of 2 in a Group III locality. Mom earns $966 gross monthly income. One member of the assistance unit receives $60 SSA monthly. There is a $50 immunization penalty.

Step (1) Screening at Federal Poverty Level

$ 966.00  Gross Monthly Earnings <
$1,372.00  Monthly Federal Poverty Level for 2

Step (2) Unearned Income

$ 347.00  Standard of Assistance for 2
- 60.00  Unearned Income
$ 287.00  TANF Deficit

Step (3) Earned Income Disregards

$ 966.00  Gross Monthly Earnings
- 164.80  Standard Deduction for 2
$ 802.00  x 20% = 160.40
- 160.40  Net Earned Income
$ 641.60

Step (4) Add Net Earned Income and TANF Deficit

$ 641.60  Net Earned Income
+ 287.00  TANF Deficit
$ 928.60  < Monthly Federal Poverty Level for 2

$ 287.00  = VIEW Payment (TANF Payment)

Step (5) Apply Immunization Penalty

$ 287.00  VIEW Payment
- 50.00  Immunization Penalty
$ 237.00  Net VIEW Deficit

$ 237.00  = VIEW Payment (TANF Payment)
Example 6: TANF-UP Household

Assistance unit of 4 in a Group II locality. Dad earns $1,505 gross income.

Step (1) Screening at 150% of the Federal Poverty Level $3,138.00

- $1,505.00 Gross Monthly Earnings
  - $3,138.00 < 150% of the Monthly Federal Poverty Level for 4

Step (2) Unearned Income

- $ 411.00 Standard of Assistance for 4
  - 0.00 Unearned Income
  - $ 411.00 TANF Deficit

Step (3) Earned Income Disregards

- $1,505.00 Gross Monthly Earnings
  - 174.00 Standard Deduction for 4
  - $1,331.00 \( \times 20\% = $266.20 \)
  - $ 266.20 Net Earned Income
  - $1,064.80

Step (4) Add Net Earned Income and TANF Deficit

- $1,064.80 TANF Deficit
  + 411.00 < 150% of the Monthly Federal Poverty Level for 4
  - $1,475.80 = VIEW Payment (TANF Payment)

  $ 411.00
### 2018 FEDERAL POVERTY LEVELS

<table>
<thead>
<tr>
<th>Size of Family Unit</th>
<th>Monthly Poverty Guideline</th>
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<tbody>
<tr>
<td>1</td>
<td>$ 1,012.00</td>
</tr>
<tr>
<td>2</td>
<td>$ 1,372.00</td>
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<tr>
<td>3</td>
<td>$ 1,732.00</td>
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<tr>
<td>4</td>
<td>$ 2,092.00</td>
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<tr>
<td>5</td>
<td>$ 2,452.00</td>
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<tr>
<td>6</td>
<td>$ 2,812.00</td>
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<tr>
<td>7</td>
<td>$ 3,172.00</td>
</tr>
<tr>
<td>8</td>
<td>$ 3,532.00</td>
</tr>
</tbody>
</table>

For each additional person add $360

150% of the Federal Poverty Level (for TANF-UP Families)

<table>
<thead>
<tr>
<th>Size of Family Unit</th>
<th>150% of the Federal Poverty Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$ 1,518.00</td>
</tr>
<tr>
<td>2</td>
<td>$ 2,058.00</td>
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<tr>
<td>3</td>
<td>$ 2,598.00</td>
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<tr>
<td>4</td>
<td>$ 3,138.00</td>
</tr>
<tr>
<td>5</td>
<td>$ 3,678.00</td>
</tr>
<tr>
<td>6</td>
<td>$ 4,218.00</td>
</tr>
<tr>
<td>7</td>
<td>$ 4,758.00</td>
</tr>
<tr>
<td>8</td>
<td>$ 5,298.00</td>
</tr>
</tbody>
</table>

For each additional person add $540
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Transmittal 65
Full-time Employment - employment which is at least 30 hours per week at minimum wage or greater.

GED – General Educational Development is a test made up of five sections – language arts, writing, social studies, science, reading and mathematics - that certifies that the individual successfully completing it has academic skills equivalent to those of a high school graduate.

Good Cause – a mitigating circumstance determined by the VIEW worker to satisfactorily explain a participant’s failure to comply with program requirements with the result that a sanction will not be imposed.

Hardship Exception – an extension of the 2-year limit on TANF payments allowed under certain very limited circumstances for specific prescribed reasons.

Household member - any child or adult residing with the applicant/recipient. The individual need not be a member of the applicant/recipient’s assistance unit to qualify as a household member.

Job Finding – the identification of available and appropriate jobs.

Job Follow-Up – contact with the client, no less than monthly, during which the ESW provides case management services to assist with job retention and upgrading once the program participant has become employed.

Job Placement - placing a participant in an unsubsidized or subsidized job. Job placement is the result of job finding and job matching.

Job Readiness – instruction in skills needed to seek or obtain employment. Job readiness may include instruction in workplace expectations, help in developing resumes and interviewing skills, and life skills training. Job readiness may also include preparation for employment through participation in short term substance abuse or mental health treatment, or in rehabilitation activities for those who are otherwise employable. Such treatment must be determined necessary by a qualified medical professional.

Job Search - a structured, time-limited period during which the participant is required to search for employment. In order to complete the job search, the participant is required to perform a specified number of hours of job search and document the job search contacts, or find and accept employment.

Job Skills Training - general training that prepares an individual for employment (examples may include keyboarding or computer literacy classes) or job specific training required by an employer in order to obtain, keep, or advance in a specific job or occupation, or training needed to adapt to the changing demands of the workplace; all training and education programs, including post-secondary associate, certificate, and baccalaureate level programs, that are included in the definition of Vocational Education and Training; instruction in a second language for participants who have a high school diploma or GED; unpaid practicums or internships offered by a college or training program, or by an employer.
Limited English Proficiency – the limited ability of a person whose native language is one other than English, or who lives in a family or community environment where a language other than English is the dominant language, to speak or understand the English language.

Local Agency or Local Department - any one of the local social services or welfare agencies throughout the Commonwealth that administers the TANF and VIEW programs.

Local VIEW Annual Plan - a yearly plan submitted to the department by each local agency which describes the locality's VIEW program.

Making Good Progress / Satisfactory Progress - A consistent standard of progress based on written guidelines as developed by the educational institution or training agency and measured periodically at intervals of less than one year such as a term or quarter for VIEW clients in educational or training placements.

Non-Core Work Activity - one of the activities to which a participant can be assigned and which can be included in the federal participation rate calculation once a minimum 20 hour assignment to a core activity has been made if the total hours equal the federal requirement. The non-core work activities are education below the post secondary level and job skills training.

On-the-Job Training (OJT) – a type of paid employment in which an employer provides training to an employee in order to increase the employee's skills on the job.

Other Activities – an activity to which a participant may be assigned to increase her employability but which does not meet the definition of a work activity or count in the federal participation rate calculation. "Other locally developed" is the only Other Activity.

Other Locally Developed – an activity developed or used by a local agency to increase a client's employability, but which does not meet the definition of a work activity, or the definition of post secondary education, and which will not be included in the federal participation rate calculation.

Participant - a TANF or TANF-UP recipient who has signed the Agreement of Personal Responsibility and is participating in the VIEW program.

Part-Time Employment - employment less than 30 hours per week at minimum wage or greater.

Pending - a non-active program component to which a participant who cannot move immediately into an active component is assigned.

Post-Secondary Education - a program of instruction beyond the high school level offered by an institution of higher education as determined by the Secretary of Education in accordance with the Higher Education Act of 1965.

Public Service Program (PSP) - unpaid work in a public or private non-profit organization designed to improve the employability of the participant while providing a clearly defined public service. Public Service Program placements must be limited to projects that serve a useful community purpose in fields such as health, social service, environmental protection, education, urban and rural development, welfare, recreation, public facilities, public safety, and child care.
Queue – the list of TANF recipients who are referred by the eligibility worker for mandatory participation in the VIEW program.

Reasonable Distance – for VIEW placements, a reasonable distance is considered to be no more than one hour travel time each way from the participant’s place of residence to the site of the activity.

Sanction – a suspension of a VIEW participant’s TANF payment for non-compliance with program requirements; to suspend a participant’s TANF payment for noncompliance.

Satisfactory Participation – participation in a program activity equal to the hours assigned to the activity for a stated time period. For job search assignments, satisfactory participation equals the completion of all required job search contacts, or employment.

Self-Initiated Participant - a participant who has enrolled in post-secondary education or in training activities prior to enrollment into the VIEW program.

Supplemental Nutrition Assistance Program (SNAP) Employment and Training (SNAPET) - The employment and training program for SNAP recipients.

Standard Operating Procedures (SOP) – a guide developed by the local agency that specifies the procedures to be followed in administering the VIEW program. The SOP is part of the local VIEW Annual Plan.

Subsidized Employment – employment in which government funds are used to directly subsidize the participant’s wages. The Full Employment Program (FEP) is considered subsidized employment.

Supportive Services - services such as child care and transportation provided to a VIEW program participant with an open TANF case to enable the participant to take part in program activities or to work.

TANF-UP – a 2-parent TANF household in which the parents have at least one child in common and in which neither parent is disabled.

Termination – closure of the TANF case for failure of a mandatory VIEW recipient to sign the Agreement of Personal Responsibility.


Time Limitations – limitations on the period of time a family is eligible for TANF assistance based on federal and state statutes

Transitional Services – a category of services available to former VIEW participants once the TANF case is closed. Transitional services include services such as child care, transportation, Transitional Employment and Training services (TET), and the VIEW Transitional Payment (VTP) which may be provided to a VIEW participant whose TANF case has been closed.

Unsubsidized Employment - employment in which the participant is paid at least minimum wage and for which no government funds are used to subsidize the wages earned by a participant.
1000.1 THE VIRGINIA INITIATIVE FOR EMPLOYMENT NOT WELFARE (VIEW)

The Virginia Initiative for Employment not Welfare (VIEW) is a program providing employment, education, and training opportunities to recipients of Temporary Assistance to Needy Families (TANF). VIEW is based on the conviction that all citizens deserve the opportunity to progress to self-sufficiency.

VIEW offers Virginians living in poverty the opportunity to:

1. Obtain work experience and work skills necessary for self-sufficiency
2. Contribute to the self-sufficiency of their families
3. Achieve economic independence

In addition to the program and client goals listed above, the Virginia Department of Social Services and local agencies must meet federal requirements regarding types and intensity of client participation in VIEW in order to maintain federal block grant funding.

The VIEW Program offers a number of education, training, and work components designed to meet the individual needs of the TANF recipients required to participate in VIEW and to meet federal requirements. These components, referred to generically as work activities, are divided into core and non-core work activities.

Participants who are age 18 or 19, and who are enrolled in high school or GED programs, and who are meeting attendance requirements are considered to have met all VIEW program requirements. In order for their participation to be captured for federal reporting, 35 hours must be entered as ‘assigned weekly hours’ in Activity Detail in VaCMS. Additionally, the Participation Timesheet must be completed so that actual weekly hours equal 35. If the Participation Timesheet is not filled in, the activity will not count for federal reporting.

Unless full-time employed, including employment in On the Job Training (OJT) positions, each client referred to VIEW must be assigned to a minimum of 35 hours per week in work activities to ensure that the client’s actual hours of participation can be counted in Virginia’s participation rate calculation. In all situations (with the exception of participants age 18 or 19, enrolled in high school or GED and meeting attendance requirements) the first 20 of these hours must be in a core work activity or combination of core work activities. Additional hours needed to meet the participation requirement can be made up of additional hours from the same core work activity or activities, a different core work activity, or a non-core activity.

A. Core Work Activities

The core work activities, and any limitations on their use for federal participation rate calculations, are described below.

* Job Search/ Job Readiness. The initial assignment for most VIEW clients will be to job search. Clients may also be assigned to job readiness before, during, or after a job search assignment.

Job search includes applying for and interviewing for jobs through participation in group job search or job club, or through individual job search.

Job readiness includes many of the activities that are part of structured job search programs such as group job search or job club – instruction in work place expectations, help in developing resumes and interviewing skills, and life skills training. Additionally, federal regulations allow job readiness to include substance abuse treatment, mental health treatment, and rehabilitation services necessary to help a participant become job ready.

Limitations: For purposes of the federal work participation rate calculation, an assignment to job search and/or job readiness (including job readiness for the purpose of substance abuse, mental health, or rehabilitation services), cannot count for more than 4 consecutive weeks.
Additional consecutive weeks cannot be counted in the calculation of the federal participation rate.

During a twelve-month period, the total countable hours of participation in job search and/or job readiness assignments cannot exceed 120 hours for a single parent with a child under age 6 in the home or 180 hours for all other individuals. (This is equivalent to 6 weeks of participation in the work activity.) Additional participation in job search and/or job readiness in a twelve-month period can be assigned and entered into the ESP module in VaCMS, but will not be counted in the calculation of the federal participation rate.

- **Unsubsidized Employment**, including Self-Employment. Unsubsidized employment is employment in which no government funds are used to directly subsidize the individual’s salary and in which the individual earns at least the federal minimum wage. Minimum wage means an hourly rate directly equaling the federal minimum wage or an hourly rate of at least $2.13 which, when supplemented by tips, equals at least the minimum wage.

- **Subsidized Employment**. Subsidized employment is employment in which government funds are used to directly subsidize the participant’s wages. Subsidized employment is designed to provide training while the participant works on the job. The VIEW Program provides one subsidized employment component—the Full Employment Program (FEP). FEP is subsidized employment in which the employer receives a fixed monthly stipend and the client receives wages instead of a TANF check.

- **Community Work Experience Program (CWEP)**. CWEP is an unpaid work placement in a public or private non-profit organization. An assignment to CWEP is appropriate for participants who need to learn or improve skills or work behaviors, or to secure a job reference, in order to find paid employment. The number of hours of a CWEP assignment is based on the TANF payment amount and SNAP allotment.

- **Public Service Program (PSP)**. Public Service Program placements are similar to work experience in that the client will be engaged in unpaid work in a public or private non-profit organization with the goal of improving employability. PSP placements must additionally provide a clearly defined public service. Examples of public service activities include court-ordered, unpaid work, as well as participation in other programs or placements that benefit the community. TANF and SNAP benefits are not considered in the calculation of public service hours. Public service assignments will in no case exceed 35 hours per week, with the exception of court-ordered assignments of greater length.

- **On-the-Job Training (OJT)**. On-the-job training is training provided by an employer to a paid employee to help the employee become proficient on the job. A portion of the employee’s wages are typically reimbursed to the employer. OJT includes paid on-the-job training offered through WIA, paid college work study programs and internships, apprenticeship programs, and AmeriCorps placements in which the individual is paid a stipend to cover living expenses.

- **Vocational Education and Training**. Vocational education and training is training or education directly related to employment designed to prepare the participant for a specific trade, occupation, or vocation. It does not include advanced degree education. It does not include ABE, GED, or ESL. Examples of activities that can be classified as vocational education and training are technology, business, and health sciences programs leading to certificates, associate degrees, or baccalaureate degrees in such areas as HVAC repair (heating and air conditioning), information technology, medical equipment repair, accounting administration, medical assisting, and practical or registered nursing. Programs meeting the definition of vocational education and training are offered by a wide range of institutions including vocational-technical schools, community colleges, 4-year colleges, other post-secondary institutions, proprietary schools, and secondary schools offering vocational education.
- On-the-job training (OJT);
- Job search and job readiness;
- Public Service Program;
- Vocational education and training;
- Job skills training (including post-secondary education directly related to employment);
- Education below post-secondary: high school, ABE, GED.

(2) An individual counts as engaged in work for a month for the overall rate if:
- she participates in work activities during the month for an average of at least 30 hours per week; and
- At least 20 of the above hours per week come from participation in the core activities:
  - unsubsidized employment
  - subsidized employment (FEP)
  - CWEP
  - on-the-job training
  - job search and job readiness assistance
  - PSP
  - vocational education and training

(3) Above 20 hours per week, additional core activities or the following non-core work activities may count as participation:
- job skills training (including post-secondary education directly related to employment)
- below post-secondary education

(4) Post-secondary education not directly related to employment and locally developed components do not count toward the work participation rate.

(5) An individual counts as engaged in work for the month for the two-parent rate if:
- an individual and the other parent in the family are participating in work activities for an average of at least 35 hours per week during the month, and
- At least 30 of the 35 hours per week come from participation in core activities.
- Above 30 hours per week, non-core activities may also count.

If the family receives federally funded child care assistance, then the participants must be engaged in work activities for an average of at least 55 combined hours per week to count as a two-parent family engaged in work for the month. At least 50 of the 55 hours per week must come from participation in core work activities. Above 50 hours per week, non-core activities may also count as participation.

Federal Work Participation Rate Examples

Whether or not a client is counted in meeting the federal participation rate for a given month is dependent on the actual hours of participation entered into the ESP module in VaCMS. The following examples illustrate in a general way how hours count or do not count toward participation. See Appendix J, Understanding Federal Participation, for detailed examples.

Example 1: **Month 1**: Ms. A participates in job search for 36 hours in week 1; 33 hours in week 2; 24 hours in week 3; and 39 hours in week 4. She counts toward the participation rate for the month because she participated in core activities averaging at least 30 hours per week.

**Month 2**: Ms. A continues job search. In week 1, she is in job search for 33 hours. She is in job search in week 2 for 36 hours. She then gets a job and works for 30 hours each in weeks 3 and 4. Job search which counts for federal participation is limited to no more than four consecutive
weeks. Because Ms. A had four weeks of job search in month 1, her first week of job search in month 2 cannot be counted. She will not count toward the work participation rate for month 2 because her hours for the month will average less than 30 a week.

**Month 3:** Ms. A works 35 hours per week throughout the month. She counts toward the work participation rate.

**Example 2:** **Month 1:** Ms. B starts receiving assistance on January 25 and is referred to VIEW. For January, she is included in the denominator, but does not count toward the work participation rate because she has not yet become a VIEW participant and has not been assigned to any activities.

**Month 2:** On February 13, Ms. B is assessed and assigned to job search. She participates in job search for 36 hours per week for the remainder of February. Her two weeks of job search in February are not enough to allow her to count toward the work participation rate in February.

**Month 3:** She continues her job search through March 14. Her job search ends and she is assigned to community work experience starting on April 1. Due to the gap in participation between March 14 and April 1, she does not count toward the work participation rate in March because she did not have enough hours of participation to average 30 hours per week.

**Example 3:** Ms. C participates in unsubsidized employment of 20 hours per week and 15 hours per week in vocational education and training for the entire month. Both are core activities. She counts toward the work participation rate because she has participation of at least 30 hours per week.

**Example 4:** Ms. D participates in CWEP for 18 hours per week and GED for 17 hours per week in September. Though she participated in activities averaging at least 30 hours per week, she did not have at least 20 hours per week in a core work activity and, therefore, will not count toward the work participation rate.

**F. Limitations/Special Provisions**

- Vocational education and training may count for only a total of 12 months for any individual. This is a lifetime limit.

- In counting individuals for each participation rate, not more than 30 percent of individuals engaged in work in a month may be included in the numerator because they are:
  - Participating in vocational educational training; or
  - Individuals deemed to be engaged in work by participating in educational activities.

- Hours spent in post-secondary education not directly related to employment do not count toward the work participation rate.

- An individual's participation in job search and job readiness assistance counts for a maximum of 120/180 hours in any 12-month period. At any time, only four weeks of job readiness/job search may be consecutive.

**G. Data Reporting**

Data from the **VaCMS** is sent to the federal government on a quarterly basis. It is very important that all information in the **VaCMS** is accurate and entered in a timely manner. Actual hours of **participation are to be**

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entered into the ESP module in VaCMS. States are required to provide data on a quarterly basis. This data is used to compute federal work participation rates as well as to determine Virginia's compliance with other federal requirements. To meet the federal deadline for reporting, data will be extracted from the system on the first day of the second month following the end of a calendar quarter.

To make sure that the locality and state get credit for all of the cases that are engaged in work activities and avoid the possible loss of federal funding, it is imperative that work participation data is accurately entered into the ESP module by the 15th of the following month. Partial hours of participation must be rounded up or down using the standard rounding rules (.50 or greater is rounded up; .49 and below is rounded down). Virginia will not receive credit for the cases that do not have current work participation rate data entered into the Data Collection and ESP modules of VaCMS.

Actual hours of participation must be entered in the system and must be supported by documentation in the case file. With the exception of unsubsidized employment and OJT, the hours entered into the system on a monthly basis must be verified each month. Self-reporting by a participant is not sufficient documentation.

For unsubsidized employment and OJT, the ESW may enter projected actual hours of participation for up to six months based on current, documented actual hours of work. Verification of employment may be obtained from the EW, but a copy of the verification must be retained in the VIEW record. After six months, or at any point the ESW becomes aware that the hours of employment have changed, the actual hours of participation in unsubsidized employment or OJT must be verified. After the changed employment hours are verified, projected hours of participation should again be entered for up to six months.

Actual hours are defined separately for paid employment, including OJT positions, and for unpaid activities.

Employment and OJT: Actual hours for participants who are employed or in OJT mean hours of paid employment, including paid vacations, paid sick leave, and paid holidays observed by the business.

Job Readiness, Group Job Search, CWEP, PSP, Vocational Education and Training, Job Skills Training, Education below Post-Secondary: Actual hours for participants in unpaid activities, with the exception of individual job search, are actual hours of participation, and hours during which the client would have participated but was unable to because the placement was not available due to holiday closure. Based on federal requirements, only the following ten holidays can be included in the calculation of actual hours of participation for participants in unpaid activities: New Year’s Day, Martin Luther King Day, President’s Day, Memorial Day, Independence Day, Labor Day, Veteran’s Day, Thanksgiving Day and the day after, and Christmas Day. Closures for other holidays, or closures by educational or training institutions for quarter or semester breaks during which the placement is not available to the participant cannot be considered as holiday closures.

In addition to the 10 holidays, 80 hours of excused absences may be counted toward participation in the preceding 12-month period for clients in unpaid activities. Excused absence hours should be counted toward participation only when the hours will enable the client to meet the participation requirement which otherwise would not have been met.

Excused absences that may be counted as actual hours of participation include:

- court dates
- appointments with CPS or Division of Child Support Enforcement (DCSE) which cannot be scheduled outside participation hours
- unavailability of the scheduled activity due to strike, lockout, or shutdown
• unavailability of the scheduled placement site due to closures for holidays not included in the list of the ten holidays specified by federal requirements
• unavailability of the scheduled placement site due to closures due to weather or natural disasters
• illness or medical need of the participant or family member residing in the home
• interruptions in child care arrangements
• domestic violence issues
• transportation problems or auto accident funeral or death of a family member

For clients who have not participated in VIEW in the past, the 12-month period begins the month after the APR is signed. For current VIEW clients, or former VIEW clients returning to the program, the 12-month period includes the current month and the preceding 11 months. No more than 16 hours of excused absences may be approved in any month. In order for the excused absence to be considered as actual hours of participation, the client must have been scheduled to participate in the activity for that time period. The decision to consider an absence as excused and to include it in determining actual hours of participation will be made by the local agency within the limitations described above.

Example 1: Mr. A signed the initial APR on October 16, 2017 and was assigned to a job readiness workshop for the period October 23, 2017 – November 30, 2017. In November, he missed 18 hours of job readiness class, 16 hours of which were counted as excused absences. Beginning December 1, he was placed in a PSP position with the Extension Service. During his 6-month placement, he had absences of 8 hours in December, 23 hours in January, 8 hours in February, 19 hours in March, 16 hours in April, and 16 hours in May. Because his countable excused absences from November through April totaled 80 hours, neither the May absences nor absences for other months in the 12-month period (November 2017, the month after he signed the APR, through October 2018) can be counted as participation. The first month in which excused absences can again be counted as participation is November 2018. At that time, the preceding 12-month period is November 2018 back through December 2017 and the 16 hours of excused absences counted for November 2017 are no longer included in the 80-hour allowable maximum.


Example 2: Ms. B was enrolled in VIEW from February 2017 until December 2017 when she moved to New York. Ms. B had excused absences of 16 hours for October 2017, 16 hours for November 2017, and 16 hours for December 2017. Ms. B returned to Virginia in April 2018 and reapplied for TANF. She was approved for TANF and was referred to VIEW effective April 2018. She signed a new APR April 5, 2018 and was assigned to a Work Experience placement effective June 2018. (See 1000.4,C for reasons for exemption from initial job search). Ms. B had excused absences of 16 hours for June 2018 and 16 hours for July 2018. She also missed 20 hours for August 2018 but those hours could not be counted toward participation since Ms. B had already used the maximum 80 hours of excused absences in the period August 2018, back through September 2017.

In September 2018, Ms. B will still have used a maximum 80 hours within the previous 12 months (September 2018 back through October 2017). In October 2018, 64 hours will have been used (October 2018 back through November 2017; the October 2017 hours are no longer counted) and up to 16 hours of excused absences are available for that month.

Ms. B misses 3 hours in October which are counted for a total of 67 hours in the 12-month period. In November 2018, 51 of the maximum 80 hours will have been used in the 12-month period (November 2018 back through December 2017; the November 2017 hours are no longer counted.) Ms. B has 30 hours of absences for that month; 16 hours, the maximum for one month, can be counted. For the November 2018 back to the December 2017 12-month period, absences will again total 67 hours.

Example 3: Ms. A is scheduled to participate in community work experience for 6 hours each day, Monday through Friday. She is placed in the local school library. The library was closed on Christmas Day and the day after Christmas. Christmas day is one of the ten holidays that can be included in the calculation of actual hours. The day after Christmas cannot be counted as a holiday. Since Ms. A has only one previous excused absence for 4 hours in December, and since her excused absences total only 30 hours in the preceding 12-month period, the 6 hours for the day after Christmas when the placement site was not available can be included in the calculation of actual hours as an excused absence.

Example 4: Ms. B is participating in CNA classes that meet 6 hours each day. Ms. B’s grandfather passed away in New York on May 26th, a Friday. Ms. B left for New York that weekend, and missed the entire next week - May 29th, May 30th, May 31st, June 1st, and June 2nd – a total of 30 hours. Since she had not had any previous absences from the program in May, and no excused absences in the preceding 12-month period, 16 of the 18 hours she missed on 5/29, 5/30, and 5/31 can be counted as excused absences. Both June absences, 6/1 and 6/2, totaling 12 hours, can be counted as excused and counted as actual participation.

Example 5: Continuing with Example 4, Ms. B had to return to New York the last week in June to help with her grandfather’s estate. She attended class on Monday and Tuesday, the 26th and 27th, but was absent on the 28th, 29th, and 30th, a total of 18 hours. Since she had used 12 hours of excused absences for the month of June when she went to New York the first time, only 4 hours of the 18 hours from her second visit to New York can be counted as an excused absence.

Example 6: Mrs. C was working at the Guy Noir Detective Agency. She earns 6 days of paid sick leave a year, but had used them by November when she was out of work for a week with the flu. Since she had already used all her leave, she was not paid for those five days, totaling 40 hours, even though her boss sympathized with her situation. None of the 40 hours can count as actual hours of participation. (Only hours of paid employment, including paid vacations, paid sick leave, and paid holidays can count as actual hours for clients who are working or are in OJT).

Unpaid activities - individual job search: It is the responsibility of the participant to record actual hours for each job contact listed on the Job Search form. Actual hours include travel time between interviews. Actual hours do not include travel time to the first interview or from the last interview. Questionable contact information will be verified by the agency with the employer. If travel time incorporated into actual hours reported appears questionable, verify the expected travel time through MapQuest or a similar site. Only actual hours reported (and verified, if questionable) can be counted in determining participation.

Since individual job search does not have to be conducted within a fixed daily schedule, and can be scheduled around holidays and other appointments, holiday closures and excused absences cannot be considered in determining actual hours of participation.

Case Documentation: The case must be thoroughly documented by completing the Participation Timesheet-Details screen in the ESP module of the VaCMS and the Holidays and Excused Absences for Participants in Unpaid Activities form (032-03-0106) whenever holidays or excused absences are counted as actual hours of participation for unpaid activities.
- What barriers does she have that might affect a work site placement?
- What kind of work site position will appeal to her?

Once the ESW has the answer to these questions, work can begin on matching the client with a work experience position, or on developing a position for the client. The client can identify her own work site placement as long as it with a public or private non-profit organization willing to enter into a work site agreement with the agency.

There may be some situations in which a participant was sanctioned for non-compliance at a CWEP or PSP sites. The client has completed an act of compliance and the sanction is lifted. The ESW would like to assign the participant to another CWEP or PSP, but due to a negative history at assignments for CWEP and PSP there are no other placements available. In this circumstance, the participant should be encouraged to develop her own worksite.

The agency will work with the client to secure any evaluations, counseling, or treatments needed to resolve the reasons for the non-compliance, or which would support the client being exempted from VIEW due to a verified physical or mental health condition.

3. Limitations on Work Site Assignments

a. The participant will not be required to use her public assistance income or personal resources to pay costs incurred while participating on a work site assignment.

b. The work site must be within a reasonable distance from the participant's home. The travel time from the participant's home to the work site cannot be more than one hour each way, based on transportation available to the participant.

c. The participant cannot be permanently placed in the position of a worker who is on sick leave, annual leave, leave without pay, or any other granted leave with or without pay. The participant cannot displace persons currently assigned to established, unfilled positions. The participant must not perform tasks which would have been undertaken by current employees or which would have the effect of reducing the work hours of paid employees.

d. The participant will not be assigned to work sites which are totally involved in political, electoral or partisan activities. The participant may be assigned to sites developed in the office of an elected official, however the participant cannot be required to engage in political, electoral, or partisan activities.

4. Criteria for CWEP Placements

a. A client can be assigned to CWEP immediately after the initial job search.

b. A client whose initial job search was waived because she had previously participated in VIEW during her current 2-year period of TANF eligibility may be assigned immediately to CWEP following assessment.

c. The initial assignment to CWEP shall be for a period of six months. The assignment will be entered as two consecutive enrollments of three months each. The client will be reassessed following the first three-month assignment. (Note: Only one Activity and Service Plan is required.)
d. The weekly number of hours of a CWEP assignment equal the total TANF dollar amount plus the SNAP benefit amount divided first by the federal minimum wage and then by 4.33.

e. The number of hours of a CWEP assignment is calculated at the time of the placement and is fixed. They do not vary from week to week or month to month. The hours are recalculated at each reassessment and at any time there is a change in the size of the assistance unit which also changes the benefit amount. Note: Mass changes to the SNAP allotment amounts and changes to the federal minimum wage amount will be addressed at the next reassessment after the change.

f. CWEP hours are not reduced by travel time to and from the placement. All CWEP hours are to be worked; meals and breaks can be included with hours worked or can be subtracted based on how they are treated for paid employees of the work site.

g. Calculation of Work Hours for TANF and TANF-UP Cases: Combine the total TANF dollar amount with the SNAP benefit amount received by members of the TANF household. Do not include the value of SNAP benefits received by household members who are not included in the TANF payment. Divide the total of the TANF payment plus SNAP benefits by the federal minimum wage, to determine the number of CWEP hours to be worked each month. Divide that result by 4.33 and round the final result down to the next whole number to determine the number of hours to be worked each week in the CWEP assignment.

CWEP placements cannot exceed 32 hours a week. The weekly CWEP assignment will be reduced to 32 hours if the calculated hours exceed that number.

h. CWEP Assignments for TANF-UP Cases: Both parents in a TANF-UP case may be placed in CWEP. In that circumstance, each will be required to participate the calculated hours. For example, if the calculation requires 25 hours of participation, and if both parents are assigned to CWEP, each individual will participate 25 hours a week. Additionally, each individual will have to be assigned to another activity for an additional 10 hours per week to meet his/her VIEW participation requirement.

5. Referral of the Client to the Work Site: After the client’s hours of CWEP participation are determined, and a good work site match is made, the ESW will work with the client and the work site to schedule an appointment for the client to be interviewed for a position. The ESW will complete the VIEW Referral to Work Site form (032-02-0300), make a copy for the record, and give the referral to the client to take to the interview. The work site supervisor will complete the bottom portion of the form, copy it for the work site, and send it back to the ESW showing the outcome of the interview. If the work site accepts the client for the placement, the worker will proceed with putting the client in CWEP and in arranging any needed supportive services.

If the client does not have Medicaid coverage, the worker will provide both the client and the work site supervisor with a signed copy of the Notification of Workers’ Compensation Requirements and Procedures form (032-03-0675) and will explain the responsibilities of all parties should there be an injury at the work site.

6. Concurrent Assignments: Since it is not possible for a CWEP assignment to meet the 35-hour participation requirement, all participants assigned to CWEP must also be assigned to another component that will enhance employability.

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(1) Submit the name, case number, and Begin and End date for the individual assigned to CWEP. The CWEP Placements Without Medicaid Coverage form must be completed online at:
http://www.localagency.dss.state.va.us/divisions/bp/tanf/forms/view.cgi.

(2) If the client is injured on the work site and wishes to file a claim with Workers’ Compensation, the ESW must provide to the client in writing a list of three physicians from whom the client may choose to seek medical attention. The list of three physicians must be entered on the Panel Physician Form and given to the client. The form can be located at http://www.covwc.com/clientimages/48008/forms/panelphysicianform.pdf. Print the form.

To obtain a list of physicians, access the CareWorks Managed Care Services website at https://www3.viad.com/careworksmcs/public/app/compass/provider_search_main.asp. This site will provide a list of doctors who can be on the physician panel. The physicians listed provide care under the Worker’s Compensation Act. The site allows the worker to find physicians by zip code, city, county, proximity and specialty.

If the worker is unable to provide a panel from the site, the worker may contact Chad Smith at the Department of Human Resource Management to obtain a panel of doctors for the area. The contact information is chad.smith@dhrm.virginia.gov.

c. The CWEP work site supervisor must immediately complete an Employer’s Accident Report form when an accident occurs. This Virginia Workers’ Compensation Commission form can be accessed on line at http://spark.dss.virginia.gov/divisions/dhrm/vdss/forms/index.cgi. Scroll down to Workers’ Compensation. Click on Employer’s Accident Report form. Print the form.

1. The supervisor must investigate the claim, document work place hazards/conditions involved in accident and complete ‘Employer’s Accident Report’ based upon his investigation.

2. List the employer as CWEP and the agency number as 997.

3. The original form must be sent to:

Virginia Department of Social Services
Division of Benefit Programs
Economic Assistance and Employment Unit
Attn: CWEP Placements without Medicaid Coverage
801 E. Main Street, 9th Floor
Richmond, VA 23219-2901
d. The Economic Assistance and Employment Unit of the Division of Benefit Programs at VDSS must:

1. Maintain case names and numbers received from local agencies of persons who do not have Medicaid and provide that information to the Department of Human Resource Management (DHRM).

2. Pay premiums per individual in a CWEP placement to DHRM.

3. Maintain a file of all Employer's Accident Report forms.

4. Notify the local department of social services of the disposition of the Workers' Compensation application.

e. DHRM's claims administrator (Managed Care Innovations):

1. Will notify VDSS when a claim for Workers' Compensation has been filed.

2. Contact both the injured worker and the work site supervisor for information about the accident.

3. Notify both the injured worker and VDSS home office of the disposition of the claim.

f. The VIEW participant must:

1. Immediately notify the work site supervisor in writing of workplace accident facts.

2. Inform the doctor when the visit is necessitated by an injury at work and that a claim for Workmen's Compensation has been filed. The doctor should submit a medical report and bills to MCI.

g. Workers' Compensation Hearings

1. When a request for Workers' Compensation has been denied, the VIEW participant may request a hearing. The request must be made to the Virginia Workers' Compensation Commission.

2. The Office of the Attorney General represents the state on cases in litigation. Managed Care Innovations will manage and coordinate the defense of the case with the Office of the Attorney General. Should any witnesses or supervisory testimony be required, the Office of the Attorney General will provide immediate notification to that individual.
F. PUBLIC SERVICE PROGRAM (PSP)

The public service program (PSP) shares many of the characteristics of CWEP. It provides an unpaid work placement in a public or private non-profit organization with the goal of improving the participant’s employability. Unlike CWEP, the PSP placement must provide a clearly defined public service. Examples of public service activities include court-ordered unpaid work, as well as participation in other programs or placements that benefit the community.

PSP assignments may be made for a maximum of 35 hours, with the exception of court-ordered assignments which will be made at the discretion of the court and may be for more than 35 hours. Participants assigned to PSP for less than 35 hours must also be assigned to another work activity order to meet the 35-hour participation requirement. Each assignment to PSP should be for a period of six months.

VIEW participants placed in PSP are not considered employees of the Commonwealth for purposes of the Workers’ Compensation Act. PSP placements can be made only for participants with Medicaid coverage unless the PSP site agrees to provide coverage under its own Workers’ Compensation plan. If a client is assigned to a PSP site and loses his Medicaid coverage, he is to be reassessed. If an unpaid work placement continues to be appropriate, the client can be assigned to CWEP. Assigned hours will be based on CWEP guidance at 1000.13. The former PSP site can be used for the CWEP placement, or the client can be assigned to another CWEP site. Alternately, the client can be assigned to a different component.

The development of PSP worksites, assignment and referral of participants to PSP worksites, limitations on the PSP positions, and PSP worksite monitoring follow CWEP guidance, with the exception that the public service provided through the placement must be a consideration in development of the site, and must be clearly documented in the record.

G. ON THE JOB TRAINING (OJT)

On-the-job training is a type of paid employment in which an employer provides training to an employee in order to increase the employee’s skills on the job.

3. The following are examples of on-the-job training that may be counted as a work activity in the VIEW Program:
   (a) On-the-job training offered through the WIOA;
   (b) Work study offered through a community college or a four-year college program;
   (c) Apprenticeship programs;
   (d) Paid internships offered by colleges or training providers in which the participant receives a wage or stipend for working and receiving training while on the job;
   (e) AmeriCorps Program placements in which the participant receives a stipend for living expenses; or
   (f) Sheltered workshop employment

4. With the exception of sheltered workshop employment and AmeriCorps placements, OJT positions that pay less than minimum wage do not meet the definition of employment and are not countable work activities. The minimum wage requirement is waived if the OJT position is sheltered workshop employment or an AmeriCorps placement. (Sheltered workshops are certified by the U.S. Department of Labor to pay commensurate wages which are based on the individual’s ability to perform in relation to the performance of a person without a disability. AmeriCorps participants receive a stipend related to hours of participation.)
3. Because OJT is a type of paid employment, the participant will not be required to participate in another concurrent activity if the client works in the OJT position 30 hours per week or more and earns at least minimum wage. Each assignment to OJT should be for a period of six months.

4. If the hours for any OJT position are less than 30 per week, the participant must be assigned to a concurrent program activity and must meet the 35-hour participation requirement.

5. A number of occupations, including cosmetologist, automobile mechanic, and dental assistant, can be trained either as a paid apprenticeship or as unpaid vocational education and training or as unpaid job skills training. Registered apprenticeship is a structured training program that combines on the job training and related technical instruction to train employees in occupations that demand a high level of skill in the private and public sectors. Occupations in construction, manufacturing, and the service industries utilize apprenticeship readily. A registered apprentice typically completes a minimum of 2,000 hours of supervised on-the-job training and a minimum of 144 hours of related classroom instruction for each year of apprenticeship. Information about apprenticeship requirements, apprenticable occupations, and employers offering opportunities in Virginia is available at http://www.doli.virginia/apprenticeship/registered_apprenticeship.html.

H. VOCATIONAL EDUCATION AND TRAINING

Vocational education and training is training or education designed to prepare the participant for a specific trade, occupation, or vocation. It is a countable activity for 12 months in a lifetime. The months of training do not have to be consecutive. Each assignment to vocational education and training should be for a period of time that will coincide with the length of the training/education program whenever possible but should not exceed six months.

Vocational education and training does not include education beyond the baccalaureate or degree, nor does it include ABE, GED, or ESL instruction. Examples of activities that can be classified as vocational education and training are technology, business, and health sciences programs leading to certificates, associate or baccalaureate degrees in the trades, information technology, medical equipment repair, accounting administration, medical assisting, practical or registered nursing, business, education, criminal justice and health sciences. Prior to entering vocational education and training, a participant must meet any educational or technical requirements of the occupation for which she is preparing or be enrolled in an activity to meet the requirements.

Programs meeting the definition of vocational education and training are offered by a wide range of institutions including vocational-technical schools, community colleges, post-secondary institutions, proprietary schools, and secondary schools offering vocational education. The choice of vocational education and training offered may vary in each locality, depending upon local labor market conditions.

Up to one hour of unsupervised study or homework time can be counted as vocational education and training for each hour of scheduled class time. The need for unsupervised homework/study time must be confirmed by the education or training program. Unless specifically required by the instructor, unsupervised study or homework time cannot be counted as vocational education and training when the training is outside the classroom and the activity does not support counting unsupervised study or homework hours. Supervised study time verified by the education or training program may also be counted as participation.
Example: A new VIEW participant has a 14-month old child and needs child care in order to participate in the program. The client has been unable to find a child care provider. The only child care center in the community that accepts infants will not have an opening for at least 30 days. Since the client is cooperating, and the situation is not within her control to change, an assignment to Inactive is appropriate.

D. Assignments to Pending do not stop the VIEW clock. Months assigned to pending count toward the client’s 24-month time limit. Pending assignments should be considered when the situation preventing assignment to an active component is the result of the client’s action or inaction.

Assign the client to Pending when the client is not cooperating with the agency to resolve the situation delaying active participation. Assignments to Pending may be made for up to 60 days but should not be extended. At no time will the assignment to Pending exceed 60 days.

Example: A new VIEW participant has a 14-month old child and needs child care in order to participate in the program. She has interviewed several child care providers who usually have openings, but she insists on waiting so she can place her child at a new center in her neighborhood. The center is not scheduled to open for 30 days. The agency agrees to allow her 30 days to either obtain a placement at the new center or secure a placement with one of the other available providers. The agency assigns the client to Pending, not Inactive, because the delay in making arrangements has been within the client’s control. (Note: Following the 30-day Pending assignment, the client will be assigned to an active component. If she does not participate, she will be referred for sanction for non-compliance).

E. The ESW will document in the case record the reason for the assignment to Inactive or Pending. The worker will outline in the record the plan of actions and anticipated timeframes developed with the participant to resolve the issues related to the non-active assignment. The worker will make referrals, provide supportive services including child care or transportation, or otherwise assist the participant as necessary so that the client can participate actively in VIEW. These referrals or other assistance will be included in the plan developed with the client and will be documented in the case record.

F. At the end of each 30-day assignment to Inactive, or up to 60-day assignment to Pending, the participant’s status will be reviewed and the Activity and Service Plan updated. It is expected that the local agency and participant will work together to resolve any issues related to participation by the end of these timeframes. The participant will be assigned to active VIEW components no later than the end of the maximum timeframes for Inactive and Pending assignments. After an assignment has been made to an active VIEW component, a participant will be subject to sanction if she fails to participate as required.
1000.17 MONITORING SATISFACTORY ATTENDANCE AND PROGRESS

Satisfactory attendance and progress must be monitored for all education or training assignments — vocational education and training, job skills training and education below the post secondary level. The **ESP module in VaCMS** must be updated as appropriate to reflect progress.

A. Satisfactory attendance and progress is measured according to the attendance and satisfactory progress policies developed by the education or training provider and approved by the local social services agency.

1. In the case of education below the secondary level, satisfactory progress is defined as one grade level increase for every three months of participation.
2. In the case of post-secondary education, satisfactory progress is defined as maintaining a “C” average for each grading period and completing the number of credits needed each grading period to successfully complete the degree in the two year time period.

B. Daily supervision and record keeping will be provided by the education or training course instructor.

C. The ESW will monitor the participant to assure that she is making satisfactory progress. Satisfactory progress is used to assess the continued appropriateness of the education or training component.

D. The ESW will examine and maintain in the participant’s case record copies of attendance records, certificates, diplomas and grades.

E. Education and training providers will complete a VIEW Education and Training Activities Attendance Sheet (032-03-0191) each month. The client may complete the attendance sheet if it is signed by the instructor or another school/training program official.

F. The ESW will contact the instructor to determine if the participant is satisfactorily progressing and to determine if the participant will successfully complete the activity within the two-year limit on TANF eligibility. Documentation of these discussions will be kept in the contact log.

G. For ABE, ESL, and GED assignments, documentation of satisfactory progress will be made every three months. In the case of post-secondary education, the participant’s progress will be monitored at a time consistent with the institution’s schedule, e.g. at the end of a semester or quarter.

H. If it appears to the ESW and the education or training instructor that the individual may have a cognitive, developmental, learning or other disability that is impeding her progress, the participant will be screened for learning disabilities if screening has not yet been done. If the screening indicates that the participant is likely to have a learning or other disability, the individual will be referred for an in-depth evaluation. If it is determined that the participant has a verified disability, and there are reasonable accommodations that would help the individual progress in the program, the ESW will work with the individual and education or training provider to put such accommodations in place.
I. If neither the ESW nor the instructor believes that there is any likelihood that the individual has a disability that is impeding progress, or if the individual is referred for screening/evaluation and the possibility of a disability is ruled out, or if the participant refuses to undergo screening or evaluation, the worker and instructor will discuss placement of the participant into another activity that may better facilitate the participant’s job readiness.

J. A participant who has not made satisfactory progress after six months of participation in an education or training component (two consecutive grading periods in the case of post-secondary education) will be reassessed and assigned to another component which she can be expected to satisfactorily complete. No participant will be allowed to continue in a below post-secondary education component if she has not made a grade level change by the end of the initial six months in the component.

K. Participants will not be assigned to education or training which requires more than twenty-four months to complete. Note: An exception will be made for an individual who was in a self-initiated education or training activity of longer duration at the time she enrolled in VIEW if the ESW approved the activity and incorporated it into the client’s Activity and Service Plan. (See 1000.13.H and 1000.15.A.) Approval of a second year of education or training will be made only if the participant can be expected to complete the education or training during the second year, had made satisfactory progress during the first year of education or training, and was enrolled full time.

L. Vocational education and training is subject to a lifetime limit of 12 months; it cannot be extended for a second year.

M. A participant who has successfully completed a training program will not be offered additional training unless she meets one of the following conditions:

1. There are no jobs in the community for the occupation in which the participant completed training, nor are there jobs projected in the future for the occupation, or

2. The participant needs additional training in the occupation in order to become licensed or certified, and certification or license is needed to obtain a job in the occupation.

   Every effort should be made to work with a participant who has already successfully completed a training program to find employment in the occupation for which she has been trained.

N. A participant who has been enrolled in more than one training component while in the VIEW program, and who did not successfully complete the activities for reasons solely within her control, will not be assigned to another training component.
1000.18 JOB FOLLOW-UP

A. Job follow-up is provided to all VIEW participants once they find full or part-time employment. Follow-up is provided for a minimum of three months unless the client begins receiving a VIEW Transitional Payment (VTP). (See 1000.22 B for information about VTP including job follow-up requirements).

1. Job Follow-Up - Open TANF Case

Job follow-up is carried out each month for each employed (either full or part-time) VIEW participant with an open TANF case. Job follow-up will continue for up to 24 months if the participant is employed throughout her VIEW participation and the TANF case is still open.

2. Job Follow-Up - Closed TANF Case Without VTP

Follow-up will continue for each employed (either full or part-time) VIEW participant once the TANF case has closed if the minimum three contacts have not been made and the client is not receiving a VTP payment. The VIEW enrollment will be closed and follow-ups ceased once the minimum three contacts have been completed or three months after the TANF case is closed – whichever comes first. The VIEW enrollment will remain open in the ESP module in VaCMS during the follow-up period but should be closed when the follow-ups are complete.

B. Job follow-ups must be made on or after the last day of the employment month and entered into the ESP module by the 15th of the following month. For example, the client begins employment on October 25th. The first follow-up will be made on or after October 31st and the data will be entered in the ESP module by November 15th. The second follow-up will be made on or after November 30th and the data will be entered in the ESP module in VaCMS by December 15th.

Whenever possible, the first follow-up contact will be a face-to-face meeting between the worker and the client. All other follow-up contacts may be completed by telephone or face-to-face. The date and result of the contact will be recorded on the Job Follow-Up Contact – Current VIEW Participants form (032-03-0403). If the client does not have a telephone or cannot be reached, the ESW will mail the client the VIEW Job Follow-Up form (032-03-0402) and record the date mailed on the Job Follow-Up Contact form.

Follow-up calls should be made between the last day of the month and the 5th of the next month so that any VIEW Job Follow-Up forms which have to be mailed can be returned by the client and follow-up entered into the ESP module system by the 15th.

Clients for whom the follow-up contact could not be successfully completed by telephone, and who are sent but do not return the VIEW Job Follow-Up form, will be referred for sanction if the TANF case is still open. If the client complies with program requirements and responds to the job follow-up request prior to the implementation date of the sanction, the sanction will not be imposed.

C. Job follow-up consists of two separate activities: on-going client contact to support job retention/career advancement, and wage verification.

1. Job Retention/Career Advancement Follow-up: The basic purpose of job follow-up is to assist the client in resolving any problems that may affect her employment. This purpose can best be
achieved through a conversation with the client in which problems can be discussed. Problems may relate directly to the job, or may involve difficulties in other areas of the client’s life.

Additionally, job follow-up provides the worker the opportunity to help the client in the area of career advancement – either with her current employer or through a move to a new position. Specific services which may be provided include:

a. job retention counseling

b. career exploration focused on employment with better wages, hours, benefits, or other factors that make a job a better fit for the client and lead to increased self-sufficiency

c. referrals to other program activities including education or training

d. provision of job leads or other resources for additional job search

e. work-related workshops or seminars

2. Wage Verification: The client’s hourly rate of pay and number of hours of employment per week must be verified by the first job follow-up. Verification may consist of information from the EW based on employer verification, pay stubs, wage forms, or direct contact with the employer by the ESW. The VIEW record should contain a copy of any wage and hours verification in the TANF record.

The hours and rate of pay verified at the first follow-up will be entered into the ESP module in VaCMS at that time. They will remain unchanged at the time of the 2nd, 3rd, 4th, 5th, and 6th monthly follow-ups unless a change is reported by the client.

If the client continues to have an open TANF/VIEW or TANF-UP/VIEW case, the worker will schedule a face-to-face reassessment for the 6th month of follow-up and will again verify the hours and rate of pay at that time. That information will be entered into the ESP module at the time of the follow-up in the 7th month, and when the 8th, 9th, 10th, 11th, and 12th follow-ups are made unless a change is reported by the client. The same procedure will be followed at the time the client has the next face-to-face reassessment in the 12th and 18th months of participation.

D. There are three possible outcomes to a job follow-up contact:

1. The participant is employed

2. The participant has left employment

3. The ESW is unable to contact the participant, or the participant does not respond to the job follow-up contact

Job follow-up information is recorded in the ESP module as well as on the Job Follow-Up Contact – Current VIEW Participants form. The ESW may also document follow-up information on the contact sheet or in the narrative.
Example: The VIEW client becomes employed effective October 4th. Complete a new Activity and Service Plan showing the client’s employment and outlining her responsibilities regarding monthly follow-ups. Enter the employment, wages, and hours information into the ESP module in VaCMS. This action will result in the client’s name being added to the monthly Job Follow-Up Report beginning with month two.

A face-to-face meeting or follow-up call will be made between October 31st and November 5th which will focus on job retention and career advancement. The ESW will complete the Job Follow-Up Contact form documenting the meeting or the call. If the wage and hours verification was not made at the time the employment information was entered into the ESP module, the ESW will verify that information at the follow-up.

The ESW receives notification that the TANF case will close effective December 31st. If the client is not eligible for VTP, enter the December follow-up information in the ESP module and continue doing regular VIEW job follow-ups until the required three minimum follow-ups have been completed. (See guidance at 1000.22.B for information regarding eligibility criteria for VTP.)
1000.19 REASSESSMENT

Reassessment provides the ESW and the participant the opportunity to review the participant’s progress in the VIEW program and address any problems which may present an obstacle to achieving self-sufficiency. The reassessment will identify the reason the participant was unable to obtain full-time unsubsidized employment or participate fully in the program and the ESW will assist the participant in resolving the identified barriers.

If there is a reason to believe that the participant’s failure to find full-time employment or participate fully in the program is related to a disability, the worker may offer screening, and if the screening identifies that the individual is likely to have a disability, will offer an in-depth evaluation, to identify the nature and severity of the disabilities, the individual’s limitations, and any accommodations needed. The individual’s Activity and Service Plan will be revised to reflect this information.

The ESW will conduct a reassessment whenever the participant leaves or completes an assignment. Reassessments may be completed prior to the end of the current assignment to ensure that participants are placed in new activities immediately after the end of an activity. (For example, if an assignment is scheduled to end 1/15, the ESW can schedule the reassessment appointment to take place prior to 1/15). The participant’s activity end date will not be shortened due to early reassessment unless the assigned activity actually ended before the scheduled end date shown on the Activity and Service Plan. In all cases, the reassessment must be completed no later than one week following the end of an assignment. New assignments will be scheduled to begin no later than two weeks after the reassessment and immediately, if possible. Prompt reassessment and reassignment will reduce the “down” time between activity assignments and will positively affect the agency’s participation rate.

The ESW must conduct a face-to-face reassessment interview with the participant following the completion of the initial Job Search. All subsequent reassessments may be completed through a face-to-face interview or by phone but, in all cases, the ESW must conduct a face-to-face interview with the participant at least every six months.

If the reassessment is conducted by phone, the ESW should document the case file specifying the date on which the new Activity and Service Plan was discussed and agreed to by the participant, mail the participant a copy of the Activity and Service Plan to sign and return, and key the new assignment information into the ESP module in VaCMS. The Activity and Service Plan is valid even if the client does not return a signed copy. The participant should be advised that the new program assignment must be carried out even if she does not return the signed Activity and Service Plan.
1000.20 SANCTIONS

A sanction is the suspension of the household’s entire TANF payment for program non-compliance. SNAP benefits may also be affected. Federal participation requirements differ in some respects from VIEW program requirements and are not considered in determining non-compliance.

All TANF and TANF-UP recipients who are determined eligible for the VIEW Program and have already signed an Agreement of Personal Responsibility are required to participate in VIEW. Recipients are subject to sanction if they fail to participate without good cause.

A. Good Cause for Failure to Participate

1) When a client is not in compliance with VIEW, the agency must attempt to contact the client by phone to encourage participation, explore good cause, and/or notify the client of a possible sanction. If the ESW determines from the contact that the participant did not have good cause for missing the appointment, or if the ESW is unable to contact the client verbally, the ESW must take action to begin the sanction process. The ESW will must take action to begin the sanction process. Based on agency procedures, the ESW will either send the client the VIEW Notice of Sanction/Termination (032-02-0307) or the Advance Notice of Proposed Action within 3 business days of the missed appointment. Alternately, the ESW will immediately notify the EW who will send the ANPA within 3 business days of receipt of the notification.

2) A participant who has good cause for noncompliance will not be sanctioned. Good cause will exist if:

a) The participant's inability to fulfill program requirements is due to circumstances outside her control or is the result of a change in circumstances over which the participant had no control. This includes but is not limited to situations in which the reason for the participant’s non-compliance was that the participant had a disability or a family household member had a disability that was not identified or was identified but not addressed. The worker must allow the client 30 days to verify the disability prior to referring for sanction.

b) Acceptable child care is not available when necessary for an individual to accept employment or enter or continue in the program. To be acceptable, the child care must meet all of the following criteria:

(1) The child care must be arranged:
   (a) by the participant, or
   (b) if the participant cannot arrange for the child's care, it must be arranged by the local department of social services with a legally operating provider;

(2) The child care must be within a reasonable distance from the participant's home or work site. This means that the travel time from the child's home to the child care provider and the work site is generally no more than one hour, based on transportation available to the parent;
The child care arrangements must be affordable. This means the cost of the child care is less than or equal to the payment amounts specified in the Child Care Subsidy Manual; and

If the child care is with a relative, it must meet the requirements for relative care in the Child Care Subsidy Manual.

The participant is responsible for demonstrating that she is unable to find child care for one or more of the above reasons.

While one of the criteria for acceptable child care is affordability based on the payment amounts specified in child care guidance, the client’s selection of child care arrangements whose costs exceeds the payment amounts is not a good cause reason for program non-compliance when other child care arrangements meeting the acceptable child care criteria are available.

The local agency is responsible for determining if the information provided substantiates that needed child care that meets the above criteria cannot be arranged. The ESW must consult with the Child Care worker in evaluating whether a sanction is appropriate.

c) Accepting employment would result in a net loss of cash income for the assistance unit. Net loss of cash income would result if the family's gross earned income, less necessary work related expenses, was less than the TANF payment which the recipient was receiving at the time the offer of employment was made.

3) The good cause investigation will include an evaluation of information in the case record. When there has been no recent contact with the participant, efforts will be made to determine if the participant has contacted the EW or Child Care Worker to discuss the problem, given a reason for not attending an ESP interview, or for not completing an assignment, or having not kept any program-related appointment.

In all cases, in order to ensure that the participant understands the mandatory nature of the program and has an opportunity to explain the reason for noncompliance, the ESW will attempt to contact the client by telephone or by personal contact. The ESW will document the record that the contact was made or attempted.

4) Prior to imposing a sanction, the ESW is to complete the VIEW Non-Compliance Checklist. Once the form is completed, the supervisor must review the form and circumstances of the proposed sanction to ensure that the participant has been screened for disabilities or screening has been offered and refused, reasonable accommodations have been provided if needed, and the agency has attempted to notify the client verbally. The supervisor must not approve the sanction if any of these steps have not been taken. The supervisor or designee must sign the VIEW Non-Compliance Checklist. The completed checklist must be placed in the case record.
H. Documentation Required for Termination of Employment, Reduction in Wages or Refusal of a Bona
   Fide Offer of Increased Work Hours

1) Description of the job, including OJT employment, and circumstances surrounding the
   termination of employment, reduction in earnings or refusal of increased work hours.

2) Contact log documenting all contacts with the participant.

3) A copy of the communication sent to the EW to sanction the case.

I. Advance Notice of Proposed Action to Sanction

1) This notice is sent to participants who do not comply with the VIEW program requirements.
   It provides notification that the TANF benefit will be suspended. This notice is required
   prior to sanctioning.

2) Upon determination to sanction the client for noncompliance, the ESW must take action to
   begin the sanction process. Based on agency procedures, the ESW will either send the client
   VIEW Notice of Sanction/Termination (032-02-0307) or the Advance Notice of Proposed
   Action within three business days of the missed appointment. Alternately, the ESW will
   immediately notify the EW who will send the ANPA within three business days of receipt of
   the notification.

3) The ANPA will inform the participant of the specific requirement which was not met, and
   advise the participant to contact the ESW within 10 days from the date the Notice was
   mailed in order to establish good cause and prevent suspension of the TANF payment.

   a) The Notice will give the participant at least 10 days from the date the ANPA is
      mailed to provide good cause. If the participant does not respond to the ANPA by
      the date given, she will be sanctioned.

   b) If the participant responds to the ANPA, the information becomes part of the
      documentation needed to determine if the sanction will be imposed. If the
      participant does not present good cause, she will be sanctioned.

J. Sanction Procedures

1) In agencies in which both the VIEW program and TANF benefits are not managed by one
   case manager, the ESW will advise the EW that a sanction is required, when to impose a
   sanction, and which sanction to impose. An automated message is sent to the EW via the
   automated system to impose the sanction and a manual communication form should be sent.
   The EW will send the participant the Advance Notice of Proposed Action to affect payment
   which explains the reason for the sanction, the amount of benefit reduction to be imposed,
   and the duration of the sanction. At agency option, the VIEW Notice of Sanction/Termination
   may be sent prior to referral of the case to the EW for sanction.

2) For the purposes of recording and establishing sanctions, the sanction period begins on the
   date the participant was in noncompliance. This date is recorded in the ESP module in
   VaCMS as the date of referral for sanction. The effective date on the Advance Notice of
   Proposed Action is the beginning of the sanction period for purposes of suspending
   assistance.
3) The sanction will be imposed the first month following the month in which the case was referred for sanctioning, if administratively possible. If not, the sanction will be imposed the following month.

4) If the participant requests that the TANF case be closed following the referral of the case for sanctioning, the EW will enter the sanction in VaCMS prior to closing the case.

5) In an open TANF/VIEW or TANF-UP/VIEW case, if the recipient terminates employment, the EW may obtain the information first. If so, the EW will notify the ESW. The ESW will contact the employer and/or participant to determine if sanctioning is appropriate.

6) If a non-parent caretaker is subject to a VIEW sanction, the caretaker is to be removed from the TANF payment and the VIEW enrollment closed. The non-parent caretaker will not be added back to the TANF payment during the current period of TANF assistance. The caretaker may only be added to the payment after the TANF case closes and the caretaker completes a new application requesting assistance for herself and the child(ren).

K. Sanction Periods

A TANF or TANF-UP recipient will have her TANF payment suspended for the following periods:

1) For the first sanction, the payment will be suspended for a minimum period of one month and will continue to be suspended until the client complies.

2) For the second sanction, the payment will be suspended for a minimum period of three consecutive months and will continue to be suspended until the client complies.

3) For the third and subsequent sanctions, the payment will be suspended for a minimum period of six consecutive months and will continue to be suspended until the client complies.

4) A participant may perform a verifiable act of compliance during the fixed sanction period. The TANF payment, however, will not be reinstated until after the fixed sanction period has ended.

5) The months during which the participant is sanctioned will count toward the two year time period limitation. The “VIEW Sanction Reminder Notice” will be generated by VaCMS 15 days prior to the end of the minimum time period for the sanction. A second notice will be generated 90 days after the first notice is sent.

6) When an individual is receiving TANF and the category changes to TANF-UP or vice versa, the sanction count continues. For example, if an individual is sanctioned in a TANF case and the category changes to TANF-UP, the original sanction continues and must run its course in the TANF-UP case. Any new sanctions the individual incurs as a recipient of a TANF-UP/VIEW case will count in addition to the sanctions the individual received while participating as a TANF case. If the sanctioned individual leaves one TANF-UP assistance unit and becomes a member of another TANF-UP assistance unit, the sanction will follow that individual. The sanction will not remain imposed.
on the assistance unit the individual left. Only one assistance unit at a time will incur a sanction created by the same individual.

7) The ESW will advise the EW of the effective date on which to lift a sanction. Sanctions cannot be lifted during the fixed period but an act of compliance may be completed or proof of exemption may be provided. If a participant provides verification that he has become exempt during the fixed sanction period and the exemption still exists at the end of the fixed period, the sanction will be lifted as of the date the fixed sanction period ends. If a participant completes an act of compliance, the sanction will be lifted as of the date the fixed sanction period ends.

Additionally, when a participant provides verification that he has become exempt after the fixed sanction period has ended, the ESW will notify the EW to lift the sanction as of the date the exemption was verified. When a participant complies after the fixed sanction period has ended, the ESW will notify the EW to lift the sanction as of the date of compliance.

8) The EW will impose the sanction even if a participant becomes exempt after the Advance Notice of Proposed Action has been sent to the recipient. There are two exceptions to this rule:

a) If it can be established that the participant actually became exempt during the time she was required to participate, and verification is received before the sanction is imposed, the EW will not impose the sanction. However, this information must be communicated in writing to the ESW for final determination.

b) If the participant who has been referred for the first sanction obtains and verifies full-time employment (at least 30 hours per week and at least minimum wage) prior to the effective date of the proposed sanction, the EW will not impose the sanction. The ESW will remove the sanction referral information from the ESP module in VaCMS. The ESW must advise the EW of this information so the Non-Compliance Details information can be removed from Data Collection as well. If the client is referred for sanction in the future, it will be a referral for the first sanction.

9) If an individual changes assistance units, the sanctions received in prior assistance units follow the individual. In other words, changing assistance unit does not remove the sanction from the individual’s past record. For purposes of recording sanctions in the ESP module, the sanction information should be entered on the Compliance/Non-Compliance – Details screen for the individual who incurred the sanction.

Example: TANF-UP household with two mandatory participants. Caretaker 1 (“Mom”) is referred for sanction. Caretaker 2 (“Dad”) has participated in VIEW as required and remains in compliance. The sanction referral data is only entered on the Compliance/Non-Compliance – Details page for Mom. Her enrollment will close when the sanction becomes effective. In order to provide ongoing services to Dad during Mom’s sanction period (which will suspend the TANF case for the household), the ESP enrollment for Dad will remain open. If Mom later leaves the home, the TANF case will be reinstated for the
remaining household members the following month after the sanction month and Dad will continue to participate in VIEW.

Note: If Mom moves into another TANF household or applies for assistance, she will still be subject to the sanction she incurred while residing with Dad.

10) Beginning 1/1/12, participation in the SNAP Employment and Training program (SNAPET) is voluntary. If an individual fails to participate in the SNAPET program, the household’s SNAP benefits will not be reduced the SNAPET enrollment will simply be closed and all SNAPET supportive services will be terminated. Due to this elimination of sanction in the SNAPET program, VIEW participants who are subject to a VIEW sanction will no longer be subject to a comparable sanction for SNAP purposes.
1000.21 COMPLIANCE

A. Compliance occurs when the participant who failed to comply and has been sanctioned performs a verifiable act of compliance to lift the sanction during or after the fixed sanction period. A verifiable act of compliance for the participant will be either continuing in, or completing an assigned activity.

When the TANF case closes with a sanction in place: If the TANF case is closed during the sanction period, the act of compliance may be met during the pending status of a reapplication. The client is responsible for contacting the ESW to learn how she can comply with program requirements.

Once the client has complied, the ESW will communicate this information to the EW as soon as possible. If the minimum fixed period has not passed at the time the client complies, the sanction will be lifted effective with the end of the fixed period. (Note: If the case is approved in a sanction, and the payment suspended, each of the months of suspended payment, including a partial month, will count toward the fixed sanction period.) If the minimum fixed period has passed once the client complies, the sanction will be lifted effective with the date of compliance.

If the TANF case is approved, the ESW will complete an assessment and have the client sign a new APR and complete a new Activity and Service Plan. The new APR will show the months of VIEW eligibility remaining. The ESW will open a new enrollment in the ESP module in VaCMS with the new assessment date as the start date. As part of the ESP data entry, the ESW will review the VIEW clock and make adjustments if needed. The EW will receive a task and reminder to run Eligibility to update the Program/TOA to TANF/VIEW or TANF-UP/VIEW.

If the client complied but the TANF application was not approved, the ESW will document the compliance in the record.

When the TANF case remains open during the sanction: If the case was open at the time the client complied, the ESW will reassess the client and advise the client of the number of months of VIEW eligibility remaining and complete a new Activity and Service Plan. A new enrollment will be opened in the ESP module with the new assessment date as the start date. The ESW will review the VIEW clock and make adjustments if needed.

If the individual is applying for SNAP as well as TANF, the TANF sanction is not necessarily cured by complying with SNAPET requirements. The individual must complete an act of compliance that matches the reason for the VIEW sanction. If that action is no longer available or appropriate, any other verifiable act of compliance deemed acceptable by the ESW will cure the sanction. This determination should be made on a case-by-case basis.

A TANF-UP case that is referred for sanction or in a sanction may not switch the individual who is participating in VIEW to avoid or cure the sanction. Once the sanction is cured, and the recipients wish to change the VIEW participant, they may do so upon request and after advisement from the ESW or EW.

Supportive services may be provided to a participant during the time she is performing a verifiable act of compliance. (See 1000.12C for guidelines). Ongoing supportive services may also be provided to the other mandatory participant in a TANF-UP household who has continued to comply even when the sanctioned participant remains in the fixed period of sanction. Reasonable accommodations must be provided to individuals with verified disabilities during the time they are performing verifiable acts of compliance and to make it possible for individuals to perform verifiable acts of compliance.
1. Employment which meets the following conditions represents a verifiable act of compliance for all situations: the employment is verified, it was obtained after the sanction was imposed, it is for 20 hours per week or more and pays at least minimum wage, it continues for at least two weeks after the client reports the job to the agency, and the client is still employed at the end of the fixed sanction period. The participant is still required to comply with other program requirements in conjunction with employment when applicable.

2. A verifiable act may be defined in these situations as follows:
   a. For failure or refusal to report for an appointment or required interview (excluding the initial assessment interview) - keeping another scheduled appointment or interview.
   b. For failure or refusal to complete and/or return forms or other information to the agency by a required date - returning and/or completing the required form or other information.
   c. For failure or refusal to begin, to continue in or participate in an assigned activity - beginning, continuing in or participating in an activity for up to two weeks to show a good faith effort to comply.
   d. For failure or refusal to complete an assignment to a program activity - completing an assignment.
   e. For failure or refusal to obtain or accept employment – if the client obtains employment during the sanction, the employment must be maintained through the end of the sanction period.
   f. If the assignment from which a participant has been sanctioned is no longer available or appropriate, compliance may consist of participating in or completing a different activity. In the case of a participant who was sanctioned for failure to participate in her CWEP or PSP assignment, the client will be allowed the opportunity to develop her own worksite in order to comply.

B. The Activity and Service Plan should reflect the activity the client is to complete in order to comply and the date by which the activity is to be completed. The information from the Activity and Service Plan developed to assist the client in complying with program requirements will not be entered into the ESP module in VaCMS. Once the participant has performed a verifiable act of compliance (with the exception of compliance based on employment), the sanction is lifted at the end of the fixed sanction period, or retroactively to the date the participant complied if compliance was after the end of the fixed period.

C. Effective Date of Compliance:
   1. The effective date of compliance for an appointment/ interview or for forms/ other information not completed or returned to the agency, is the date the client keeps the appointment, participates in the interview, or completes/returns the forms/information.
   2. Compliance for a program activity must meet the conditions for a verifiable act of compliance outlined in 1000.21A. Once those conditions are met, the effective date of compliance for activities other than employment is the date the client completed the activity.
3. For employment that meets the conditions for a verifiable act of compliance outlined in 1000.21A, the effective date of compliance will be:
   a. the end of the fixed sanction period, or
   b. the date the participant complied, if compliance was after the end of the fixed sanction period, or
   c. the date the employment was verified, whichever comes last.

Example: The client is in a one month sanction for the period 1/1 through 1/31. On 1/12, the client reports that she has found employment and is asked to submit verification of her employment, wages and hours. She does not submit the required verifications until 2/6. If the client’s employment meets the conditions outlined at 1000.21A(1), the EW will be notified and the sanction will be lifted effective 2/6 with benefits prorated for the balance of the month.
1000.22  Transitional Services

Former VIEW participants are eligible for transitional services once they leave TANF, either because they have reached the end of the two-year time period, or because the TANF case has closed for another reason. Except for Transitional Education and Training (TET), eligibility for specific transitional services is based on the client's employment status. During the first 3 months after TANF case closure, a client may receive transitional services, with the exception of TET or a VTP, if otherwise eligible, even if the case was referred for a VIEW sanction, or closed while in a VIEW sanction. For a two parent household with both parents enrolled in VIEW, the participant’s eligibility for transitional supportive services listed in 1000.22A will be evaluated on an individual basis. This may result in one parent receiving these services while the other parent is ineligible due to sanction.

The Activity and Service Plan will be used to document provision of all transitional services, including VTP and TET, with the exception of Transitional Child Care paid from Child Care Funds.

Eligibility for transitional services starts the first day of the month after TANF case closure and may continue through the last day of the third month after TANF case closure, or through the last day of the twelfth month after TANF case closure, depending upon the specific transitional service. Note: an individual who is participating in VIEW while residing in a two parent household will not be eligible for transitional services if he leaves the home.

An ESP enrollment must be opened for Transitional Transportation (TT), TET, and VTP.

If a client with a closed TANF case reapplies and is found eligible for TANF, she will no longer qualify for transitional services. VTP enrollments are closed at reapplication rather than at TANF case approval and are not reopened even if the application is denied. Clients who are referred to or volunteer for VIEW after TANF case approval are eligible for VIEW supportive services. (See 1000.12). If the TANF case closes again, the client may again be eligible for transitional services.

The local agency should include guidance regarding the use of, and any limitations on, transitional services in its Standard Operating Procedures contained in the VIEW Annual Plan. The ability of a local agency to pay for transitional supportive services and TET is based on the availability of VIEW funds.

Non-parent caretakers whose needs have been removed from the TANF payment for any reason (e.g. noncompliance, excess income for an AU of 1, etc.) are not eligible to receive transitional services if they are still receiving a TANF payment for the child.

A.  Transitional Supportive Services

1.  Transitional Child Care Paid From Child Care Funds – Twelve Month Maximum.
Child Care assistance may be provided for up to twelve consecutive months, after the TANF case closes, to any former TANF recipient (VIEW or non-VIEW) who meets the eligibility requirements outlined in Child Care guidance (Vol. VII, Section II, Chapter D). Child Care can be provided for employment, and, if allowable by Child Care guidance, for education. Transitional Child Care can start no earlier than the first day of the month after the month of TANF case closure. The eligible participant will be required to pay 5% to 10% of monthly gross income toward the cost of child care. The exact amount of the co-pay, which will be based on family size and income, will be determined by the Child Care worker.
Evaluation of continued eligibility and the need for transitional transportation will be made every 6 months. Minimally, the re-evaluation will verify the former VIEW participant’s employment hours. The client’s failure to respond to requests for information will result in termination of transitional transportation services. Adequate documentation supporting reasons for termination shall be filed in the case record. When Transitional Transportation services are terminated, a written VIEW Transitional Transportation Notice of Action (032-03-0901) or letter providing the same basic information, must be sent at least 10 days in advance of the effective date of action.

B. VIEW Transitional Payment (VTP)

1) Eligibility for VTP

The VTP is an incentive payment designed to encourage job retention. The VTP will be provided to employed VIEW participants whose TANF case is closed for any reason, except no eligible child in the home or unable to locate, and whose case is not in a VIEW sanction or referred for a VIEW sanction or in an IPV. Neither participant in a TANF-UP household is eligible for a VTP payment if the other participant is in a VIEW sanction or has been referred for a sanction.

The case must contain at least one VIEW participant who at time of TANF case closure was employed at least 30 hours per week with hourly wages of at least the current federal minimum wage. The VTP payment for each participant is $50. When both parents in a TANF-UP case are VIEW participants and are each employed at least 30 hours per week with hourly wages of at least the current federal minimum wage, the payment is $100. If one parent leaves the two-parent household, the payment will be reduced to $50 dollars.

Note: Depending on the number of VIEW participants in the Assistance Unit, the VTP amount may exceed $100. Example: Mr. Jones is married to Mrs. Jones and they have one child. Ms. Smith and her child with Mr. Jones also reside in the household. Mr. Jones, Mrs. Jones and Ms. Smith are all VIEW participants on the same case. They all obtain full-time employment resulting in the household exceeding the 150% FPL for the household size. They all meet the criteria for establishing VTP. The VTP amount will be $150.

The VTP is initiated in VaCMS by the EW. A onetime notice is sent to the client by the EW that informs the client that her case is eligible for the payment, the reason for the payment and conditions that will terminate the payment. (See 901.13.) Once the EW certifies and authorizes the VTP EDG, a task and reminder will be generated to the ESW informing her that the VIEW participant’s TANF/VIEW or TANF-UP/VIEW case has been closed and that VTP has been approved. The status of the open ESP record will change to VTP the first day of the month following the TANF/VIEW or TANF-UP/VIEW closure.

The ESW must have a copy of the previous month’s pay stubs or verification of employment (not more than 30 days old). If the worker does not have the previous month’s pay stubs or verification of employment, the ESW is to get the pay stubs or verification from the EW. The number of pay stubs will vary based on the client’s pay schedule. Once the VTP begins in the ESP module in VaCMS, the ESW is to send the VIEW participant a new Activity and Service Plan with the appropriate boxes checked for VTP.

If the ESW determines the EW opened the VTP in error (Example: client not working 30 hours per week at federal minimum wage) the ESW is to immediately send a communication to the EW to close the VTP and provide the reason. The ESW should leave the VIEW record open and continue regular job follow-up if necessary.
If a client who is approved for a VTP appeals the TANF case closure and requests that the TANF payment be reinstated during the appeal, the VTP will be stopped. In the event that the client would like to continue participating in VIEW during the appeal and no VTP payments have been issued, the VTP will be closed, and the TANF/VIEW or TANF-UP/VIEW case reinstated. Reinstatement of the VIEW case will allow the ESW to then reopen the previous ESP enrollment. If the client loses the appeal and the TANF/VIEW or TANF-UP/VIEW case is closed, the EW will again evaluate eligibility for a VTP following VTP guidelines. If the client is eligible for VTP, the 12-month VTP eligibility period will begin the month after the second TANF/VIEW or TANF-UP/VIEW case closure.

If a client who is approved for VTP relocates to another locality in Virginia, the agency will transfer the VTP case. The Eligibility Worker in the receiving agency will determine if the client will continue to meet all of the VTP eligibility requirements after she relocates. If the client will no longer be eligible for VTP, the EW will send the client a Notice of Action regarding the VTP case closure.

2) When to open and close a VTP

a) VTP should be opened when:

1. the client is in VIEW at TANF case closure;
2. the TANF case is closed for any reason, except when no eligible children are in the home, or when the renewal has not been submitted and completed by the 30th day after the renewal end date, or when the agency is unable to locate the client;
3. the VIEW participant is employed an average of 30 hours or more per week;
4. the VIEW client is earning the federal minimum wage or higher;
5. the VIEW participant is not in a sanction or referred for sanction at case closure.

b) VTP must be closed when:

1. the client reapply for TANF;
2. the VTP recipient fails to provide verification of employment by cutoff in month six of the VTP period;
3. there are no eligible children in the home (including a child who is ineligible due to truancy);
4. the worker is unable to locate the client;
5. the client requests closure of the VTP;
6. the client is no longer working or client’s hours decrease to less than 30 hours per week;
7. the client’s wages decrease to less than the federal minimum wage;
8. the VTP recipient moves to another locality that is not in Virginia; or
9. the twelve-month VTP period ends.
3) VTP Follow-up

When the client is eligible for a VTP payment, regular job follow-up will end even if the minimum three monthly job follow-ups have not been completed. **Note: On the first day of the month that a VIEW participant is VTP eligible, the VaCMS will change the participant’s ESP status to VTP. The ESW must complete a reassessment by completing the activity details, enter the employment/employer details, and enter the ESP participation for months one through six. The six job follow-ups will be entered at the same time using the same employment information.**

Example: The ESW receives notification that the TANF/VIEW case will close effective December 31st and VTP has been established January 1st. On January 1st, the ESP status will change to VTP. On or after January 1st, the ESW enters the December follow-up information and the VTP job follow-up information as outlined above.

**Note:** Regular VIEW job follow-ups end when VTP follow-ups begin. Regular VIEW follow-ups made while the client had an open TANF case do not count toward the required number of VTP follow-ups.

**On the 1st day of the 5th month of VTP enrollment, VaCMS will generate the VTP Job Follow-up letter and the Verification of Employment form.** The forms are due back the 5th day of the 6th month. On the 6th day of the 6th month of VTP enrollment, a task and reminder will be sent to remind the ESW, “Enter the 7th through 12th months VTP Job Follow-up”. If the client is still eligible for VTP, the ESW must enter the job follow-ups no later than the 15th day of the 6th month. If the job follow-ups are not entered in the ESP module in VaCMS by the 15th day of the 6th month, a task and reminder will be sent to the EW instructing the EW to “Close VTP. Job Follow-up letter not received or VTP criteria not met.”

**If the VTP Job Follow-up letter and employment verification are not returned or the employment verification does not show the recipient is employed at least 30 hours per week and earning at least the federal minimum wage, the payment must be stopped.** If the hours are less than 30 per week when the 7th job follow-up information comes back, the ESW must close the VTP enrollment in the ESP module. The client is no longer eligible for the VTP. The ESW will also send an Employment Services Communication form (032-02-0072) to the EW requesting her to close the VTP in VaCMS.

The VTP should be terminated when employment ends, hours fall below 30 per week, wages decrease to below the current federal minimum wage, when the client changes jobs causing a break in employment which results in the average hours for the month falling below 30 per week, when the only eligible child leaves the home, and when the client does not send the job follow-up back by the due date with appropriate documentation. The VTP must also be terminated when the employment is with an educational or training institution that closes for the summer (longer than thirty days) and the client cannot work.

Official closures by educational or training institution employers for quarter or semester breaks (lasting less than thirty days) during which the client cannot work will not impact the VTP.

Once the client loses employment and the VTP is stopped, she continues to be ineligible for VTP as long as she is in the transitional period even if she becomes employed again.
1000.23 PARTICIPANTS WHO LEAVE THE VIEW PROGRAM AND RETURN PRIOR TO THE END OF THE TWO-YEAR PERIOD

A. Participants returning to the VIEW program prior to the end of the 24-month time limit on TANF will be automatically referred to the ESP queue after the EW runs eligibility. The ESW may waive the up-front job search and place the participant directly into a work activity.

B. An individual whose case was closed while in a sanctioned status and who reapply and is a mandatory VIEW referral, must perform a verifiable act of compliance before a TANF payment may be issued.
1000.24  HARDSHIP EXCEPTIONS

Exceptions to the two year limit on TANF assistance may be granted under certain circumstances which are specified by the Code of Virginia and outlined below.* (See 901.11 for reasons that the client might be eligible for assistance during the POI based on disability rather than hardship).

A. Application for An Exception - The client is notified that an extension of benefits is possible by the TANF 24-Month Advance Notice of Proposed Action. This notice is generated by VaCMS on the 15th day of the 22nd month of the 24-month TANF eligibility period.

The ESW will explain the criteria for a hardship exception to all VIEW participants who are in the final two months of receipt of TANF. However, the ESW is only required to evaluate the individual for approval of a hardship exception when the participant provides a written request to be considered for an exception. The client must submit a signed and dated written request to the ESW, postmarked within the 60-day period prior to the effective date of TANF case closure shown on the notice, identifying the specific type of exception requested. The agency may assist a client who is illiterate in writing the request, but the request must be submitted timely and must be signed and dated by the client. An individual who has exhausted the 24-month TANF eligibility period and whose TANF case has already been closed may not apply for an exception.

B. Exceptions and Eligibility for TANF and VIEW - If a hardship exception is granted, TANF benefits will be issued for the period of the exception as long as all TANF eligibility factors continue to be met. The client will be a mandatory VIEW participant and will be eligible for supportive services.

C. Criteria for Granting Hardship Exceptions - Hardship exceptions may be granted under the following circumstances provided the client meets all general and specific eligibility criteria:

1. Exceptions of up to one year
   a. The client lives in an area of high unemployment.
   b. The client has been enrolled in employment-related post-secondary education or skills training unless the education or skills training was self-initiated.

2. Exceptions of up to 90 days
   a. The client is unable to find employment.
   b. The client has lost her job.

D. General Eligibility Criteria for Hardship Exceptions

In order to be considered for a hardship exception, the participant’s program participation must be evaluated. Determination must be made that:

1. The participant was not sanctioned more than one time for failure to satisfactorily participate in any assigned component activity while in the program. Assigned component activities must be reflected on the client’s Activity and Service Plan.

* Code of Virginia 63.2-613
2. The participant was not sanctioned for leaving employment without good cause while enrolled in VIEW.

In the case in which a sanction was improperly imposed, including situations in which the sanction was the result of non-compliance caused by the verified disability of the participant or the verified disability of a household member in the care of the participant, the sanction will be removed and the participant may be considered for a hardship exception if otherwise eligible.

E. Conditions Under Which a Hardship Exception May Be Granted for Up to One Year

A hardship exception may be granted by the local agency for any period of time, up to one year, based on a lack of job availability or for completion of employment-related education or training if the client meets the general eligibility criteria outlined above. The client must participate in the VIEW program and carry out all program assignments. The hardship exception will be reevaluated every 90 days to ensure that the basis for the exception continues to exist and that the participant continues to meet all program and exception requirements.

1. Factors relating to job availability are unfavorable

   a. The client lives in an area where the unemployment rate has been 10% or higher for the six months preceding the client’s request for a hardship exception. Unemployment rate information is available from the Virginia Employment Commission and on FUSION at http://spark.dss.virginia.gov/divisions/bp/tanf/guidance.cgi.

   b. The client is registered with the Virginia Employment Commission, is assigned to a job search activity and to any other activity that the agency believes will facilitate employment, and is actively seeking employment.

2. The client is in an employment-related post-secondary education or training program which can be completed within one year

   a. Participants enrolled in a self-initiated education or training program that began prior to his/her entry into the VIEW program are not eligible for an education or training-related hardship exception.

   b. The participant must have been enrolled in employment-related post-secondary education or skills training for at least 9 of the previous 12 months, have been satisfactorily participating, and must be able to complete the course of study in no more than one year of full time enrollment if the exception is granted.
c. In the case of a participant with a verified disability, or a household member with a verified disability cared for by the participant, the participant must have been enrolled for at least 6 months out of the previous 12 months, have been satisfactorily participating for those 6 months, and be able to complete the course of study in no more than one year if the exception is granted. The ESW will work with the participant and the educational institution or skills training program to arrange any accommodations needed by the participant in order to complete the course.

d. For purposes of this hardship exception, the following education activities are not considered “employment-related education or training”: adult basic education (ABE), General Educational Development (GED), English as a Second Language (ESL, ESOL), High School.

F. Conditions Under Which a Hardship Exception May Be Granted for Up to 90 Days

A hardship exception of up to 90 days may be granted by the local agency based on the participant’s inability to find employment or loss of employment if the participant meets the general qualifying criteria outlined above.

1. The client is actively seeking but is unable to find employment.

   The participant is enrolled in a job seeking activity and has been satisfactorily participating, but has been unable to find employment that, in combination with all other income (this includes earned and unearned income) or sources of assistance available to the individual, would pay an amount equal to or exceeding the TANF cash benefit plus a standard deduction of $164.

2. The client has been employed but has lost employment due to factors not related to job performance.

   a. The participant has applied for unemployment compensation from the Virginia Employment Commission and has been denied.

   b. The participant is able to provide a copy of the determination of ineligibility for unemployment compensation from the Virginia Employment Commission.

   c. The Virginia Employment Commission determination of ineligibility verifies that eligibility for unemployment compensation would have existed if the participant had worked sufficient hours to qualify.

G. Responsibilities of the ESW – Decision on Exception Request

1. The ESW will notify the participant within 5 working days that the request for a hardship exception as been received. The notification to the participant will provide the date by which a decision will be made. The date will be no longer than 30 days from receipt of the client’s hardship exception request.
1000.25 TRANSFERS

A. The ESW will transfer within five working days from the date of notification, the entire VIEW record of TANF or TANF-UP participant who moves from one locality to another.

B. Whenever possible, the benefit and the VIEW record should be transferred together.

C. All service supplements should be updated and closed prior to case transfer.

D. When a VIEW case with no earned income and not in sanction transfers to another agency, the VIEW clock stops. The ESW must complete an assessment prior to re-starting the clock. The reassessment must be completed within 2 weeks of the receipt of the transfer in case. The receiving agency is responsible for adjusting the clock.

E. When a case with earnings, or one which is in sanction, transfers to another agency, the 24-month clock continues, to advance.

F. The 60-month clock continues to advance.
1000.26 APPEALS

A. All participants have the right to appeal an agency action to suspend or terminate the TANF payment. The ESW's decision to refer a participant to the EW because of non-compliance will result in such an action.

B. The EW must notify the participant in writing through use of the Advance Notice of Proposed Action every time an adverse action is taken.

C. The notification and fair hearings procedures in the TANF Manual, Sections 401.4 and 104-106, will govern all appeals to ensure fair hearings for actions proposed or taken by the agency as a result of noncompliance with VIEW requirements.

D. If the participant files a valid appeal and requests a hearing, as determined by the hearings officer, the TANF or TANF-UP payment may be reinstated until a decision is rendered by the hearings officer.

   If the appeal is of a VIEW sanction and the TANF payment is reinstated, the months which pass while awaiting the appeal decision must be added to the 24-month clock. These months will remain on the clock regardless of the appeal decision (105.2). Additionally, the TANF assistance granted during the appeal of a VIEW sanction is not considered an overpayment when the hearing decision is adverse to the recipient. The unsuccessful appeal simply delays the imposition of the VIEW sanction and the consequent loss of benefits to the household.

E. Workers may continue to work with participants during an appeal.
1000.28 CONTRACTS

Agencies may enter into financial agreements with individuals or organizations to operate portions of their Employment Services program. Agencies are bound by State statutes set forth in the Virginia Public Procurement Act and by any local procedures that may supplement the Act. Contracts made with other state entities, including community colleges and Workforce Innovation and Opportunity Act (WIOA) agencies are not subject to the requirements of the Virginia Public Procurement Act, but may be subject to local procurement procedures.

A financial arrangement between a local social service agency and any other entity for the provision of VIEW activities and services is a contractual relationship and can be entered into only if the standard contract format in Appendix B is used. No other agreement or written arrangement, including an Agreement of Cooperation or a Memorandum of Understanding, can be substituted for the use of the standard contract.

Contracts negotiated at the time the VIEW Annual Plan is developed will be sent to the agency’s TANF/VIEW Field Consultant with the VIEW Plan. Contracts developed outside this timeframe will be sent to the Field Consultant as soon as the contract has been signed by both parties. The VIEW Plan will be modified as necessary and sent to the Field Consultant.

The Field Consultant will provide technical assistance to the agency in developing and/or negotiating contracts as needed.

A. Consideration in Contracting

Prior to contracting, the agency must determine what is to be contracted and why. The agency must determine that the contractor can provide services of an equal or higher quality and/or at a lower cost than the agency itself. Care should be taken to insure that the contract represents an extension of services, rather than compensation for services previously provided at no cost. If the contract is with an agency or organization that serves TANF recipients or other economically disadvantaged populations, the contract must contain a certification from the provider that the services being contracted for are not otherwise available from the provider at no cost.

B. Services That Can be Contracted

Any program activity or service may be contracted as long as the agency is able to justify the contract in terms of quality of services, cost, and anticipated outcomes. However, any contract that includes initial client assessment normally the responsibility of an ESW, and/or overall on-going case management of all or part of the agency’s VIEW population, must have prior approval by the Field Consultant in consultation with the Home Office.

C. Selection of Service Providers

When selecting service providers, the local agency must take into account such things as the past performance of the contractor in providing similar services, the contractor’s demonstrated effectiveness, fiscal accountability, cost efficiency and other factors which the local agency determines are appropriate. A process must exist that documents these factors were considered.

D. Contract Outcomes

The contract should be written so that acceptable performance and outcomes are clear to both parties. Additionally, the contract should make clear how outcomes will be measured and with what frequency. Success should be defined incrementally and in terms of completion.
1000.29 RECORD RETENTION

The Virginia Public Records Act, §42.1-76, et seq. of the Code of Virginia places authority to issue regulations concerning retention and destruction of records with the Library of Virginia (LVA). The LVA General Schedule No. 15 governs records maintained by local social service agencies, including VIEW client records. LVA General Schedule No. 02 governs locality fiscal records including purchase orders. While many records can be destroyed three years after case closure, there are exceptions to that general rule. These exceptions include situations involving audits, investigations, court cases, and fraud or overpayments related to supportive services among others.

Each local agency must designate a Records Officer who will be in charge of seeing that LVA regulations for record retention and destruction are followed. See http://lva.virginia.gov/agencies/records/retention.asp for information about establishing a Records Officer and to access the specific schedules for record retention and disposition. The Library encourages agencies to contact the Records Analysis Services section at 804-692-3600 with questions about records management.
Barriers To Employment

All VIEW participants must be offered screening for learning disabilities, mental health disabilities, alcohol and substance abuse within 90 days of signing the APR. Participants whose screenings indicate the possible presence of a disability will, with the client’s agreement, be referred for an in-depth evaluation. A verified barrier is selected in the ESP module in VaCMS after verification by another agency or professional qualified to identify the specific barrier is received. Verified barriers to employment are listed below.

Learning Disability
Domestic Violence
Mental Health
Physical Disability
Substance Abuse
Understanding Federal Participation – Examples

Whether a client is counted as meeting the federal participation rate for a given month is dependent on the actual hours of participation entered into the ESP module in VaCMS. The following examples are designed to provide, in a general way, an understanding of how the participation rate is calculated in VaCMS. They do not show what should be entered into the ESP module - actual hours of participation are always entered—but do illustrate scenarios under which an individual’s participation might or might not meet levels needed to meet participation. The calculator is available at http://spark.dss.virginia.gov/divisions/bp/tanf/training.cgi.

Example 1: Month 1: Ms. A is assigned to job search, a core activity, beginning May 1 through May 31. Ms. A participates in job search for 36 hours in week one, 33 hours in week two, 24 hours in week three, and 39 hours in week four. She returns her completed job search forms, which verify a total of 132 hours completed during the month.

Calculating Participation for Month 1: Calculate the total number of participation hours for the month and divide by the number of days in the month to get a daily average. For Ms. A, divide 132 hours by 31 days to get an average of 4.25 hours per day. Then, multiply the daily average by 7 to get the average actual weekly hours. For Ms. A, 4.25 x 7 equals 29.80 which rounds up to 30. If Ms. A’s information is entered correctly and timely into the ESP module, Ms. A will count toward the participation rate for the month because she met the requirement for participation in a core activity and averaged 30 hours a week of actual participation.

Month 2: The next month, June, Ms. A continues her job search. In week 1, she is in job search for 33 hours. She is in job search in week two for 36 hours. She then gets a job and works for 30 hours each in weeks three and four. Because Ms. A had four consecutive weeks of job search in May, the first week of this month is not a countable activity. (Federal regulations require that job search can be counted for only four consecutive weeks, after which there must be a break of at least a week before additional job search hours can be counted.)

Calculating Actual Participation for Month 2: For Ms. A because more than four consecutive weeks of job search don’t count toward participation, the 33 hours for the first week of job search in Month 2 are not counted. Count only the second week of job search, 36 hours, plus the 60 employment hours to arrive at the total actual participation hours for the month. Divide 96 hours by the 30 days in June to get a daily average of 3.2 hours. Multiply this by 7 for average actual weekly hours of 22.4. Ms. A has not met the overall participation rate requirement of 30 hours, so her participation will not count for this month.

Month 3: In July, Ms. A works 35 hours per week throughout the month. She verifies that she worked a total of 161 hours altogether.

Calculating Actual Participation for Month 3: Divide the total participation hours of 161 by 31, the total days in July, to arrive at the daily average of 5.19 hours. Multiply the daily average by 7 to arrive at 36 for the average weekly actual hours. Because employment is a core activity, and because Ms. A had average weekly actual hours exceeding 30, she met federal participation for the month.
Example 2: Ms. B starts receiving assistance on January 15 and is referred to VIEW. For January, she is included in the denominator, but does not count toward the work participation rate because she has not yet become a VIEW participant and has not been assigned to any activities. February will be her actual first month in the program.

Month 1: On February 13, Ms. B is assessed and assigned to job search from February 13th through March 31. Her job search forms verify that she completed 72 hours of job search in February.

Calculating Participation for Month 1: Divide the total participation hours of 72 by 28, the number of days in the month to arrive at an average of 2.57 hours per day of participation. Multiply 2.57 by 7 to arrive at average weekly hours of 17.99, rounded up to 18. Her two weeks of job search in February are not enough to allow her to meet the core requirement or the work participation rate for February.

Note: When actual hours of job search or job readiness participation are entered into ESP module in VaCMS, and it determines that the hours will not count toward federal participation, those hours of job search are not counted against the 12-month maximum. Ms. B can still be assigned to up to 180 hours of job search during the next twelve months. Because the job search was not counted, no break in participation is needed before she can be assigned to job search again.

Month 2: Ms. B continues in job search for the month of March. Her job search forms verify a total of 160 hours of job search. She counts toward the participation rate because she met the core component requirement and averaged 36 hours of job search per week.

Calculating Actual Participation for Month 2: Divide the total participation hours of 160 by the number of days in the month. For Ms. B., divide 160 hours by 31 = 5.16; multiply by 7 for total weekly average of 36. 13 which rounds down to 36.

Example 3: Month 1: Ms. C participates in unsubsidized employment of 20 hours per week and 15 hours per week in vocational education and training for the entire month of August. Both are core activities. She counts toward the work participation rate because she had participation of at least 30 hours per week.

Calculating Participation for Month 1: Ms. C has 140 total participation hours for the month. Divide the total participation hours of 140 by 30, the number of days in June. Multiply Ms. C’s daily participation average of 4.66 by 7 to arrive at the weekly average of 32.

Example 4: Ms. D participates in CWEP for 18 hours per week and GED for 17 hours per week in September. Though she participated in activities averaging at least 30 hours per week (140 hours/ 31 = 4.51 average hours per day; 4.51 multiplied by 7 = 32), she did not have at least 20 hours per week in a core work activity and therefore will not count toward the work participation rate.