

NOTICE OF TCC OVERPAYMENT

Date _____
Worker # _____
County _____
Case # _____

[]

Client Name (for provider overpayment)

It has been determined that you have received an overpayment in Transitional Child Care (TCC) benefits.

Amount of the Overpayment	Dates Overpayment Received
Reasons for the Overpayment	

This notice is issued according to policies in Employees' Manual IV-C(4).

IMPORTANT: Federal law says that the Department of Human Services must collect all overpayments. All overpayments must be referred to the Department of Inspections and Appeals (DIA). If you disagree that you got an overpayment, or if you disagree with the amount, dates or reasons for the overpayment, **you must appeal within 30 days from the date of this notice**. You may also appeal the method of collection of the overpayment when you get a separate Notice of Decision that tells you what method will be used. At your request, your worker will give you more information, including worksheets showing how the overpayment was figured. You may contact **Legal Services Corporation of Iowa** at 1-800-532-1275, or if you live in Polk County call 243-1193 if you need help with an appeal.

ACTIONS THAT MAY BE TAKEN AFTER 30 DAYS FROM NOW

1. Your worker may deduct (offset) a part or all of the amount overpaid from future child care payments.
2. DIA may take your Iowa income tax refund or other income from the state of Iowa.
3. DIA may refer your case for prosecution (if DIA has reason to believe that you held back information or gave wrong information on purpose to get benefits you shouldn't have).
4. DIA may file a civil suit to collect the overpayment.
5. If you are receiving Family Investment Program (FIP) assistance (AFDC) and you give us written permission, we may reduce your FIP grant to collect an unpaid Transitional Child Care overpayment.

You can also repay the overpayment. Note: If you repay any money in the 30 days after the date on this notice and then appeal, during that time, we will not return the money unless the final appeal decision tells us to.

<i>Worker Signature</i>	<i>Phone Number</i>
	()

See the other side for a complete statement about your appeal rights.

APPEAL RIGHTS

If you disagree that you have received an overpayment or disagree with the amount, dates, or reason for the overpayment, you have the right to appeal. Your appeal rights and procedures for hearing are explained in the Iowa Administrative Code 441--Chapter 7.

How to Appeal. You must appeal in writing to the Department of Human Services' office in your county, or to the Department of Human Services' Appeal Section, Hoover State Office Building, Des Moines, Iowa 50319-0114. You may use the Department of Human Services' appeal form or you may simply send a letter asking to appeal. There is no fee or charge for an appeal. (Also, see Time Limits below.) Your county Department of Human Services' office will assist you in filing an appeal if you ask them.

Time Limits. You must file your appeal within 30 calendar days of the date the notice for this claim was sent to you to be ensured of a hearing. When the appeal is filed late [that is more than 30 calendar days, but less than 90 calendar days after the date of a notice for this claim], the Director of the Iowa Department of Human Services must approve, based on good cause for late filing, whether a hearing shall be granted. No hearing shall be granted if the appeal is filed more than 90 calendar days from the date of this notice for this claim. Any discussion between you and the Department does not extend these time periods.

Granting a Hearing. The Department of Human Services will determine whether or not an appeal may be granted a hearing. If a hearing is granted, you will be notified of the time and place. A hearing need not be granted if the appeal is not eligible to be heard. If a hearing is not granted, you will be notified of the reason.

Presenting Your Case. If a hearing is granted to your appeal, you may explain your disagreement with the overpayment or have someone else, like a relative or friend, explain your disagreement for you. If you wish, you may be represented by an attorney, but the Department cannot pay for the attorney. Your county Department of Human Services' office has information about legal services based on ability to pay that may be available to you. You may also phone Legal Services Corporation of Iowa at 1-800-532-1275. If you live in Polk County, phone 243-1193.

Note: If your family's income changes, you may ask to change your repayment agreement.

POLICY ON NONDISCRIMINATION

This action was taken without regard to race, color, national origin, sex, age, religion, creed, political belief, or mental or physical disability. If you have reason to believe that you have been discriminated against for any of the reasons stated above, you may file a complaint with the Iowa Department of Human Services by completing a Discrimination Complaint form. Any departmental office or the Department's Bureau of Equal Opportunity can give you a form. You may also file a complaint with the Iowa Civil Rights Commission (if you feel you were treated differently **BECAUSE OF** your race, creed, color, national origin, sex, religion or disability) or the United States Department of Health and Human Services, Office for Civil Rights.

IOWA DEPARTMENT OF HUMAN SERVICES
Bureau of Equal Opportunity
Hoover State Office Building
Des Moines IA 50319-0114

IOWA CIVIL RIGHTS COMMISSION
c/o Grimes State Office Building
211 E Maple St Second Fl
Des Moines IA 50319-0201

US DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of Civil Rights Region VII
601 E 12th St Rm 248
Kansas City MO 64106
(FIP, Medicaid, and services only)