STATE OF IOWA DEPARTMENT OF Health and Human Services

February 9, 2024

GENERAL LETTER NO. 4-C-57

ISSUED BY: Bureau of Financial, Food, and Work Supports Division of Community Access

SUBJECT: Employees' Manual, Title 4, Chapter C, *Family Investment Program Nonfinancial Eligibility*, Contents 3 and 4, 2, 26 and 27, 28 and 29, 30 and 31, 49 and 50, 56, 59, 62, 64 and 65, 67 and 68, 71, 103 and 104, 108-119, revised; 120, new.

Summary

This chapter is revised to

- Update references to the Department of Inspections and Appeals (DIA), changing them to reference the Department of Inspections, Appeals, and Licensing (DIAL).
- Update the name the Department of Human Services (DHS) to the Department of Health and Human Services (HHS).
- Update the name of the Financial Support Application to Food and Financial Support Application.
- Add clarifying language on social security numbers.

Effective Date

Upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 4, Chapter C, and destroy them:

	1 2023
Contents 3 and 4 September 2, 26 and 27 June 16, 20 28 and 29 September 30 and 31, 49 and 50, 56, 59, 62, 64 and 65, 67 and 68, 71, 103 and 104 June 16, 20 108-119 September)23 • 1, 2023)23

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

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Questionable Cases

Legal reference: 441 IAC 41.23(3)

In questionable cases, you may need verification to determine whether a parent is absent. Do not take action based on suspicion or complaint alone when you believe that an "absent parent" is not absent. Try to get several items that support your belief. The following are examples of situations that could be questionable and justify more verification.

- The case was recently denied or canceled because the "absent" parent's income or resources were considered.
- The absent parent moves in and out of the home frequently.
- Living expenses exceed income.
- The parent's absence occurs when the parent is on strike or during slack times for a selfemployment business, etc.
- There is no verifiable residence for the absent parent.
- The verifiable residence for the absent parent is very close to the child's home.
- The absent parent may be out of contact with the family, especially if the separation was recent. The client may verify the circumstance by providing a statement from the landlord, minister, lawyer, or other knowledgeable nonrelative. Apply the "prudent person" concept and document the basis for the decision on all questionable cases.

If the case is complex, consult your supervisor. Also, if the case meets the error-prone profile described on form <u>470-5130</u>, *DHS Investigative Referral to DIA*, refer the case to DIAL for a front-end investigation. See <u>6-Appendix</u> for information on form 470-5130.

Temporary Absence

Include in the eligible group the needs of a person who is temporarily out of the home, if otherwise eligible. A temporary absence exists when the person is:

- Out of the home to secure education or training.
- In a medical institution for less than a year.
- Out of the home for another reason and the payee intends that the person will return to the home within three months.

The following sections describe each of these temporary absence provisions.

Temporary Absence for Education

Legal reference: 441 IAC 41.23(3)"b"

Include in the assistance grant the needs of a person who is temporarily out of the home for the purpose of education or training. A temporary absence exists as long as the parent or specified relative retains supervision of a child.

Cooperation With Investigations and Quality Control

Legal reference: 441 IAC 40.27(4)"d"

To be eligible for FIP, applicants and participants must cooperate with Quality Control and the Economic Fraud Control Unit of the Department of Inspections, Appeals, and Licensing (DIAL) when the applicant's or participant's case is selected or referred for investigation.

DIAL conducts front-end investigations of applicant as well as participant cases. DIAL also conducts fraud investigations.

When Quality Control or the Economic Fraud Control Unit notifies you that a client has failed to cooperate in an investigation, deny or cancel FIP assistance. (Do not cancel or deny FIP if the investigation centers solely around a person whose income and resources do not affect FIP eligibility.)

Issue a timely *Notice of Decision* to cancel FIP. When timely notice cannot be met, cancel the FIP case effective the second month after you are notified of the failure to cooperate. Recover assistance issued in the first month.

Procedures for front-end investigation and what to do when a client reapplies after being canceled for failure to cooperate are explained in the following sections. Refer to <u>5-D</u> for more information on Quality Control procedures.

Front-End Investigation Procedures

Refer questionable applicant and participant cases to the Economic Fraud Control Unit of the Department of Inspections, Appeals, and Licensing (DIAL) for front-end investigation. Before making a referral, take a "prudent person" approach to the information the client gives you. Allow the client the opportunity to explain the situation or resolve any questionable information.

Referring a Household to the Investigation Unit

Make referrals for investigation using form 470-5130, DHS Investigative Referral to DIA. One or more of the factors listed on the form must be present in order to make a referral. See 6-Appendix for more information about filling out the form.

If a client does not cooperate with DIAL and later reapplies, see <u>Application After Failure to</u> <u>Cooperate</u>.

Investigation Process

Legal reference: 481 IAC 72.2(10A), 72.3(10A)

The purpose of a front-end investigation is to prevent households from fraudulently receiving FIP by conducting investigations on applications and reapplications before an eligibility determination is made, and also on participant cases. Front-end investigations are conducted to:

- Determine if information supplied by the client is correct.
- Assist in reducing the program error rate.
- Identify overpayments for recovery.

If an interview is needed, the investigator sets up the interview. The interview request notifies the client that the case has been referred to the Economic Fraud Control Unit. Before the interview, the investigator informs the client of:

- The purpose of the investigation.
- The type of information being reviewed.
- The client's responsibility to cooperate.
- The consequences of refusing to cooperate in an investigation.

Investigators decide which eligibility items need further verification. If the client previously received benefits and there is a discrepancy, the investigation may continue. However, the investigation does not continue if the client withdraws the application and never receives benefits, or the client is denied benefits.

Investigators may request and have access to the HHS client file if they determine it is necessary. They must follow the terms of the contract between HHS and DIAL with respect to confidentiality.

Acting on Investigation Findings

Legal reference: 481 IAC 72.4(10A)

The investigator reports the results of the investigation to the Department IM worker.

When an applicant household was referred, do not pend the application beyond the usual 30-day processing period. Before making a decision, check with the investigator to find out whether the applicant is cooperating in the investigation. If not, deny the application for that reason.

If the applicant is cooperating, pend the application as long as possible in the 30-day period, awaiting outcome of the investigation. If you approve FIP before the investigation is completed, redetermine eligibility and benefits upon receipt of the investigator's findings.

After an investigation has been completed on an ongoing case, determine eligibility and benefits, taking into consideration the findings of the investigator. Consider the evidence in the investigator's findings as verified information. Complete form 470-5129, DHS Investigative Referral Follow-Up to DIA, within no more than 30 days after receiving the final investigative report from DIAL. See <u>6-Appendix</u> for more information about how to fill out the form.

If you so request, the investigator will attend appeal hearings and testify to the information gathered by the investigator.

Application After Failure to Cooperate

Legal reference: 481 IAC 72.4(10A)

Assistance cannot be reestablished until cooperation criteria have been met. If a family who failed to cooperate later meets the Quality Control or front-end investigation requirements and is otherwise eligible, approve assistance retroactive to the date the client agreed **in writing** to cooperate. Do not process the approval until you are notified that cooperation has actually occurred.

When a client reapplies on or before the date of cancellation, the client is eligible for benefits on the effective date of cancellation or on the date the client agrees to cooperate, whichever is later. If the application is received after the date of cancellation, assistance is effective no earlier than seven days after the Department receives the application.

Ms. A, a FIP participant, fails to cooperate with the front-end investigation. DIAL informs the IM worker of the failure in early April. The IM worker issues a notice on April 5 to cancel assistance effective May I.

On April 25, Ms. A contacts the IM worker and writes a note stating her intent to cooperate with the front-end investigation. However, the IM worker must refer the case to DIAL. The investigator is not able to meet with Ms. A until May 10. As a result, Ms. A cannot resolve the issue before the effective date of cancellation. The case is canceled May 1.

Because she cannot be reinstated, Ms. A must file a reapplication on or before May 1 in order to avoid loss of benefits. Since she files the application May 1, cooperates with the investigation, and is otherwise eligible, the application is approved effective May 8. Corrective benefits are issued retroactive to May 1.

Had Ms. A not indicated her desire to cooperate until May I, the day she reapplied, she would not be entitled to corrective benefits for the period of May I through May 7.

When a household reapplies after being denied or canceled for failure to cooperate with front-end investigations decide whether the situation is resolved. If the situation is resolved:

- Document this in the case record.
- Notify DIAL of this decision and approve the application if otherwise eligible.

If the situation has not been resolved, re-refer the case to DIAL by completing a new 470-5130, DHS *Investigative Referral to DIA*.

Duplicate Assistance

Legal reference: 441 IAC 41.25(2)

A participant whose needs are included in a FIP grant cannot receive at the same time a grant from any other public assistance program administered by the Department or by another state, including:

- Tribal TANF payments.
- Foster care.
- Kinship caregiver payments.
- Preparation for adult living (PAL) stipends.
- Subsidized adoption (unless excluding the person from the FIP grant would reduce benefits to the family).
- Refugee matching grant.

Consider subsidized guardianship assistance (whether from Iowa or from another state) the same as foster care. That is, a child is not eligible for FIP while receiving subsidized guardianship assistance.

Consider kinship caregiver payments the same as foster care. That is, a child is not eligible for FIP while receiving kinship caregiver payments. For more information on handling foster care, kinship caregiver payments, and adoption placements, see <u>4-G</u>, <u>When a Child Goes into Foster Care or the Kinship Caregiver</u> <u>Payment Program</u>, <u>4-E</u>, <u>Adoption Subsidy</u>, <u>4-C</u>, <u>Foster Care</u>, and <u>4-C</u>, <u>Kinship Caregiver Payment Program</u>.

Effective October I, 2006, a tribal TANF program became available to Native Americans living in Woodbury County who are also members of a federally recognized tribe. The Woodbury County Tribal TANF Program is operated by the Winnebago Tribe of Nebraska. Tribal TANF programs may eventually be available in other counties.

Native Americans living in a county that has a tribal TANF program have the option of applying for FIP or for the tribal TANF program, but cannot receive benefits for both programs for the same month.

A person is not considered a FIP participant in any month that FIP assistance was incorrectly paid and is subject to recovery. A person who moves from one eligible group to another can receive assistance in the new household if the payment received by the old household is subject to recovery.

On June 22, a child moved from household A to household B. Due to timely notice requirements, the child's needs are not removed from household A's case until August I. However, the FIP that household A receives for the child in July is subject to recoupment since the child is ineligible to receive assistance on household A's case for that month.

Household B applies for FIP for the child on June 22. Provided all other eligibility requirements are met, the child is eligible for FIP in household B effective July 1.

A person may receive public assistance from another state and then apply in Iowa for the same period. They are eligible for in Iowa if assistance from the other state is:

- Subject to recovery by the other state.
- Retained by or returned to the other state and not available to the person.

When a state issues semimonthly payments and a person receives assistance for only part of the month, the person may be eligible in Iowa for the rest of that month. Eligibility in Iowa begins the day **after** the time period the other state's grant was intended to cover or seven days after the date of application, whichever is later. Do not count the assistance from the other state as income.

Electronic Access Card Usage

Legal reference: 441 IAC 41.25(11)

Policy: A participant cannot use an electronic access card (EAC) or personal debit card to access FIP benefits at a:

- Liquor store or any place that mainly sells liquor,
- Casino or other gambling or gaming establishment, or
- Business which provides adult-oriented entertainment in which performers disrobe or perform in an unclothed state (such as a strip club).

This includes these types of businesses located in lowa, on tribal land, or in any other state.

As a condition of eligibility, all applicants and participants must agree in writing, to not use the EAC or their personal debit card at prohibited locations by signing either:

- Form 470-0462 or 470-0462(S), Food and Financial Support Application, or
- Form 470-2881 or 470-2881(S), Review/Recertification Eligibility Document (RRED).

When both parents or both a parent and stepparent are in the home, either parent or stepparent may sign the application or RRED agreeing to not use the EAC at prohibited locations. When a minor parent lives with a self-supporting parent and applies for or is receiving FIP, only the minor parent is required to sign the application or RRED to agree to not use the EAC at prohibited locations.

If the applicant or participant is incompetent or incapacitated, a person acting responsibly on the applicant's or participant's behalf must sign. Only one signature is required on the form. When the parent or stepparent signs the application or RRED they are agreeing to this condition for the entire household.

When the Department receives a detailed complaint or suspects that a participant used an EAC at a prohibited location, refer the case to the Department of Inspections, Appeals, and Licensing (DIAL) for further investigation.

When DIAL finds that a participant accessed FIP benefits with an EAC at a prohibited location, the household:

- Will have committed fraud,
- Will have to repay the amount of cash accessed at the location, as well as any access fees, and
- Will be ineligible for FIP for:
 - Three months for the first misuse and
 - Six months for each additional misuse.

NOTE: When FIP funds are deposited into a participant's bank account, the funds are considered comingled with private funds. Do not refer a complaint that a participant has used a personal debit card at a prohibited location to DIAL because we cannot identify if it was FIP funds accessed at the location.

When parents from a two-parent family separate during an ineligibility period, if the DIAL report:

- Identifies the participant who used the EAC at a prohibited location, the ineligibility period will follow that participant.
- Does not identify the participant who used the EAC at a prohibited location, the ineligibility period will follow the participant who is the case name when the violation occurred.

Procedure: At the application interview, at review, and whenever appropriate, explain to the applicant or participant that the EAC or personal debit card cannot be used at certain locations. This includes using the card at the cash register's point-of-sale terminals as either a debit or credit card and at any ATMs at the location.

When the Department receives a complaint that a participant has used an EAC at a prohibited location, gather as much of the following information from the person making the complaint:

- The participant's demographic data (name, date of birth, social security number, address),
- Where the EAC was used (type of business where the card was used and the business's name and address), and
- When the EAC was used (month, day, year).

To make a referral to DIAL we must have enough details to show that the person is:

- A FIP participant who has an EAC,
- The type of prohibited location where the card was used, and
- When the card was used at the prohibited location. (At a minimum, the month and year.)

When the Department has this information, make a referral to DIAL for an investigation. Forward a copy of the DIAL referral to the FIP policy specialist in the Bureau of Financial, Food, and Work Supports (FFWS) in the Division of Community Access.

Appeals

Legal reference: 441 IAC 7.9(6), 41.25(11)"e"

Policy: Follow the instructions in <u>4-A</u>, <u>Appeals</u> when processing appeals resulting from an electronic access card usage ineligibility period.

In addition, use the following guidelines. An ineligibility period with a new effective date applies when the final appeal decision affirms the ineligibility period and:

- The appeal was filed:
 - Before the effective date of the intended action on the *Notice of Decision* establishing the beginning date of an ineligibility period, or
 - Within 10 days from the date the participant receives the notice establishing the beginning date of an ineligibility period. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period, and
- FIP assistance continued pending the outcome of the appeal.

FIP assistance issued pending the appeal is not subject to recoupment when an ineligibility period with a new effective date applies.

Procedure: Impose a new ineligibility period in ABC, allowing for timely notice, when the final decision affirming the Department's action is received.

Kinship Caregiver Payment (KCP) Program

Legal reference: 441 IAC 41.25(2)

Kinship Caregiver Payment (KCP) program provides an eligible caretaker payments for a child placed in their home by HHS. Caretakers who have a relative or fictive kin* child placed in their home will receive a \$10 per day maximum \$310 payment per month/per child for up to 180 days. Caretakers are not eligible for KCP for the child for the first 60 days they are in the home.

KCP is not optional program. Caretakers don't apply for the KCP, they are automatically placed in the program after a child is in their home for 60 days.

While receiving this payment, the caretaker will be encouraged to become a licensed foster parent, but is not required to do so. If the caretaker is approved to receive a foster care payment for the child, they are no longer eligible for the KCP.

A person cannot receive KCP and FIP at the same time. That is duplicate assistance.

* The definition of caretaker for the KCP is different then who can be a caretaker for FIP purposes. For KCP caregiver means a person to whom a child is related by blood, marriage, or adoption. Fictive Kin means an individual who is not related by birth, adoption, or marriage to a child, but who has a significant, committed, positive relationship with the child.

A child can be in KCP until age 18. When a parent under the age of 18 and the parent's child are in the caretaker/fictive kin placement both will receive KCP. Verify with the foster care worker whether the child's needs are included in the KCP payment.

The household must file a new application if they want FIP after KCP ends. If the caretaker has an active FIP case for other specified relative children the caretaker must request the former KCP child be added to the FIP household. Note: the effective date of FIP must be the day after the last day of KCP eligibility or seven days after the application date, whichever is later. If you have a question if a child is still receiving KCP or the last day the child was eligible for KCP, contact the child's social worker.

Hardship Exemption

Legal reference: 45 CFR 264.1; 441 IAC 41.30(3)

Federal law limits a family's lifetime FIP assistance to a total of 60 months. The program's goal is that the family becomes self-sufficient within this 60-month limit. However, recognizing that this goal is not attainable for all families, the program allows assistance to be provided beyond 60 months to families in hardship conditions. This is called a "hardship exemption."

"Hardship" is defined as a circumstance that is preventing the family from being self-supporting. A hardship exemption is not intended as an automatic extension of the 60-month limit but is intended for families that are faced with barriers that are beyond their control and affect their ability to become self-sufficient. The family's safety takes precedence over the goal of self-sufficiency.

Families with adults that have received 60 months of FIP assistance, as defined in <u>Limit on FIP Assistance</u>, may request a hardship exemption. Requests for hardship exemption must be made on form 470-3826 or 470-3826(S), *Request for FIP Beyond 60 Months*.

Families no longer on FIP that have received FIP for 60 months must also complete an application as a condition for regaining FIP eligibility.

Families may be denied or granted a hardship exemption. The determination is a one- or two-step process:

- 1. Based on supporting evidence, you determine whether a hardship exists that prevents the family from being self-supporting.
- 2. For an FIA-responsible person, PROMISE JOBS determines how the hardship issues will be addressed in the family investment agreement (FIA).

A family:

- Without an FIA-responsible person has to meet step 1.
- With an FIA-responsible person has to meet both steps before the hardship exemption request can be granted.

The family requesting the hardship exemption has primary responsibility for identifying hardship barriers and providing supporting documentation.

For a family with an FIA-responsible person, PROMISE JOBS, along with the family and recommendations from the family's service worker, will determine the focus of the steps to be included in the six-month family investment agreement.

Make the hardship exemption determination as soon as possible but no later than 30 days after the date a valid form 470-3826 or 470-3826(S), *Request for FIP Beyond 60 Months*, is received in any HHS or PROMISE JOBS office. When an application is required for the family to regain FIP eligibility, the 30 days begin the day after the application is received, if that date is later. (See <u>Hardship Exemption Decision</u>.)

Federal regulations require that a hardship exemption must not begin until the adult in the family has received FIP for at least 60 months. A hardship exemption is limited to six consecutive calendar months.

Families may request and be granted more than one hardship exemption if warranted by their hardship circumstances, if they otherwise qualify for the exemption and meet FIP eligibility requirements. A new sixmonth FIA and a new hardship exemption determination are required for each subsequent hardship exemption period.

Each hardship exemption approval or denial must be disposed of with a corresponding *Notice of Decision*. Families whose request for a hardship exemption is denied are afforded normal appeal rights. In addition, you must record the family's particular hardship exemption approval or denial reasons in the FIP Eligibility Tracking (FET).

- Follow the procedures in <u>Verification of Incapacity</u> in this chapter for obtaining medical evidence.
- Proof of application for disability benefits from the Social Security Administration. NOTE: Participation in vocational rehabilitation services is not considered proof of disability but indicates that a disability may exist.
- A written statement from the child care resource and referral center that "suitable" child care as defined in not available in the area where the family lives or where the (potential) job is located.
- Media reports substantiating the family's belongings were destroyed in a fire or other natural disaster, or that the family was involved in an accident, resulting in interrupting or delaying the family's employment arrangement or plans.
- Written statements from people with knowledge of the family's hardship circumstance.
 Written statements from friends or relatives alone are not sufficient to grant a hardship exemption but may be used to support other evidence.
- Lack of employability may be substantiated by any entity that has had contact with the client and is in a position to know the client's limitations, such as the PROMISE JOBS, service, or FaDSS worker; a Vocational Rehabilitation or IWD counselor; or a former or current employer.

When a family claims hardship because of child abuse, in addition to the other possible sources of verification, ask the family to give permission for you to check the Central Abuse Registry to find out if an abuse determination has been made. See <u>Hardship Claim Due to Child Abuse</u> for procedures.

Hardship Exemption Requests

Legal reference: 441 IAC 41.30(3)"e"

Families with adults subject to the 60-month limit who have received or who are close to having received FIP for 60 months may request a hardship exemption. Families that have exhausted their 60-month FIP period may file a hardship exemption request at any time.

Requests for the exemption must be made on form 470-3826 or 470-3826(S), Request for FIP Beyond 60 *Months*. Families that are no longer on FIP will also have to complete the *Food and Financial Support Application*, form 470-0462 or 470-0462(S), as a condition for regaining FIP eligibility.

Form 470-3826 or 470-3826(S) is also an authorization for release of information that allows IM, service, PROMISE JOBS, and FaDSS staff to share with each other substance abuse, mental health, and AIDS/HIV-related information about the family that may be relevant to the hardship exemption determination. Return a copy of form 470-3826 or 470-3826(S) to the hardship exemption applicant as a record of this authorization.

The date of the hardship exemption request is the date a valid form 470-3826 or 470-3826(S), Request for FIP Beyond 60 Months, is received in any HHS or PROMISE JOBS office. The form shall be datestamped upon receipt in either office to preserve the date of the request. If received in a PROMISE JOBS office, the form must be forwarded to the local IM office within one working day. Deny requests received before month 58 because the family's circumstances that exist at that point may change. They may no longer be a true reflection of the circumstances that may exist when the 60-month FIP period ends and the hardship exemption period can begin. No involvement from PROMISE JOBS is needed in this situation.

Similarly, deny requests for a subsequent hardship exemption that are received before month four of the family's existing exemption period. Use notice reason 173. Process requests received in month five or six of the existing exemption period.

You may pend a valid request received in month four. However, the 30-day processing time frame does not begin until the first calendar day of month five of the exemption period.

Record the denial in FET. Complete Part A of form 470-3876, *Hardship Exemption Determination*, as directed in <u>6-Appendix</u>.

When a Hardship Determination Is Not Needed

A family may request a hardship exemption that is not needed because of other overriding FIP case circumstances. If so, deny the request for the applicable reason.

- 1. The family has received FIP for 57 months. The family's 60-month ending date is too far into the future. The hardship exemption request is premature and is denied.
- 2. The family is exempt from the 60-month limit because the only parent in the home is on SSI. A hardship exemption is not needed for the family to qualify for FIP. The request is denied.

Record the applicable denial reason in FET. Complete Part A of form 470-3876, Hardship Exemption Determination.

Even though the hardship exemption request is denied, the family may still be eligible for FIP. If the family is currently on FIP, no further action is needed.

If the family is not on FIP, issue a *Food and Financial Support Application* when the family has not already submitted an application. It's up to the family to return the application. No further action is needed to track return of the application.

If the family does not qualify for the hardship exemption because the family is not eligible for FIP, deny FIP for the applicable reason. Make corresponding entries on FET. Complete Part A of form 470-3876.

The family has received FIP for at least 58 months but is in a six-month period of ineligibility of a subsequent LBP. There is no FIP eligibility until after the end of the ineligibility period. Use notice reason 268 to deny FIP.

There may be other situations not mentioned here when it is evident to you that the family does not qualify for FIP regardless of its hardship circumstances.

If the family fails to provide the requested information by the due date and refuses to authorize you to obtain the information, deny the hardship exemption request. Record the denial in FET.

Complete Part A of form 470-3876, *Hardship Exemption Determination*, to document your decision. Forward a copy of form 470-3876 to the service worker.

If you want to request pertinent information from FaDSS about a family that is or was involved with FaDSS, forward a copy of the family's hardship exemption request. The signed form verifies to FaDSS that they are authorized to release the requested information. Request FaDSS staff to return the information in five working days.

Hardship Claim Due to Child Abuse

When a family claims hardship because of child abuse, ask the family to permit you to check the Central Abuse Registry to find out if an abuse determination has been made. To give permission, the adult in the family must complete two forms:

- Authorization for Release of Information, 470-0461 or 470-0461(S), stating that you are authorized to obtain information from the Central Abuse Registry and the service worker. Specify on the release that the staff doing the child abuse check provide the status of the child abuse report and the name, worker number, and phone number of the service worker involved.
- Request for Child and Dependent Adult Abuse Information, 470-0643. Have the adult complete Section I of the form. Complete Section II of the form yourself.

Send or give a copy of both completed forms to the person authorized to access information in the Central Abuse Registry for your area.

If the Registry shows that the alleged abuse has been **founded or registered**, contact the service worker involved to confirm that the physical or emotional health or safety of the child is at risk. If that worker is no longer a HHS employee, contact the service supervisor to request that the supervisor or another service worker check the records.

If nothing appears on the Registry, this can indicate that:

- The alleged abuse was never reported, or
- The alleged abuse was not investigated or assessed, or
- The abuse report was not confirmed, or
- The abuse was confirmed but not placed on the Registry.

Because of the variables, lack of such a report on the Registry in itself is not sufficient to deny the hardship claim due to abuse. Check with the service worker involved to see if the service worker has identified concerns for the safety of the child that, together with the other available evidence, serve to corroborate the claim.

A check of the Central Abuse Registry is just one method by which to substantiate alleged abuse. The family may provide other corroborating evidence, such as court, medical, psychological, psychiatric, social services, or law enforcement records that indicate (potential) physical or emotional harm to the child. Mrs. J applies for FIP for herself and her child. Also in the home is her spouse, Mr. J. Mr. J has used 60 months of assistance. Therefore, Mrs. J and her child will not be eligible unless they have a hardship condition and Mrs. J signs an FIA. Mr. J is not required to sign the FIA, as he is a stepparent whose needs will not be included in the grant.

See <u>4-J. Referring Clients to PROMISE JOBS</u> for instructions on how to refer the FIA-responsible adults to PROMISE JOBS to write and sign the six-month family investment agreement.

In developing the agreement, PROMISE JOBS incorporates information provided by the family's service worker to:

- Help ensure that the agreement does not conflict with a service plan already in place.
- Support the service plan, to the extent possible and practicable, while simultaneously moving the family toward self-sufficiency.

PROMISE JOBS documents in Part B of form 470-3876, *Hardship Exemption Determination*, whether the family has met the family investment agreement requirement and returns a copy of the form to you.

A family with an FIA-responsible person is required to develop and sign a six-month family investment agreement **before** FIP can be approved. Therefore, failure to develop and sign the agreement results in denial of the family's hardship exemption request rather than a limited benefit plan.

See <u>PROMISE JOBS Participation for FIA-Responsible People</u> for requirements after a family with an FIA-responsible person is approved for hardship exemption.

Hardship Exemption Decision

Make the hardship exemption determination after you have determined whether the family:

- Has a hardship condition, and
- Has completed a six-month FIA with PROMISE JOBS for all FIA-responsible people.

Make the hardship exemption determination as soon as possible but no later than 30 days after the date a valid form 470-3826 or 470-3826(S), *Request for FIP Beyond 60 Months*, is received in any HHS or PROMISE JOBS office.

When a *Food and Financial Support Application* is required for the family to regain FIP eligibility, the 30 days begin the day after the application is received, if that date is later. Follow the instructions in <u>4-B</u>, *Filing a FIP Application*.

NOTE: For requests received in month 58 that are pended, the 30-day period begins on the first calendar day of month 59. Similarly, for subsequent requests received in month four of an existing exemption period, the 30-day period begins on the first calendar day of month five. See <u>When to</u> <u>Accept a Hardship Exemption Request</u> for details.

You have good cause if the 30-day limit cannot be met due to circumstances beyond the family's or your control, such as:

- Information has not been provided by the due date when you and the family have made every reasonable effort to secure it; or
- Emergencies, including, fire, flood, or other conditions occur that are beyond the administrative control of the HHS office.

However, you must issue a *Notice of Decision* the next working day after you have made the final hardship exemption determination to inform the family of its eligibility status for the exemption.

NOTE: You are also responsible for determining eligibility for other assistance programs for which the family may have applied when submitting a *Food and Financial Support Application* as part of its hardship exemption request. Do not delay the eligibility determination for other programs pending the hardship exemption determination.

Make the final determination whether a hardship will be granted as soon as possible. For a family with an FIA-responsible person, make the final determination upon receipt of form 470-3876 from PROMISE JOBS with Part B completed indicating whether the family has attended any required interview and signed the family investment agreement.

- If the family with an FIA-responsible person failed to attend the interview with PROMISE JOBS or failed to sign the FIA, the family is not eligible for a hardship exemption. Document the denial in Part C of the form by checking the "Denied – no FIA" box. Process the denial as directed under <u>Denial of Hardship Exemption</u>.
- If the family with an FIA-responsible person attended any required interview, signed the family
 investment agreement, and continues to meet all nonfinancial FIP eligibility criteria, process the
 approval as described under <u>Six-Month Hardship Exemption Period</u>.

However, do not complete Part C of the form or make FET entries until after your approval entries on ABC have updated and the system has determined whether the family is financially eligible for FIP.

- If the family is financially ineligible due to excess countable income or resources, the family is not eligible for a hardship exemption. Document the denial in Part C of the form by checking the "Denied no FIP eligibility" box. Process the denial as described under <u>Denial of Hardship Exemption</u>.
- If the family is financially eligible for FIP, the family is eligible for a hardship exemption. Document the final hardship exemption approval in Part C of the form by checking the "Approved" box. Complete processing the approval as described under <u>Six-Month Hardship</u> <u>Exemption Period</u>.
- For a family with an FIA-responsible adult, forward a copy of the completed form 470-3876 to:
 - PROMISE JOBS
 - The service worker identified on form 470-3884

- Enter the notice reason code that corresponds to the denial reason on form 470-3876, Hardship Exemption Determination.
- Make entries on other screens in the normal manner.

NOTE: Except when issuing a notice with an "R" entry reason only, delay entering the denial onto ABC until the FIP status has changed to a closed status. For example, enter the denial after the 60-month FIP cancellation or after the system has closed the FIP case in the last month of an existing exemption period. You cannot process a denial on an active FIP case.

When the family's hardship exemption request is denied because the family fails to meet nonfinancial FIP eligibility criteria, follows the steps described above except:

- Process the decision as a denial for FIP rather than a hardship exemption denial.
- Enter on the ABC TD02 screen the FIP notice reason that reflects the nonfinancial reason for the family's FIP ineligibility. For example, if the only eligible child has left the home, deny FIP because there is no eligible child in the home.
- Make entries on FET to reflect that the hardship exemption is denied because the family is not eligible for FIP.

When the family meets hardship exemption criteria but the ABC system determines that the family's countable income or resources exceed limits, ABC will override your approval entries and deny FIP. Document in Part C of form 470-3876 and record on FET that the hardship exemption is denied because the family is not eligible for FIP.

NOTE: Even though denied for a hardship exemption and ineligible for FIP, the family may still qualify for assistance from other programs, such as SNAP or Medicaid. Refer to <u>When a</u> <u>Hardship Determination Is Not Needed</u> for situations when a hardship exemption denial does not create FIP ineligibility.

Six-Month Hardship Exemption Period

Legal reference: 441 IAC 41.30(3)"d" and "e"

When form 470-3876, *Hardship Exemption Determination*, reflects approval of the hardship exemption request, the earliest effective date of the six-month hardship exemption period is the latest of:

- The effective date of the 60-month FIP cancellation, or
- The day after an existing hardship exemption period ends, or
- The date form 470-3826 or 470-3826(S), Request for FIP Beyond 60 Months, is received in any HHS or PROMISE JOBS office, or
- Seven days after the date the Food and Financial Support Application is received, if applicable.

Process the hardship exemption approval according to the family's FIP status, as follows:

 If you received form 470-3826 or 470-3826(S) before the effective date of the family's 60-month FIP cancellation (or on or before the last day of an existing exemption period), a *Food and Financial* Support Application is not needed. If the family is otherwise eligible, reopen FIP to the effective date of the 60-month cancellation (or the day after the existing exemption period ends). Do so even if you do not receive the supporting evidence or determine hardship until on or after that date.

If you did not receive form 470-3826 or 470-3826(S) until on or after the effective date of 60-month FIP cancellation (or after the existing exemption period has ended), a Food and Financial Support Application is required for the family to regain FIP eligibility. The family must meet all FIP eligibility requirements before the hardship exemption approval can be processed.

There is no limit on the number of times a family may receive a hardship exemption. The family must submit form 470-3826 or 470-3826(S), *Request for FIP Beyond 60 Months*, for each hardship exemption request. A new hardship exemption determination is required for each subsequent request. Each subsequent hardship exemption requires a new six-month FIA.

The following sections explain:

- The effective date of assistance for an initial or subsequent hardship exemption
- The duration of the exemption period
- Applying the exemption to a needy specified relative
- The impact of changes in the eligible group
- The effect of changing the 60-month FIP period or six-month exemption period

Effective Date of Assistance for a Hardship Exemption

Participant families that submit form 470-3826 or 470-3826(S), Request for FIP Beyond 60 Months, **before** the effective date of their 60-month FIP cancellation and that are approved for the exemption are eligible to have their FIP case reopened without a new application.

Reopen FIP from the effective date of the 60-month FIP cancellation, as follows:

- Use "reopen" procedures to enter the approval on the ABC system.
- Enter "C" entry reason and status code.
- Enter the notice reason code that reflects the hardship exemption approval.
- Enter the last month of the exemption period in the LIMIT field on TD02.
- Make entries on other screens in the normal manner.

Also make entries on FET to identify the family's hardship reason, as reflected on form 470-3876.

Use the same procedures when a family submits a new form 470-3826 or 470-3826(S) for a subsequent hardship exemption on or before the ending date of its current six-month hardship exemption period and the exemption is approved.

NOTE: You cannot process a hardship approval on the ABC system on an active FIP case. The case must be canceled for the 60-month FIP period before you can process the hardship exemption approval. Similarly, delay processing a subsequent hardship exemption approval until after the system has closed the FIP case in the last month of the existing exemption period.

The six-month hardship exemption stops when the family's FIP case is canceled for any reason **other than** hardship and a *Food and Financial Support Application* is needed for the family to regain FIP eligibility. The normal adverse action notice requirements apply.

If the family's FIP eligibility continues to be dependent on a hardship exemption, the family must also submit a new form 470-3826 or 470-3826(S), *Request for FIP Beyond 60 Months*, in addition to filing a FIP application. A new hardship exemption determination is needed before FIP can be approved.

- Family C is approved for a hardship exemption based on physical or mental health issues. The six-month period is from April through September. In July, Mr. C is released to return to work. Provided his earnings do not create financial ineligibility, the hardship exemption period continues through September as originally approved.
- 2. Family A's hardship exemption period is from January through June. On March 15, Mrs. A reports that the only eligible child has moved out. Mrs. A's FIP case is canceled effective April 1. A Notice of Decision is issued stating FIP is canceled because no eligible child is in the home.

NOTE: If, before April I, Mrs. A reports that the child has returned to the home, FIP shall be reinstated and the hardship exemption period continued through June.

3. Family J's hardship exemption period is from March through August. In May, they fail to return a complete RRED for their review and FIP is canceled for June 1. On May 30, they return the RRED and all necessary information to reinstate FIP. FIP is reinstated for June and the hardship exemption period continues.

NOTE: If eligibility is not reestablished in May or during the grace period, FIP remains canceled and a new application is required to regain FIP eligibility.

If the family's FIP eligibility continues to be dependent on a hardship exemption, the family must also submit a new form 470-3826 or 470-3826(S), *Request for FIP Beyond 60 Months*. A new hardship exemption determination is made and a new period established.

4. Family B's hardship exemption period is from February through July. Ms. B fails to follow the terms of her six-month FIA and a limited benefit plan results. FIP is canceled effective April I because of the limited benefit plan. Since this is Ms. B's second limited benefit plan, she is ineligible for FIP for a minimum of six months.

If Ms. B reapplies for FIP after the period of ineligibility has ended and she is still dependent on a hardship exemption to qualify for FIP, a new form 470-3826 or 470-3826(S) and a new hardship exemption determination are required.

NOTE: If this were Ms. B's first limited benefit plan, and Ms. B reconsidered before the effective date of the FIP cancellation, FIP would be reinstated and the hardship exemption continued through July.

FIP received for a partial month of the exemption period counts as a full month.

The family's 60-month FIP period ends December 31. In June, the family has an emergency. On June 12, the family submits form 470-3826 or 470-3826(S), *Request for FIP Beyond 60 Months*, and the required FIP application. If the family is approved for a hardship exemption, the six-month period will be from June 19 through November 30.

If the Registry shows that the alleged abuse has been **founded or registered**, contact the service worker involved to confirm that the physical or emotional health or safety of the child is at risk. If that worker is no longer a HHS service worker, contact the service supervisor to request that the supervisor or another service worker check the records.

If nothing appears on the Registry, this indicates that the alleged abuse either was never reported or was not investigated or assessed, or that the abuse report was not confirmed. It may also be that the abuse was confirmed but not placed on the Registry.

Thus, lack of such a report on the Registry in itself is not sufficient to deny the minor parent's good cause claim due to abuse. Check with the service worker involved to see if the service worker has identified concerns for the safety of the minor parent or child which, together with the other available evidence, serve to corroborate the claim.

A check of the Central Abuse Registry is just one method by which to substantiate alleged abuse. The minor parent may provide other corroborating evidence, such as court, medical, psychological, psychiatric, social services, or law enforcement records that indicate (potential) physical or emotional harm to the minor parent or child by the adult parent or legal guardian.

If a minor parent claims good cause because of abuse that has not been reported to child protective services, you as a mandatory reporter must make a report to child protective services according to local procedures.

Make the report within 24 hours. If you report orally, also make a written report within 48 hours of your oral report. The results of this investigation may help to establish whether good cause exists.

Making the Decision About Good Cause

Legal reference: 441 IAC 41.22(16), 41.22(18)

Determine each good cause claim at the earliest possible date. Do not use the 30-day limit for processing applications as a waiting period before making a decision or as a basis for denying the application. Extend the time frame only if you and the client have made every reasonable effort but have been unable to get the needed evidence within the time limit.

Notify the client in writing of your decision whether good cause does or does not exist. This notification must explain the decision and the basis for the decision. Keep a copy of the notification in the case record.

When you determine that good cause **does not** exist, also deny the application or cancel the case.

When you determine that good cause **does** exist, also:

- Enter a code on the Automated Benefit Calculation (ABC) system to indicate the good cause reason.
- Review the decision at least every six months if the good cause circumstance is subject to change.

If circumstances change so that good cause no longer exists, notify the participant in writing and proceed to enforce the requirements.

Persons Who Misrepresent Their Place of Residence

Legal reference: 441 IAC 46.29(239B)

A person who is convicted in any state or federal court of having made a fraudulent statement or misrepresentation about the person's place of residence in order to get assistance from two or more states at the same time is ineligible for FIP for ten years.

The disqualification from FIP applies to people who are convicted of having fraudulently obtained assistance from two or more states at the same time from programs under:

- Title IV-A of the Social Security Act, which includes FIP (if in Iowa) or AFDC or TANF (if in another state), but does not include Refugee Cash Assistance; or
- Title XIX of the Social Security Act (Medicaid); or
- Food Stamp Act of 1977; or
- Supplemental Security Income (SSI) program under Title XVI.

The ten-year disqualification period begins on the date the person is convicted. Impose the disqualification on people who are active or inactive on FIP. Do not delay the disqualification for people already excluded from FIP who chose a limited benefit plan or who failed to cooperate with other program requirements. Once a disqualification penalty is imposed, the disqualification continues uninterrupted until completed.

The disqualification applies only to the convicted person. Follow the instructions in <u>Treatment of Income and</u> <u>Resources of Disqualified People</u>. Give timely notice when removing the convicted person from the grant.

If a court decision is pending, include the person's needs in the FIP eligible group until the court decision is made. If the person is convicted, remove the person's needs from the grant beginning the month following the month of conviction. When timely notice cannot be met, remove the person's needs effective the next month. Recover excess assistance issued for any months following the month of conviction.

Consider a conviction in another state the same as a conviction in Iowa. Exclude the person until the tenyear disqualification period imposed by the other state has ended.

Criminal convictions are public records. If a conviction is reported to you, contact the clerk of court in the county (of the state) where the person was convicted for verification of the person's conviction and to determine the ten-year disqualification period. Document the findings in the case record.

Failure to provide needed information about the convicted person when so requested results in FIP ineligibility for the entire household. See <u>6-G</u>, <u>Making Fraud Referrals</u> for information on referring suspected fraud to DIAL.

NOTE: The disqualification does not apply to a convicted person who is pardoned by the President of the United States, beginning with the month after the pardon is given.

See <u>4-G</u>, <u>Establishing the Date of Application and Eligibility</u> for information on adding a person to the eligible group after the disqualification period has ended.

- 1. Ms. A applies for FIP for herself and her child. She is enrolled in a master's degree program at the university. FIP assistance is denied for Ms. A and her child because she is enrolled in a program leading to a degree beyond a bachelor's degree.
- 2. Ms. B applies for FIP for herself and her child. She is enrolled in a bachelor's degree program. If otherwise eligible, she and her child are approved for FIP. Ms. B would also be able to receive FIP if she was enrolled in a program to receive an associate's degree, LPN, RN, or other degree that is **not** beyond a bachelor's degree.
- 3. Mr. and Mrs. C apply for FIP for themselves and their children. Mr. C has been admitted into the doctor of dentistry program, even though he has not yet completed his bachelor's degree. FIP assistance is denied for the entire family, because Mr. C is enrolled in a program leading to a degree beyond a bachelor's degree.

Social Security Number

Legal reference: 441 IAC 41.22(13)

As a condition of eligibility, all applicants and members of the eligible group must either provide a social security number (SSN) or provide proof that an SSN has been applied for, but has not yet been issued or is not known. If a person proves that number has been applied for, do not delay or deny FIP assistance pending issuance or verification of the number.

Do not include in the eligible group the needs of any person for whom:

- A valid SSN has not been provided, or
- An application for an SSN has not been made, or
- Proof of application for an SSN has not been provided, or
- The number has not been reported within the defined period.

EXCEPTION: Battered aliens may receive FIP before applying for an SSN. See <u>4-L, *Battered Aliens*</u> for more information.

If the excluded person is the parent or needy specified relative, that person may still act as payee for any eligible children. An SSN or proof is not required of a payee who is not a member of the eligible group.

Pend the application to allow the applicant additional time if the applicant cannot apply for a number because of circumstances beyond the applicant's control. Determine whether the applicant is **refusing** to meet the requirement or is **unable** to meet the requirement right away.

The child was born in another state and the applicant has difficulty in getting the verification needed to apply for an SSN for the child. The applicant is not refusing to meet the requirement, but is unable to meet it immediately.

If a grant can be approved for some members but not for other members because of the SSN requirement, offer the applicant the following alternatives:

- Pend the application until all members are eligible. The grant, covering all members, will then become
 retroactive to seven days after the date of application or the date the family was otherwise eligible,
 whichever is later.
- Approve the assistance grant for the members who are immediately eligible, with the expectation that the other members will be added to the grant after a proof of SSN application is provided.

There is no retroactive payment for members who are added at a later date. The date of application to add the previously excluded members is the date the participant provides you with proof of application for the SSN.

- Ms. A applies for assistance on April 1 for herself and her child, who was born in Utah. Ms. A hasn't been able to get the child's birth certificate to apply for an SSN. Her application is pending. On June 2, Ms. A receives the birth certificate and applies for the child's SSN. She provides proof on June 3. If otherwise eligible, Ms. A receives assistance retroactive to April 8.
- 2. Ms. B applies for assistance on March 10. She has applied for an SSN for one of her two children, but is having trouble getting a birth certificate for the other. She elects to receive assistance for herself and one child. On March 25, the assistance is approved effective March 17 for Ms. B and the one child.

On April 15, Ms. B receives the necessary verification and applies for an SSN for the second child. On April 18, she provides proof of application for the second child's SSN. If otherwise eligible, the child is added to the grant effective April 25.

When the FIP application is pended, make monthly contacts with the applicant to determine if the applicant is making continued efforts to secure the necessary documentation or verification.

The following sections address:

- Obtaining the social security number
- Failure to give or supply a social security number
- <u>Social security number requirements for newborns</u>
- Follow up after receiving proof of application for a Social Security Number
- Verifying a social security number

Obtaining a Social Security Number

A client can obtain a social security number (SSN) in several different ways:

- The client can use form SS-5, Application for a Social Security Number Card. This form results in the Social Security Administration (SSA) automatically notifying the Department when the number has been received. See <u>14-G</u>, Social Security Number Verification for more information.
- The client can apply directly to the SSA and give the Department a receipt from SSA, form SSA-5028, *Proof of Application*. The client must also report the number to the Department upon receipt.

Through the "Enumeration at Birth" project, the client can apply for a number for a newborn child at the hospital where the child was born. If an infant is born in a hospital, consider that an SSN has been applied for. The client must report the number to the Department upon receipt. If the number is not provided in a reasonable time, follow normal procedures to request the number.

For a client who is a qualified alien that is not authorized to work in the U.S.:

- complete 470-5745, Enumeration Referral,
- sign the form in blue ink,
- include the form with the RFI requesting the client apply for an SSN, and
- inform the client they must take the form to the SSA when they apply for an SSN.

Inform the client that the SSA requires proof of age, identity, and citizenship or alien status when applying for an SSN. Help the client to get these documents, if necessary. For example, the client may need help in getting a certified copy of a birth certificate when a child was not born in Iowa.

See <u>4-L, Battered Aliens</u> for information on how a battered alien obtains an SSN.

Failure to Give or Apply for a Social Security Number

Legal reference: 441 IAC 41.22(13)

If an applicant refuses to give or apply for an social security number (SSN) for a member of the eligible group, do not include the needs of that member when approving the application. If the applicant fails to apply for or provide a number for the only eligible child, deny the entire application.

If a participant refuses to give an SSN for a member of the eligible group, remove the individual from the eligible group. If the participant fails to provide a number for the only eligible child, cancel the entire case.

With the exception of newborns, do not add a person to an existing FIP case without that person's SSN or proof of application for an SSN.

- 1. A mother with two children refuses to apply for a SSN for the younger child. The younger child is not included in the eligible group.
- 2. A mother with one child refuses to apply for a SSN for the child. The case is ineligible.

When adding a person who has been excluded from the eligible group for failure to provide an SSN or proof of application for the number, the date of application is the date when the SSN or the proof of application is provided. The effective date of eligibility is seven days after the date that the number or proof is provided.

Ms. T and two of her children receive FIP. A third child is excluded from the grant due to lack of a SSN. On May 5, Ms. T provides proof of application for the excluded child's number. The child is added to the grant effective May 12.

EXCEPTION: Battered aliens may receive FIP before they apply for an SSN. See <u>4-L</u>, <u>Battered Aliens</u> for more information.

Social Security Number Requirements for Newborns

Legal reference: 441 IAC 41.22(13)"b"

When a baby is born in a hospital, consider that a social security number (SSN) has been applied for through the "Enumeration at Birth" project. The client must report the number to the Department upon receipt. If the number is not provided within three months from the date of birth, follow normal procedures to request the number.

Ms. C has a baby on April 7 in a hospital. She requests to add the baby to her eligible group on April 15. On April 25, the baby is added to the grant effective April 22 (seven days after Ms. C's report).

Ms. C is not required to supply proof of application for an SSN before the baby is added. However, she must supply the SSN for the baby by the end of the third month following the baby's birth.

When the local office adds the child on April 25, the worker sets a task for the beginning of July to request the SSN if it hasn't been provided.

On July 5th the worker receives the task and reviews the file and sees that the SSN has not been provided for the baby. The worker sends the household a request for the SSN the same day. If Ms. C supplies the SSN application by July 15, no further action is taken. If the proof is not supplied by that date, the worker removes the child effective August 1.

If Ms. A provides the required proof on July 25, the child is reinstated for August 1. If Ms. A provides proof on or after August 1, the worker adds the baby to the grant effective seven days after the date the SSN is received.

When a baby is not born in a hospital, or tells you they did not apply for an SSN at the hospital through the "Enumeration at Birth" project, a FIP participant who is the mother of a newborn child has until the last day of the month following the month:

- the baby was born, or
- she was released from the hospital to apply for the newborn's SSN. The month the mother is discharged is the month of change.

Proof of application for the baby's SSN must be in the case record no later than the last day of the month following the month the baby was born or the mother is released from the hospital in order to avoid a payment error. For example, whether the baby was born or the mother is discharged June I or June 30, proof of application must be in the case record no later than July 31.

You do not need to wait until the month after the baby was born or mother's release from the hospital to take action.

 Ms. A has a baby on March 7 and is released from the hospital on March 10. She requests to add the baby to her eligible group on March 15 and tells you that she did not apply for an SSN for the baby at the hospital. On March 25, the baby is added to the grant effective March 22 (seven days after Ms. A's report).

Ms. A is not required to supply proof of application for an SSN before the baby is added. However, she must supply proof of the application for a number by April 30, or the child will be removed effective May 1.

When the local office adds the child on March 25, the worker makes changes on the system and also sends a letter to Ms. A telling her that she must provide proof of application for an SSN by April 15, or the baby will be removed from the grant.

If Ms. A supplies the proof of SSN application by April 15, no further action is taken. If the proof is not supplied by that date, the worker removes the child effective May 1.

If Ms. A provides the required proof on April 25, the child is reinstated for May 1. If Ms. A provides proof on or after May 1, the worker adds the baby back to the grant effective seven days after the date proof is received.

2. Ms. D has a baby on October 3 at home. She requests to add the baby to her eligible group on October 10 and tells you that she applied for an SSN for the baby. On October 15, the baby is added to the grant effective October 10 (seven days after Ms. D's report).

Ms. D is not required to supply proof of application for an SSN before the baby is added. However, she must supply proof of the application for a number by November 30th, or the child will be removed effective December 1.

When the local office adds the child on October 15, the worker makes changes on the system and also sends a letter to Ms. D telling her that she must provide proof of application for an SSN by November 15, or the baby will be removed from the grant.

If Ms. D supplies the proof of SSN application by November 15, no further action is taken. If the proof is not supplied by that date, the worker removes the child effective December 1.

If Ms. D provides the required proof on November 25, the child is reinstated for December 1. If Ms. D provides proof on or after December 1, the worker adds the baby back to the grant effective seven days after the date proof is received.

Follow Up After Receiving Proof of Application for a Social Security Number

When a participant has provided proof of application for a social security number (SSN) at application time the participant has until the end of the third month after application to provide the SSN. The local office should set an event to request the SSN at the beginning of the third month.

Verifying a Social Security Number

Legal reference: 441 IAC 41.22(13)

Social security numbers (SSN) must be verified by the Social Security Administration. Assume the number is verified unless you receive an alert that there is an error. When an SSN entered into the system does not match SSA records, the SSA generates an error report and an alert is issued to the worker.

If you receive an alert:

- 1. Check the system to confirm that the number the client gave was correctly entered into the system.
- 2. If the number was correctly entered but cannot be verified, instruct the client in writing to apply for a new number to resolve the discrepancy. Allow the client ten days to provide form SSA-5028, *Proof of Application*.
- 3. If the client does not provide the form within ten days, remove the needs of the person without a verified social security number from the grant. If that person is the only eligible child, cancel the entire FIP grant. Issue timely notice and recoup assistance if necessary.

Specified Relatives

Legal reference: 441 IAC 41.28(1), 41.22(3)

Policy: To be eligible for FIP, a child must live with a specified relative. "Relative" includes people related by blood, marriage, or adoption. The child's home can be with either the specified relative or the spouse of the specified relative, even if the marriage is terminated by death or divorce. The following is a list of people who qualify as specified relatives.

- Father, adoptive father
- Mother, adoptive mother
- Grandfather, grandfather-in-law (the subsequent husband of the child's natural grandmother, i.e., stepgrandfather), adoptive grandfather
- Grandmother, grandmother-in-law (the subsequent wife of the child's natural grandfather, i.e., stepgrandmother), adoptive grandmother
- Great-grandfather, great-great-grandfather
- Great-grandmother, great-great-grandmother
- Stepfather, but not his parents
- Stepmother, but not her parents
- Brother, brother-of-half-blood, stepbrother
- Brother-in-law, adoptive brother
- Sister, sister-of-half-blood, stepsister
- Sister-in-law, adoptive sister
- Uncle, aunt (of whole or half blood)
- Uncle-in-law, aunt-in-law (the spouse of the child's natural uncle or aunt)
- Great uncle, great-great-uncle
- Great aunt, great-great-aunt
- First cousins, nephews, nieces
- Second cousins

NOTE: If the person with whom the child is living does not meet the definition of "specified relative," there is no FIP eligibility even if the household contains half-siblings of the child who are FIP eligible.

The household consists of Ms. A, Ms. A's child by Mr. B, and Mr. B's child from another relationship. Even though the two children are half-siblings, Ms. A cannot receive FIP for Mr. B's child because she is not a specified relative to that child.

A person's first cousin's child is their first cousin once removed. This relationship does not meet the definition of a specified relative, so there is no FIP eligibility.

The household consists of Ms. B and child C. Child C's mother is Ms. B's first cousin. Child C is Ms. B's first cousin once removed. Ms. B cannot receive FIP for child C because she is not a specified relative to that child.

Second cousins are children of people who are first cousins to each other (i.e., grandchildren of siblings).



Procedure: Use the prudent-person concept to determine whether a person meets the second cousin definition. Ask the applicant to describe how the child in question is related.

If the applicant is not sure or the applicant's description is questionable, ask for documentation to reveal how the parties are related (e.g., birth certificates of the applicant and second cousin, their parents and grandparents, or any court documents or other records that may contain clarifying information). Follow the policies in <u>4-B</u>, <u>Verification</u> in those situations.

A guardian or conservator of the child can act as the applicant or participant and receive the FIP grant only if the person is a specified relative to the child and the child lives with that person.

Relatives of the "putative" father can qualify as a specified relative only after the court has established paternity, or the putative father has acknowledged paternity with written evidence and there is no other legal father.

Written evidence can include a letter, an affidavit, or a signed *Food and Financial Support Application*. Use the prudent-person concept regarding written evidence. A favorable determination made by another government agency (e.g., the Social Security Administration, the Veteran's Administration) is also reliable evidence of paternity.

The following sections address procedures for:

- Determining the natural father
- Determining if a common-law marriage exists
- Determining if a child lives with a specified relative

Determining the Natural Father

Legal reference: 441 IAC 41.22(3)"b," 41.28(1)"b"

The term "natural father" refers to the male who can be considered to be the child's father for the purpose of determining eligibility. Consider a man as the natural father if he:

- Was married to the mother at the time of the child's conception or birth (unless the court has declared this man **not** to be the father), or
- Has been declared by the court to be the father, even though not married to the mother at the time of the child's conception or birth, or
- Claims to be the father, unless the child already has a legal father.

When paternity has not been established through marriage or a court decision, allow a man claiming to be the natural father to be the payee or be included in the eligible group if he:

- Signs the Food and Financial Support Application or
- Provides a signed statement that he is the father of the child.

"Biological father" is the male responsible for the conception of the child. "Legal father" is the male considered the father under lowa law. When the child's biological father is someone other than the child's legal father, consider the legal father to be the parent. Do so until the court establishes that the legal father is not the parent of the child. See <u>4-B</u>, <u>Referrals to CSS</u> for more information.

Mrs. A, a FIP participant, is separated from Mr. A. She lives with Mr. K and has a child by him. Mr. A is considered the legal father of the child and must be referred to CSS. The child is considered deprived based on Mr. A's absence.

Although Mr. K is the child's biological father, he cannot be included in the eligible group until the court declares Mr. A not to be the child's father. Until then, Mr. K's income and resources are not considered (except for amounts he makes available to the eligible group).

Determining If a Common-Law Marriage Exists

Legal reference: 441 IAC 41.28(1)

When determining if someone is a specified relative, there may be situations where a common-law marriage exists or the applicant or participant claims a common law marriage exists. A common law marriage exists if **both** people:

- Are free to marry,
- Have intended or have agreed to be married, and
- Publicly declare themselves to be husband and wife.

Since a common-law marriage affects who may be considered as a specified relative, determine if such an arrangement exists when the client claims a common-law marriage, even if the two parties are no longer living together when the claim is made.

If a common-law marriage currently exists (or existed in the past), either party can be considered as a specified relative (stepparent) to a child of the other party and may receive FIP for the child on a nonparental case, if otherwise eligible.

Accept a couple's claim that a common-law marriage exists unless you have reason to question the claim. The following items can further indicate that a common-law marriage exists:

- loint income tax forms
- Joint purchase of property (house, car, etc.)
- Mortgages or loans
- Insurance policies
- School records
- Employment records
- Birth records
- Joint bank accounts
- Statements to friends or relatives
- Hotel or motel registrations

Evidence must represent the couple as husband and wife. One item is not enough evidence, but several items might indicate a common-law marriage.

To enter into a common-law marriage, the two people must be **free to marry**, the same as for a ceremonial marriage. If either common-law party is currently married to someone else, but a divorce did not take place between the two parties, that negates a claim of common-law marriage.

Because a common-law marriage is a legal and valid marriage, a divorce is needed to dissolve the marriage to render the two parties free to marry again (or enter a new common-law marriage). But remember, just like couples who are in a ceremonial marriage, the common-law parties may choose to separate rather than go through a divorce.

When a common-law marriage exists, treat the adults the same as any other married couple. This means you apply either stepparent or parental policies.

Treat a case as a shared living arrangement when a couple claims not to have a common-law marriage.

When a couple claims their relationship is not a common-law marriage, but you believe one might exist, refer the case to the Department of Inspections, Appeals, and Licensing (DIAL), for front-end investigation. See <u>Front-End Investigation Procedures</u> for more information on referrals.

Treat the case as a shared living arrangement until DIAL has determined that a common-law marriage exists and has notified you to that effect.

Determining if Child Lives With a Specified Relative

Legal reference: 441 IAC 41.21(3)

When a specified relative accepts responsibility for the child's welfare and the child shares a home with the relative, the relative and child are considered "living with" each other. If the child or relative is **temporarily** absent from the household, the relationship continues to exist even **if** the relative temporarily loses responsibility for the care and control of the child.

A child may be under the jurisdiction of the court, or a person or agency may hold legal custody, but the child does not **live** with the person or agency. There may be a court order specifying that public assistance should not be sought.

Regardless of existing legal documents, FIP eligibility is based on all factors in the child's current living arrangement. The child is considered to be "living with" the relative, as long as the child is either physically present or temporarily absent.

The following sections address circumstances involving:

- Adoption
- Termination of parental rights
- Joint custody
- Definition of a "home"

Joint or Shared Custody

Legal reference: 441 IAC 41.21(3)

A child must be living in the home at least 50% of the time to be in the FIP eligible group. A child is eligible for FIP in one home only. When a child spends equal amounts of time (50/50) in the home of each parent, you must designate with which parent the child is living.

- If only one parent is interested in applying for FIP, consider the child as "living with" that parent when determining FIP eligibility.
- If one parent is receiving FIP and the other parent applies, advise both parents that FIP
 assistance cannot be paid to both parents. In this case, assistance will not be paid to the
 parent who applied, unless the other parent voluntarily agrees to cancel the grant currently
 received.
- If both parents apply for FIP assistance, talk to the parents, together if possible, to determine with which parent the child is "living." Again, keep in mind, the child can be eligible in one parent's home only.

If the parents cannot decide who should get FIP, make the determination yourself. Document the basis for your decision in the case record. Explain the situation in the comment section when referring the absent parent to CSS.

The following questions may be helpful when deciding who the child is "living with" if the child appears to be spending equal amounts of time in each home and the parents cannot decide who will receive the grant. This is not a complete or final list of questions but gives some general guidance.

- Which parent lives in the same school district as the child?
- Who purchases most of the child's clothing?
- Which parent does the school contact in an emergency?
- Where are most of the child's clothing and toys stored?
- Who does most of the child's laundry?
- Who maintains medical records and sets up routine doctor's appointments?
- Who has the final say as to what the child can or cannot do if there is a disagreement?

Adoption

Legal reference: 441 IAC 41.21(3)

When a mother intends to place her child for adoption shortly after birth, the child is considered as living with the mother until she signs the legal release of custody and actually relinquishes custody. Under Iowa law a release of custody to voluntarily place a child for adoption cannot be signed less than 72 hours after the child's birth.

Establish a parental case for the adoptive parent. Include on the case the parent's biological child (if applicable) and the adopted child. Establish a separate nonparental case for the adopted child's sibling in the home who was not adopted.

An adoption severs the legal relationship between the child who is adopted and that child's biological parents and biological siblings. However, the adoption does **not** sever their blood relationship.

Consequently, when a child who was adopted returns to the home of the biological parent, the biological parent is not considered the legal parent of the child but is still considered a specified relative to the child. For FIP purposes, establish a nonparental case for the child, with the biological parent as payee. Treat the case like any other nonparental case.

If the biological parent requests FIP assistance as well, include the biological parent on the case as a needy specified relative, if otherwise eligible. Treat the eligible group according to <u>Needy</u> <u>Specified Relative</u> in this chapter.

If the biological parent's home also includes biological siblings of the child who was adopted, and assistance is requested for everyone, establish two separate FIP cases:

- A parental case for the biological parent and the biological siblings.
- A nonparental case for the child who was adopted. See <u>Nonparental Specified Relative</u> in this chapter.

Parental Rights Terminated

Legal reference: 441 IAC 41.28(1) and (2)

When parental rights have legally been terminated, but the child has **not** been adopted by another person, the parent is still considered a parent of the child for FIP purposes. Therefore, establish a parental case when the child lives in the home of a parent whose parental rights were previously terminated.

Definition of a "Home"

Legal reference: 441 IAC 41.21(3), 41.23(2); Iowa Code Chapter 235A

A home is defined as an established family setting or a family setting that is in the process of being established. Evidence must show that the relative assumes and continues the responsibility for the child in this setting. This includes living together or sharing a household.

A home is considered suitable unless the court rules it unsuitable and removes the child. When you have reason to believe a home is unsuitable because of neglect, abuse, or exploitation of the child, refer the family to the Protective Service Unit for investigation. Make an oral report to the unit within 24 hours.

Strikers

Legal reference: 441 IAC 41.25(5)

A "strike" is defined as a concerted stoppage, slowdown, or interruption of operations by employees. This includes a stoppage because a collective bargaining agreement has expired.

When a **parent** participates in a strike on the last day of the month, the entire family is ineligible for FIP for that month. However, when a person **other than a parent** participates in a strike on the last day of the month, only that person is ineligible for FIP for that month.

Mr. C reports on November 5 that he was on strike from October 10 through October 28. No action is needed because Mr. C was not on strike the last day of October.

The following sections address:

- Actions required when a person is participating in a strike
- Circumstances that are not included as "being on strike"

When a Person Is Participating in a Strike

Legal reference: 441 IAC 41.25(5)

For **applicant** cases, if the striker is **not** the parent, only the person who is on strike is ineligible for any and all months in which the person was participating in the strike on the last day of that month. When the strike is expected to continue through the month of decision, the person is ineligible for all prior months.

If the striker is a parent **applying** for FIP:

- Deny the application if you anticipate that the parent will continue on strike through the last day of the month of decision.
- Approve the application (if all other eligibility criteria are met) if you anticipate that the strike will
 not continue through the month of decision. However, the family is not eligible for any prior
 month in which the parent was on strike on the last day of the month.

If the striker is a parent on an **active** case, cancel the case if the strike is expected to continue through the last day of the month. If the striker is not a parent but is included in the grant, remove the striker's needs from the grant if the strike is expected to continue through the last day of the month.

No recoupment is necessary for the month of change (the month the strike began). Recoup the striker's portion of the FIP benefits issued for any month following the month of change in which the person continued to participate in the strike on the last day of the month.

- Ms. A receives FIP for herself and her child. In May, she reports her union is on strike. The strike began April 28. The IM worker contacts the union representative and determines that the workers are expected to return to work no later than May 25. Ms. A remains eligible. No recoupment is necessary if the strike actually ends in May.
- 2. Same situation as in Example 1, except the strike is not expected to end in May. Ms. A's case is canceled effective June 1 and May benefits are subject to recoupment.
- 3. Ms. B receives FIP for herself and her child. In September, the IM worker learns that Ms. B has been on strike since July 15. It appears that the strike will continue through the last day in September. Ms. B's case is canceled effective October 1. Benefits issued for August and September are subject to recoupment.

When a Person Is Not Participating in a Strike

Legal reference: 441 IAC 41.25(5)"c"(2)

A person is not participating in a strike if the person meets all of the following conditions:

- The person is not picketing and does not intend to picket during the strike,
- The person does not draw strike pay, and
- The person either:
 - Crosses the picket line and goes to work, or
 - Provides a signed statement indicating the person is willing to return to work but does not want to cross the picket line for fear of injury, death, or trauma from harassment. The service area manager determines if such a risk to the person's physical or emotional well-being exists.