

Notice of Instruction

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West Central Florida
Area Agency on Aging, Inc.



Assistance. Advocacy. Answers on Aging.

Notice of Instruction Number: 071213-EHEAP Revised Application and Updates

TO: ALL EHEAP Providers

FROM: Christy Wright, Program Manager

DATE: July 12, 2013

SUBJECT: 2013 EHEAP Application and Updates - Effective date 07/12/2013

This Notice of Instruction provides recent updates to the Emergency Home Energy Assistance Program (EHEAP). The attachments to this notice will further instruct the EHEAP Providers on requirements for compliance.

Upon receipt of this Notice of Instruction, please use the revised "EHEAP Application" (dated 7/1/2013), which was updated to conform to the new Client Information and Registration Tracking System (CIRTS) changes for EHEAP data entry. The application also includes additional data requirements for performance measures developed by the U.S. Department of Health and Human Services (HHS) Administration for Children and Families (ACF). The attached "EHEAP Required Data Entry in CIRTS" document has been updated with current CIRTS screen shots and instructions.

Pursuant to the Department of Economic Opportunity's (DEO) new Social Security Number Policy Form requirements, the attached form, "Notice Regarding Collection of Social Security Numbers," is required to be signed and dated by the applicant and placed in the client's EHEAP file. The attached "EHEAP Client File Content Checklist" (EHEAP Contract Attachment IX) used for monitoring has been updated to include the Social Security form as a required client file document.

The "EHEAP Technical Assistance (T.A.) – 2013" document has been revised to clarify the new requirements. A new section has been added to the T.A. document, titled "Dates," to specifically address the importance and implications of each date.

Should you have questions, please contact your WCFAAA Program Manager. We greatly appreciate your attention to this matter.

Attachments:

EHEAP application

EHEAP Required Data Entry in CIRT

Notice Regarding Collection of Social Security Numbers

EHEAP File Content Checklist

EHEAP Technical Assistance - 2013

**DEPARTMENT OF ELDER AFFAIRS
EMERGENCY HOME ENERGY ASSISTANCE FOR THE ELDERLY PROGRAM APPLICATION**

Heating Season (October - March) Cooling Season (April - September)

DATE STAMP ↑

APPLICANT'S DEMOGRAPHIC DATA:			
Social Security Number:		Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Partnered <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	
Name: (Household member age 60 and older) First M.I. Last		Home Address: (Number and Street)	
Phone Number:		City:	State: FLORIDA ZIP code:
Date of Birth (mm/dd/yyyy)		Is client's home address public housing? <input type="checkbox"/> No <input type="checkbox"/> Yes	Number of People in Household _____
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Household's Annual Income (from page 2) \$ _____	
RACE: <input type="checkbox"/> White <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Other		Is there an individual with a disability in the household? <input type="checkbox"/> No <input type="checkbox"/> Yes	Status: <input type="checkbox"/> GOAH <input type="checkbox"/> TRNE (check one)
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Other		Is there a child 5 years old or younger in the household? <input type="checkbox"/> No <input type="checkbox"/> Yes	Eligibility Code:
Primary Language: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other: _____		Is there a child 0-2 years old in the household? <input type="checkbox"/> No <input type="checkbox"/> Yes	Provider ID #:
Does client have limited ability reading, writing, speaking, or understanding English? <input type="checkbox"/> No <input type="checkbox"/> Yes		Is there a child 3-5 years old in the household? <input type="checkbox"/> No <input type="checkbox"/> Yes	Worker ID #:

OTHER ELIGIBILITY DATA:

1. Give the following information for applicant first, then each person living in your home. If more than five persons live in your home, list the additional persons, giving the same information, on a separate sheet of paper and attach it to this form.

Name	SS #	Age	DOB	Relationship To Applicant	Type Income*	Annual Income
				SELF		

*Type income includes: Wages, self-employment, SSA, SSI, regular gifts, unemployment comp., retirement benefits, TANF/WAGES, pension, interest on savings, etc.

2. Do you share your living or mailing address with others who are not a part of your home? Yes No. Provide their names: _____

3. Is anyone in your home not a U.S. citizen or not an alien lawfully admitted for permanent residence? Yes No the Immigration and Naturalization Act: _____

4. (PSA 1 ONLY) Are you or is anyone in your household a member of the Poarch Indian Tribe? Yes No

5. Check the programs you /anyone in your household are currently eligible for/are receiving assistance from: Supplemental Security Income (SSI)
 Community Services Block Grant (CSBG) Weatherization Assistance Program (WAP) None of these

6. Do you live in a government subsidized housing project or Section 8 housing,? Yes No. If yes, complete the following
Address: _____
City/State/Zip: _____ County: _____

7. Do you live in a dormitory, nursing home, adult foster home, or any kind of group living facility? Yes No. If yes, go
Name of place where you live: _____ Address: _____
City/State/Zip: _____ County: _____

8. Have you or any member of your household received energy assistance in the current season? Yes No. If yes, complete
Name of Agency: _____ Type of assistance: Crisis Home Energy Weather

9. What is the primary source of heating home? Electricity Gas Fuel Oil Wood Kerosene
Company Name Customer Name on Account Customer Account # Company's Telephone #

10. Supplemental Heating Source? Electricity Wood N/A

11. Air Conditioning Unit Type: Central A/C Window/Wall A/C Fans Other - specify (including evaporative cooler) _____
Power Company Name Customer Name on Account Customer Account # Company's Telephone #

12. I certify that my energy crisis is due to the following situation:

<input type="checkbox"/> I have a past due or disconnected notice.	<input type="checkbox"/> My power has been disconnected.
<input type="checkbox"/> I have less than 30 days of deliverable heating fuel on hand.	<input type="checkbox"/> I have no heating fuel.
<input type="checkbox"/> I need to repair or replace home energy equipment.	<input type="checkbox"/> My home energy equipment is inoperable.
	<input type="checkbox"/> I need a deposit to turn on power.

Please carefully read the following statement and sign:
The information above is, to the best of my knowledge, true and complete. I understand that priority in providing assistance will be given to those households with the lowest income and greatest need, i.e., those households in which the elderly, disabled, medical needy or children reside. I authorize the agency to make benefit payments directly to my energy supplier. I am aware that after I have provided all the information requested, if I am applying for crisis assistance, the agency has 48 hours; 18 hours if my situation is life threatening, to approve or deny my application. I am also aware that if I am not approved or denied within the time allowed, or not approved for the correct amount, I have a right to an appeals hearing. (If you sign with an "X" two witnesses are required.)

Client Signature: _____

Date: _____

1. Household Income Computation - List sources and amounts of all household income.
(Computation is required for all households.)

Gross Earned	Income per month:	<u>Consumer qualifies for EHEAP if:</u> <input type="checkbox"/> Household member age 60 and older, <input type="checkbox"/> Consumer has a home energy emergency, <u>AND</u> <input type="checkbox"/> Annualized income is 150% or less of poverty income guidelines.
Income Source	\$ _____	
_____	\$ _____	
Gross Unearned	Income per month:	
Income Source:	\$ _____	
_____	\$ _____	
_____	\$ _____	
_____	\$ _____	
TOTAL	\$ _____	

2. Show calculations below:
 Total Gross Monthly Earned Income: \$ _____
 Total Gross Monthly Unearned Income: + \$ _____
 Add Medicare Premium and/or Part D + \$ _____
 Total Gross Monthly Income: = \$ _____ (monthly x 12 = annual)
 Total Gross Annualized Income: \$ _____

Annual income limit* (150% poverty) by household size:

1.....	\$17,235
2.....	\$23,265
3.....	\$29,295
4.....	\$35,325
5.....	\$41,355
6.....	\$47,385
7.....	\$53,415
8.....	\$59,445

(Add \$4,020 for each additional member of family units with more than 8 members.)

Number of persons in household: _____

Annual Income Limit: \$ _____

*Poverty Guidelines effective 4/1/2013 per DEO

3. Income is at or below the income limit? ~~Yes~~ ~~No~~ **annual household income is less than 50% of the current Federal Poverty Guidelines for household size, and no one in the household is receiving SNAP assistance, include a signed statement from the applicant of how basic living expenses (i.e., food, shelter and transportation) are provided.**

4. Date verified household has not received LIHEAP Crisis Benefits: Contact Person: _____ Date: _____

5. Is the applicant a homeowner? Yes No
 a. If yes, and the applicant has received more than three LIHEAP or EHEAP payments within an 18-month period, has a referral been made to the Weatherization Assistance Program? Yes No **If no or N/A, explain** _____

6. Check verification of Energy Crisis. If not an eligible crisis, deny. Verify the benefit will resolve the crisis. If the maximum will not resolve the crisis and arrangements to resolve cannot be made, deny. This section must be completed.

a. Is the applicant in a crisis situation? <input type="checkbox"/> Yes <input type="checkbox"/> No	c. Does the 18 hour or the 48 hour rule apply? <input type="checkbox"/> 18 hr <input type="checkbox"/> 48 hr
b. Is the household in a life-threatening situation? (if yes, 18 hr. applies in next question) <input type="checkbox"/> Yes <input type="checkbox"/> No	d. Will the EHEAP benefit resolve the crisis situation? <input type="checkbox"/> Yes <input type="checkbox"/> No

7. If the household is still eligible, verify the minimum amount needed and record below. (Explain different amount paid on the line below):

a. Vendor: _____ Minimum Amount: _____ Contact Person: _____ Date of Contact: _____

b. Is the name on the fuel bill that of a household member? Yes No **If no, explain:** _____

c. \$ _____ EHEAP Benefit Amount
 - \$ _____ Deduct the Section 8 or public housing utility subsidy
 \$ _____ Total EHEAP Benefit Amount (see 6d above)

(Deduct the amount of the subsidy for the period covered by the delinquent utility bill, from the total benefit amount, or indicate N/A)

d. Provide the following information about the benefit(s) provided:

Company Name	Customer Name On Account	Customer Account #	Company's Telephone #	Service/Product*	<u>Amount Paid from EHEAP minus Subsidy</u>
_____	_____	_____	_____	_____	_____

*Examples: Electricity, deposit, propane, fuel oil, wood, blanket, fan, repair to heating system, repair to cooling system, late fees/penalties.

e. If over \$600, explain how excess cost will be met: _____

8. Resolution of Energy Emergency:

a. Case Approved (check one) Yes No

b. Date of resolution: _____ Time of Resolution: _____

c. Was the 18/48 hour rule met? Yes No

d. Written notification sent to applicant? Yes No

e. How was authorization/notification made to the vendor? _____

9. Denial of Assistance: If energy assistance was denied, explain: _____

PLACE A COPY OF THE NOTICE OF APPROVAL OR DENIAL IN THE APPLICANT'S FILE.

I have determined the eligibility of the applicant. I am not the applicant, nor am I a friend, relative or employee of the applicant.

Caseworker's Name (Print) _____ Signature: _____
 Date: _____ Agency: _____

Application must be reviewed for mistakes and appropriate file documentation prior to payment:

Supervisor/ Name (Print) _____ Signature: _____
 Date: _____ Agency: _____

EHEAP REQUIRED DATA ENTRY IN CIRTS

1. An Emergency Home Energy Assistance for the Elderly (EHEAP) Application is required to be completed for individuals seeking energy assistance. If the applicant is not found in CIRTS, enter the applicant's demographic information from the EHEAP application. If the applicant already exists in CIRTS, skip to numbers 2 – 5 below. No new rows are added and the data is over-written.

ADD_CLIENT_INFO
20130618
CIRTS
Date 06/19/2013
User CIRTSADMIN

PSA	Owner ID	SSN	Client ID	First Name	Last Name	
02	20009	201306194	1001140951	JANE	DOE	<input checked="" type="checkbox"/> Demographic Complete <input type="checkbox"/> PAS Complete <input type="checkbox"/> Open Case <input type="checkbox"/> Open Enrollment

A. DEMOGRAPHIC SECTION

SSN	Owner ID	First Name	M.I. Last Name
201306194	20009	JANE	DOE

Medicaid Number	Best Contact Telephone Number	Date of Birth	Date of Death	Sex
		07/19/1919		FEMALE

Race: (Mark all that apply):

<input type="checkbox"/> White	<input type="checkbox"/> Black / African American	<input type="checkbox"/> Asian	
<input type="checkbox"/> American Indian/Alaskan Native	<input checked="" type="checkbox"/> Native Hawaiian/Pacific Islander	<input type="checkbox"/> Other	

Ethnicity **Primary Language** **Primary Language Description**

HISPANIC / LATINO	ENGLISH	
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Does client have limited ability reading, writing, speaking, or understanding English? **Marital Status**

Physical Location
Home Address
Mailing Address
Contact Person(s)

Home Address

 Date of Last Change 06/19/2013

Street 101 TEST AVENUE

Street con't.

ZIP 32301 **ZIP 4**

City TALLAHASSEE

County LEON **State** FL **Telephone Number**

Is client's home address public housing?

2. Household Annual Income

- Go to Additional Client Information screen
- Enter Y to **"Incomes?"**
- Enter HAI = Household Annual Income for Type.
- Enter Household Annual Income for Amount. Do not enter "\$0.00" for the Amount unless the client's income is truly "\$0.00."

CIRCLES
CLIENT DISPLAY AND LIMITED UPDATE

PSA: 02 SSN: 201105061 Intake Date: Medicaid #: Date: 05/06/2011
 Client Id: 2001743817 First Name: TEST MI: Last Name: EHEAP User: CIRTSADMIN

Addresses ? N Birth Date: 04/17/1947 DOBV: Sex: F Race: B - BLACK Ethnicity: O - OTHER

PSA	Type	Income/Asset Code	Amount	More?
02	HAI	N = \$2001 - \$5000	\$12,345.00	<input checked="" type="checkbox"/> N
<input type="checkbox"/>				<input type="checkbox"/>
<input type="checkbox"/>				<input type="checkbox"/>
<input type="checkbox"/>				<input type="checkbox"/>

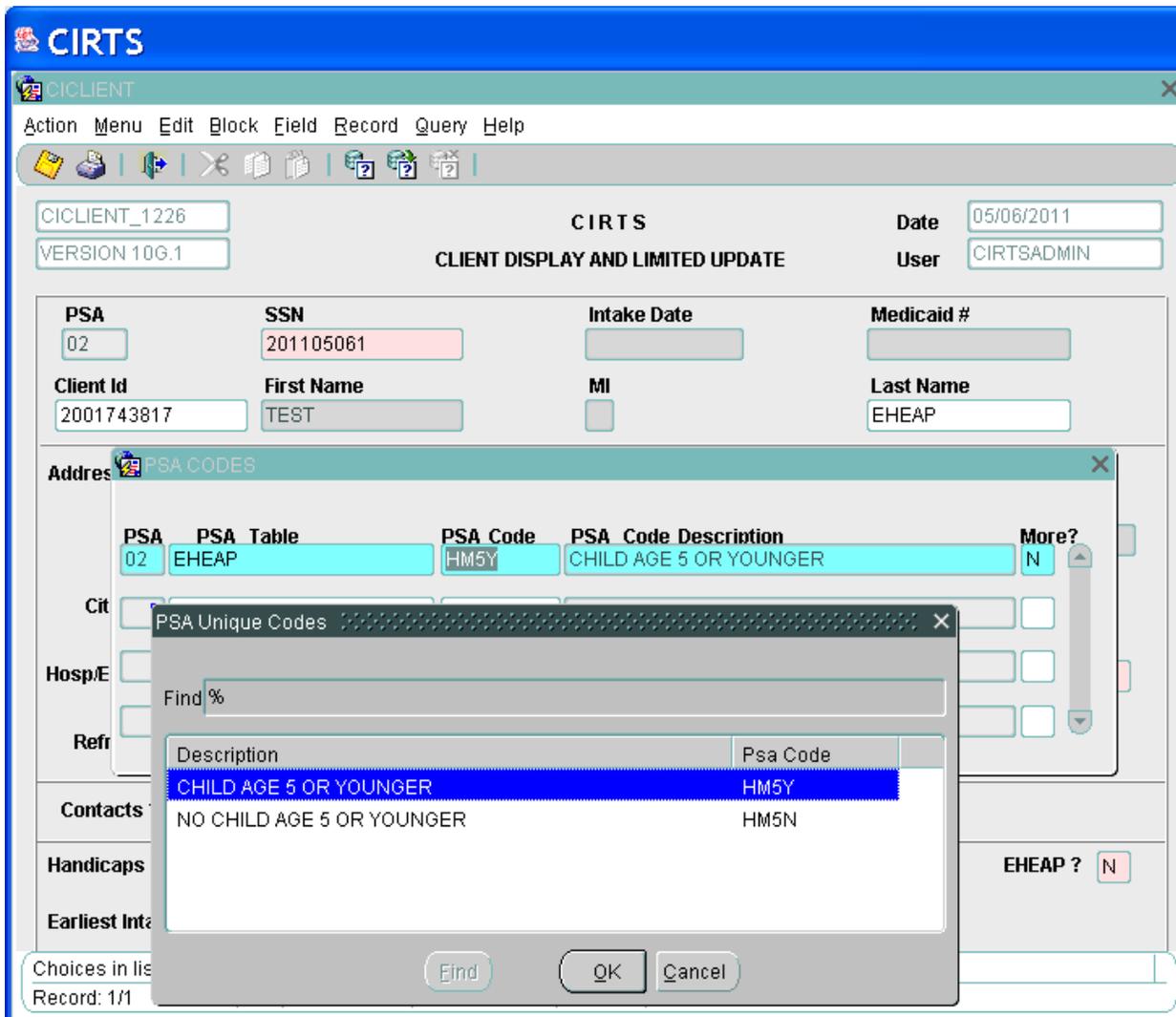
Incomes ? Y EHEAP ? N

Earliest Intake Date: PSA Codes ? N

Enter Code for Income Type (F9 for List) - Required
 Record: 1/1 ... List of Valu... <OSC>

3. Child who is age 5 or younger living in the household

- a. On the Additional Client Information screen, enter Y to "PSA Codes?"
- b. Enter EHEAP for PSA Table.
- c. Enter the PSA code (F9 for a list of values). Choose from the following values:
 - i. HM5N = NO CHILD AGE 5 OR YOUNGER
 - ii. HM5Y = CHILD AGE 5 OR YOUNGER



4. Number of persons living in the household

- a. On the Additional Client Information screen, enter Y to “PSA Codes?”
- b. Enter EHEAP for PSA Table.
- c. Enter the PSA code (F9 for a list of values). Choose from the following values:
 - i. HM1 = ONE HOUSEHOLD MEMBER
 - ii. HM2 = TWO HOUSEHOLD MEMBERS
 - iii. HM3 = THREE HOUSEHOLD MEMBERS
 - iv. HM4 = FOUR HOUSEHOLD MEMBERS
 - v. HM5 = FIVE HOUSEHOLD MEMBERS
 - vi. HM6 = SIX HOUSEHOLD MEMBERS
 - vii. HM7 = SEVEN HOUSEHOLD MEMBERS
 - viii. HM8 = EIGHT HOUSEHOLD MEMBERS
 - ix. HM9 = NINE HOUSEHOLD MEMBERS
 - x. HM10 = TEN HOUSEHOLD MEMBERS
 - xi. HM11 = ELEVEN HOUSEHOLD MEMBERS
 - xii. HM12 = TWELVE HOUSEHOLD MEMBERS

The screenshot shows the CIRTS software interface. At the top, there is a blue header with the CIRTS logo. Below it is a window titled 'CICLIENT' with a menu bar (Action, Menu, Edit, Block, Field, Record, Query, Help) and a toolbar. The main area displays client information for 'CICLIENT_1226' and 'VERSION 10G.1'. The client's name is 'TEST' and the last name is 'EHEAP'. A date of '05/06/2011' and user 'CIRTSADMIN' are also shown. A pop-up window titled 'PSA CODES' is open, displaying a table of PSA codes and descriptions. The table has columns for PSA, PSA Table, PSA Code, PSA Code Description, and More?. The row for 'HM5' is highlighted, showing 'EHEAP' as the PSA Table and 'FIVE HOUSEHOLD MEMBERS' as the description. Below the table, there are fields for 'Cit', 'Hosp/E', and 'Refr'. At the bottom of the main window, there are several checkboxes for 'Contacts?', 'Comments?', 'Languages?', 'Handicaps?', 'OAA?', 'SSI?', 'Medicaid Waiver?', and 'EHEAP?'. The 'PSA Codes?' checkbox is checked. A footer bar contains the text 'Enter "Y" to Enter Another PSA Code, "N" to Return to Client Screen' and 'Record: 2/2'.

PSA	PSA Table	PSA Code	PSA Code Description	More?
02	EHEAP	HM5Y	CHILD AGE 5 OR YOUNGER	Y
	EHEAP	HM5	FIVE HOUSEHOLD MEMBERS	N

Handicapped members living in the household

- a. On the Additional Client Information screen, enter Y to “EHEAP Codes?”
- b. Choose from the following values:
 - i. Y = Handicapped Household Member
 - ii. N = No Handicapped Household Member

CIRTS
CIRCIENT
 Action Menu Edit Block Field Record Query Help

CIRCIENT_1226 **CIRTS** Date: 05/06/2011
 VERSION 10G.1 CLIENT DISPLAY AND LIMITED UPDATE User: CIRTSADMIN

PSA: 02 SSN: 201105061 Intake Date: Medicaid #: **EHEAP ?**

Client Id: 2001743817 First Name: TEST MI: Last Name: EHEAP

Addresses ? N Birth Date: 04/17/1947 DOBV:

Sex: F Race: B - BLACK Ethnicity: O - OTHER

Citizen: Marital Status: M - MARRIED

Hosp/Emerg: Emerg:

Refri Src: - **Incomes ?** N

Contacts ? N Comr: **Handicapped Household Member(s)** Y

Handicaps ? N OAA ? N SSI ? N Medicaid Waiver ? N **EHEAP ?** Y

Earliest Intake Date: PSA Codes ? N

Enter Code for Most Often Used Fuel (F9 for List) - Required

Record: 1/1 ... List of Valu... <OSC>

5. EHEAP Client Enrollments

- a. Enter the program status of GOAH = GOAL ACHIEVED if the client is served.
- b. Enter the program status of TRNE = TERMINATED CLIENT NOT ELIGIBLE.
- c. Enrollment Date = CASEWORKER SIGNATURE DATE.

CIENROLL		CIRTS				Date 06/19/2013			
20130606		CLIENT ENROLLMENTS				User CIRTSADMIN			
(Press Ctrl+Page Down to access Waitlist)									
PSA	02	SSN	201306194	Client Id	1001140951	DOB	07/19/1919	Owner ID	20009
First Name			MI	Last Name					
JANE				DOE					
PSA	Program Comp.	Status	Enrollment		Elig. Code	Provider	Loc	Worker	
02	EHEAP	GOAH	06/19/2013	06/19/2013	AGE	20009	01	CIRTSADMIN	

EHEAP ENROLLMENTS AND EXCEPTIONS REPORT

This report can be found at [Enterprise Application Services, CIRTS Reports, Monitoring section](#).

When running this report, select the following:

1. PSA: Enter the PSA
2. Provider: Enter ALL PROVIDERS or a specific provider
3. Location: Enter ALL LOCATIONS or a specific location
4. Program: Enter EHEAP or EHEAW (for Weather-Related, when available)
5. City: Enter ALL CITIES
6. Poverty Line: Enter **11,490 (for 2013)**
7. Poverty Line Increment for each additional household member: Enter **4,020 (for 2013)**
8. Start and End Date: Enter the start and end dates for the reporting period

The Annual Poverty Level must be entered when you run the EHEAP Enrollments and Exceptions report. The current income limits can be found at the Poverty Guidelines website:

<http://www.aspe.hhs.gov/poverty/index.shtml>

The screenshot shows a web browser window titled "CIRT Reports - Mozilla Firefox". The address bar contains the URL: https://199.250.26.79/reports/cirts/pf_eheap_exceptions.jsp?cmdkey=cirts_pf. The page content includes the Department of Elder Affairs logo and the title "EHEAP Enrollments and Exceptions". Below the title, the "Report parameters:" section contains the following fields:

PSA :	01
Provider:	ALL PROVIDERS
Location:	ALL LOCATIONS
Program:	ALL PROGRAMS
City:	ALL CITIES
Poverty Line:	11490
Poverty Line Increment for each additional household member :	4020
Start Date(MM/DD/YYYY):	04/01/2013
End Date(MM/DD/YYYY):	06/30/2013
Include SSN or Client ID?	ClientID
Output Format:	PDF

At the bottom of the form are two buttons: "Run Report" and "Reset".

Highlights of the EHEAP report include the following:

1. Annual Household Income is displayed.
2. The Adjusted Poverty Line (using the EHEAP PSA codes HM% to determine the household size) and the percent of poverty line are shown.

For example, if a client has a four member household with household annual income of \$10,000, the annual poverty line is \$11,490 and the additional amount per person is \$4,020, then the adjusted poverty level is 11,490 + (4,020 X3) = 23,550. The percent of poverty line will then be (10,000/23,550) = 42.46 percent.

The provider must obtain a statement from the client as to how basic expenses are met for any client whose income is less than 50 percent of the Poverty Guidelines.

Household gross income must be 150 percent or below the Poverty Level in order to be "GOAH". Clients whose income is over 150 percent of the Poverty Level must be "TRNE."

If a client is missing the Household Annual Income or the number of persons living in household, they are counted in the "No Income Data" total at the report end and "*****" is shown in the column where the data is missing. "*****" is shown in the column where other required data is missing. The data will need to be corrected prior to submission of the report.

SAMPLE REPORT DETAIL - TO BE SUBMITTED AS THE REQUIRED HOUSEHOLD REPORT

 EHEAP Enrollment and Exception Statistical Report for Period 01/01/2011 - 06/30/2011 All Providers All Locations All Programs All Cities											
PSA: 02		Annual Poverty Line:		\$10,890	\$3,820	for each additional household member					
County: BAY											
Provider Location	Client Name	Client ID	Program Status	End Enrollment	Age	HAI	Handicap Member	Child Under 5	# in House	Adjusted Poverty Line	% of Poverty Line
20001 01	EHEAP, TEST	2001743747	GOAH	01/11/2011	66	FS	*****	*****	HM4	22350	> 150%
20001 01	TESTING, MORE	2001743532	GOAH	02/01/2011	60	*****	Y	*****	*****		NO DATA
Count by County: 2											
County: LEON											
Provider Location	Client Name	Client ID	Program Status	End Enrollment	Age	HAI	Handicap Member	Child Under 5	# in House	Adjusted Poverty Line	% of Poverty Line
20009 01	DOE, JJ	2001743671	GOAH	01/11/2011	98	\$14,000.00	*****	*****	*****		NO DATA
20009 01	EHEAP, TEST	2001743817	GOAH	05/06/2011	64	\$0.00	Y	HMSY	HM5	26170	0.00%
20009 01	TEST, TEST	2001743748	GOAH	01/11/2011	79	FS	*****	*****	*****		> 150%
20009 01	TEST, UNDER60	2001743819	TRNE	02/04/2011	***	\$13,102.00	N	HMSY	HM3	18530	70.71%
Count by County: 4											
County: TAYLOR											
Provider Location	Client Name	Client ID	Program Status	End Enrollment	Age	HAI	Handicap Member	Child Under 5	# in House	Adjusted Poverty Line	% of Poverty Line
20019 01	EHEAP, TEST	2001743839	GOAH	03/17/2011	87	\$12,345.00	Y	*****	HM9	41450	29.78%
20019 01	TRNE, TESTING	2001743818	TRNE	04/05/2011	79	*****	*****	*****	HM2	14710	NO DATA
Count by County: 2											
Total by PSA: 8											
Report run on: 13-MAY-11 04:34 PM											
Page 1 of 2											
Report run by: CIRTADMIN											



EHEAP Enrollment and Exception Statistical Report
for Period 01/01/2011 - 06/30/2011
All Providers
All Locations
All Programs
All Cities

PSA: 02 Annual Poverty Line: \$10,890 \$3,820 for each additional household member

Assisted Household Report	BAY	CALHO UN	FRANK LIN	GADSD EN	GULF	HOLME S	JACKS ON	JEFFER SON	LEON	LIBERT Y	MADIS ON	TAYLO R	WAKUL LA	WASHI NGTON	TOTAL
1. # of Household Assisted	2	0	0	0	0	0	0	0	3	0	0	1	0	0	6
2. Households Assisted With Gross Income:															
A. Under 75% Poverty:	0	0	0	0	0	0	0	0	1	0	0	1	0	0	2
B. 75% - 100% Poverty:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C. 100% - 125% Poverty:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
D. 125% - 150% Poverty:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E. Over 150% Poverty:	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
F. No Income Data Avail. or Not Enough Info. :	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
3. Households with at least One member:															
A. 60 Years or older	2	0	0	0	0	0	0	0	3	0	0	1	0	0	6
B. Disabled	1	0	0	0	0	0	0	0	1	0	0	1	0	0	3
C. Age 5 years or under	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
D. Under 60 Years Old	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Undup. Households Assisted	2	0	0	0	0	0	0	0	3	0	0	1	0	0	6
Applicant Household Report															
# of Applicant Households	2	0	0	0	0	0	0	0	4	0	0	2	0	0	8
A. Under 75% Poverty:	0	0	0	0	0	0	0	0	2	0	0	1	0	0	3
B. 75% - 100% Poverty:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C. 100% - 125% Poverty:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
D. 125% - 150% Poverty:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
E. Over 150% Poverty:	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
F. No Income Data Avail. or Not Enough Info. :	1	0	0	0	0	0	0	0	1	0	0	1	0	0	3

Report run on: 13-MAY-11 04:34 PM

Page 2 of 2

Report run by: CIRTSADMIN

The report's last page summarizes the client information by county using the provider location county served (not the client's home address). It is the AAA's responsibility to ensure clients in all counties in the PSA receive EHEAP assistance.

Assisted Household Report, "2.E. Over 150% Poverty" row: With the elimination of automatic eligibility, this number should be zero. If there are numbers in this row, refer to the detailed report to correct the data prior to submission of the report.

Assisted Household Report, "2.F. No Income Data Available or Not Enough Info." row: If there are numbers in this row, refer to the detailed report to see which client(s) is missing data. The data will need to be corrected prior to submission of the report.

Assisted Household Report, Households with at least one member, "3.D. Under 60 Years Old" row: If there are numbers in this row, refer to the detailed report to see which client(s) is under 60. The data will need to be corrected prior to submission of the report.

If EHEAP and EHEAW are being reported for the same period, run the report twice, once for each program, and both submit to DOEA.

**NOTICE REGARDING COLLECTION OF SOCIAL SECURITY NUMBERS
EMERGENCY HOME ENERGY ASSISTANCE FOR THE ELDERLY PROGRAM**

The following disclosure is being made pursuant to section 119.071(5), Florida Statutes.

Social Security numbers of applicants and household members are requested because this information has been determined to be imperative for the performance of the duties and responsibilities prescribed by law under the Emergency Home Energy Assistance for the Elderly Program. This information is not required by state or federal law; however, Social Security numbers are necessary to determine eligibility for program services and specifically for the following purposes:

1. To verify an applicant's identity.
2. To verify household size.
3. To verify household income.

A Social Security number collected pursuant to this notice can only be used by the Florida Department of Elder Affairs, the Area Agency on Aging, and _____
(provider) for the purposes specified above.

Nondisclosure except under limited circumstances.

Social security numbers will not be disclosed to others unless required or authorized by Florida law. Section 119.071(5), Florida Statutes, allows disclosure of a person's Social Security number under the following specific, limited circumstances:

- If disclosure is expressly required by federal or Florida law or is necessary for the agency or governmental entity to perform its duties and responsibilities;
- If the individual expressly consents to disclosure in writing;
- If disclosure is made to prevent and combat terrorism pursuant to the U.S. Patriot Act of 2001 or Presidential Executive Order 13224 (blocking property and prohibiting business transactions with persons who commit, threaten to commit, or support terrorism);
- For an agency employee and dependents, if disclosure is necessary to administer the person's health benefits or pension plan funds; or
- If disclosure is for the purpose of the administration of the Uniform Commercial Code by the office of the Secretary of State.
- If disclosure is requested by a commercial entity for permissible uses under the federal Driver's Privacy Protection Act of 1994, the federal Fair Credit Reporting Act, or the federal Financial Services Modernization Act of 1999 (for example, to verify the accuracy of personal information provided by the individual to the commercial entity; use by an insurer in connection with claims investigation or anti-fraud activities; for use in connection with a credit transaction).

Acknowledgment of Receipt of Notice

I confirm that I have been provided a copy of this notice regarding the collection of my Social Security number and the Social Security numbers of all household occupants as part of the application process for the Emergency Home Energy Assistance for the Elderly Program.

Date

Applicant's Signature

EMERGENCY HOME ENERGY ASSISTANCE FOR THE ELDERLY CLIENT FILE CONTENT CHECKLIST

CASE NAME	PSA#	AGENCY	APPROVAL_____		DENIAL_____	
NAME OF WORKER	APPLICATION DATE	DISPOSITION DATE	DATE MONITORED			
PROGRAM REQUIREMENTS REVIEWED			Yes	No	N/A	COMMENTS
1. Individual case file for the applicant includes client's name, address, sex, and age.						
2. Household contains a member 60 or older.						
3. The household is in the Florida county covered by the contract.						
4. <u>All</u> household members are listed and their name, age, DOB, and income(s) are included.						
5. Client file contains documentation of Social Security numbers for all household members.						
6. Client file contains signed notice regarding collection of social security number.						
7. The applicant file contains official income documents as listed in #1 of the EHEAP Application.						
8. If income is self-declared, is there a self-declaration form signed by the applicant for all adult members lacking income verification or claiming \$0 income?						
9. The household's total gross income is calculated correctly and is at or below 150% of the OMB Federal Poverty Level for household size.						
10. Statement of how basic living expenses (i.e., food, shelter and transportation) are being provided if total household income is less than 50% of the current Federal Poverty Guidelines and no one in the household is receiving SNAP assistance.						
11. Checked applicant is not in categories listed in #10 of the EHEAP Application.						
12. Verified and documented household has not received LIHEAP Crisis Assistance during the same heating or cooling season.						
13. Documentation of Weatherization Assistance Program (WAP) referral, if applicable.						
14. Copies of fuel bills or other supporting documentation of proof of energy crisis for the residence in which they reside.						
15. Only energy related elements of a utility bill are paid unless required to resolve the crisis.						
16. Only the past due or delinquent portion of a utility bill is paid. If a different amount is required by the utility company, an explanation is provided on page 2, in the space below #7a.						
17. Energy crisis resolved in 48 hours (18 hours if life-threatening situation).						
18. Written notice of approval or denial for services is issued within 15 working days of application approval.						
19. Written explanation provided on page 2, #7d when the need exceeds the \$600.00 limit.						
20. Appropriate benefit provided, at or below \$600.00.						
21. All required sections of the application are signed and dated by the client, intake staff, and supervisory/edit staff PRIOR to payment..						
22. Proof of payment to vendor.						
23. Place completed DOEA Form 211 (revised 1/2013) in client file.						

INSTRUCTIONS: A check mark in the Yes column indicates the requirement has been met. A check mark in the No column indicates the requirement has not been met or is questionable. Each "No" mark must be explained under "COMMENTS".

Reviewer's Signature

Date

EHEAP TECHNICAL ASSISTANCE – 2013

Revised 7/1/2013

PURPOSE of the Program:

The purpose of the Emergency Home Energy Assistance for the Elderly Program (EHEAP) is to assist low-income households with at least one person age 60 or older, if the household is experiencing a home energy emergency.

TABLE OF CONTENTS

This document is a compilation of past technical assistance questions and responses, along with additional program information.

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ACRONYMS

The following acronyms are used with this material:

APS – Adult Protective Service
CARES - Comprehensive Assessment and Review for Long Term Care Services
CIRTS - Client Information and Registration Tracking System
CSBG - Community Services Block Grant
DEO - Florida Department of Economic Opportunity
DOEA - Department of Elder Affairs
EHEAP - Emergency Home Energy Assistance Program for the Elderly
LIHEAP - Low Income Emergency Assistance Program
PSA – Planning and Service Area
SNAP – Supplemental Nutrition Assistance Program
SSA – Social Security Administration
SSI - Supplemental Security Income
USCIS - U. S. Citizenship and Immigration Services
WAP - Weatherization Assistance Program

APPLICATION:

NOTE: All sections of the application (DOEA Form 114) must be completed. The provider is responsible for using the most recent application issued by the Department.

1. Can we copy the application onto 8 ½ x 11 paper to make it a little bigger for the seniors to be able to see better?

The application can be re-formatted as long as the content is not altered.

2. Question #1 - page 1: (Give the following information for applicant first, then each person living in your home. If more than five persons live in your home, list the additional persons, giving the same information, on a separate sheet of paper and attach it to this form.)

SSN - What happens if the applicant refuses to give the Social Security number? Do we just make one up for CIRT, i.e., for applicant Jane Doe Smith born on 01/01/25, enter it into CIRT as JDS010125? What is required for the other household members?

Social Security numbers and documentation of these numbers are required for all household members. Documentation of all Social Security numbers must be maintained in the applicant's file. Some exception may apply and will be outlined by the Department as situations arise. In cases where an exception may apply, pseudo IDs may be created as your agency does for other programs. However, the applicant will still need to provide identification and proof of income. All household members, their Social Security numbers, and income must also be listed on the application for services.

The applicant's file must contain documentation all household members' Social Security numbers. Examples of documented Social Security numbers are Social Security cards and/or award or determination letters from entities such as government agencies that have already verified the Social Security number.

In addition to obtaining documentation of each household member's Social Security numbers, copy the forms of identification such as the driver's license for the applicant and each household member and place them in the applicant's file. A birth certificate can be used for children's identification.

NOTE: Assessors must inform all applicants that their SSN is confidential under law and disclosure of their SSN is required for program services. To comply with section 119.071(5), F.S., assessors must provide in writing to each applicant the reason the SSN is being collected and explain the use of the SSN to determine benefits or services, including federal benefits that may be appropriate for the applicant. This notice, provided through Notice of Instruction, should be placed in the applicant's file.

3. Can we serve aliens?

The provider cannot serve an illegal alien. To be eligible for EHEAP, the applicant must be a citizen of the United States, or an alien who is eligible for federal benefits. This does not include illegal aliens, aliens with temporary admittance status such as visitors, students, or refugees waiting assignment of official status by the U. S. Citizenship and Immigration Services (USCIS). In the Low Income Energy Assistance Program (LIHEAP), Qualified Aliens is a federally means tested program. Documentation of citizenship is required, i.e., USCIS "Green Card." To be eligible for EHEAP, the applicant must be a legal resident. If there is a legal citizen in the household, then the household

is eligible to be screened for EHEAP. If anyone in the household is receiving SNAP Assistance (food stamps) or Supplemental Security Income (SSI), then the citizenship requirement is considered to be met; however, income eligibility is now required regardless of other program participation. It is the provider's responsibility to verify citizenship.

4. Question #5 - page 1: (Check the programs you / anyone in your household are currently eligible for /are receiving assistance from.....: SNAP Assistance (food stamps) Supplemental Security Income (SSI), None of these.)

If the applicant is not on SNAP Assistance (food stamps) and we mark "no" at the top of the application and then on #5 we check that the applicant is eligible, will there need to be any documentation on the application?

Check the appropriate box for #5 only if the applicant has been determined eligible by the appropriate agency. If the household's income appears to fall within the eligibility guidelines, but the applicant is not receiving any of the forms of assistance, or determined eligible by the administering agency, mark "none of these." An appropriate referral is recommended.

There is no longer automatic EHEAP eligibility based upon current eligibility for SNAP Assistance (food stamps) or SSI. However, SNAP and SSI program qualification letters may be used to document household size and income.

5. Question # 6 - page 1: (Check the programs you / anyone in your household are currently eligible for /are receiving assistance from.....: Community Services Block Grant (CSBG), Weatherization Assistance Program (WAP), None of these.)

The applicants probably won't know what CSBG is, even though they may have received help in the past. They won't know what Weatherization means either.

Applicants are no longer automatically eligible for EHEAP based upon current eligibility for the Community Services Block Grant (CSBG) and/or the Weatherization Assistance Program (WAP). Referrals should be made to CSBG and/or WAP as appropriate. The website for both programs is listed below:

www.floridajobs.org

6. Question #7 - page 1: (Have you or any member of your household received energy assistance in the current season?)

Do we list LIHEAP assistance and EHEAP assistance provided through other agencies for this time period?

Any LIHEAP or EHEAP assistance should be listed, irrespective of which agency provided the benefit. Each year an applicant is eligible for one summer crisis benefit during the period from April 1 to September 30, and one winter crisis benefit between October 1 and March 31. An applicant's eligibility for crisis benefits is not related to the agency's contract periods. Because contract periods may not coincide with the crisis benefit periods, upon occasion, the agency may pay two summer or two winter benefits for an applicant from the same contract. This is acceptable as long as the applicant does not receive more than one benefit during the summer crisis period or more than one benefit during the winter crisis period.

7. Question #8 - page 1 (I certify that my energy crisis is due to the following situation:
- I have a past due or disconnect notice.
 - I have less than 30 days of deliverable heating fuel on hand.
 - I need to repair or replace home energy equipment.
 - My power has been disconnected.
 - I have no heating fuel.
 - My home energy equipment is inoperable.
 - I need a deposit to turn on power.

"I need a deposit to turn on power...(cooling or heating)." In the past, the only "deposits and fees" we have paid were those required to restore the service once it was disconnected. Please clarify.

It is allowable to pay deposits to turn on utilities for cooling/heating, respectively. Paying for deposits may be for new service, in conjunction with continuation of current service or restoration of service.

- 7a. Question #3 – page 2: (If annual household income is less than 50 percent of the Federal Poverty Level for household size, include a signed statement of how basic living expenses (i.e., food, shelter and transportation) are provided.

Does this question have to be answered for all applicants?

Yes, if the applicant's annual income is less than 50 percent of the current Federal Poverty Level for household size and does not receive SNAP Assistance (food stamps), the applicant must include a signed statement explaining how food basic living expenses (i.e., food, shelter and transportation) are provided.

8. Question #4 – page 2: (Date verified household has not received Florida Department of Economic Opportunity (DEO) LIHEAP Crisis Benefits.)

Why is the LIHEAP provider contacted?

The LIHEAP provider must be contacted as a part of the eligibility process to ensure LIHEAP crisis assistance was not received during the current heating or cooling season.

9. Question #7a - page 2: (If the household is still eligible, verify the minimum amount needed and record below. (Explain different amount paid in the space below.))

The utility company is requiring the current and delinquent amount to be paid to avoid disruption of service. Can we pay the entire bill?

Only the delinquent portion of the utility bill is to be paid, or the minimum necessary to resolve the crisis. If the utility company requires the entire amount (or a different amount than the delinquent portion) to be paid to avoid disruption of service, provide a written explanation in the space provided below # 7a of what amount (not to exceed Department limits) must be paid. If combined amounts are close to or over the \$600 benefit limit, then ask to speak to a supervisor who may have the authority to lower the amount.

10. Question #7a - page 2: (If the household is still eligible, verify the minimum amount needed and record below. (Explain different amount paid in the space below.))

Can we use an automated response system to obtain the balance?

You should speak with an employee of the vendor to determine the minimum necessary to resolve the crisis and document whom you spoke with and the amount required. However, you can use e-mail or fax to verify the delinquent amount for voice-automated systems.

10a. Can we use on-line verification to obtain the balance?

The newer online response systems such as Florida Power & Light's ASSIST website provide adequate information as long as the final bill, minimum amount due, commitment amount and commitment confirmation are printed and included in the applicant's file. The EHEAP agency provides the written notification of approval or denial to the applicant.

11. Question #7b - page 2: (Is the name on the fuel bill that of a household member?)

What if the utility bill is in someone's name other than the applicant?

This is acceptable. The bill could be in the name of a family member and mailed to that individual's address. The bill must indicate the service address (household) and the elder applicant must live in the household and provide documentation of residency. Include an explanation in the space provided.

12. The utility company's bill does not give a cut-off date, but the bill indicates the power will be cut off 15 days from the due date.

In this instance, 15 days from the due date is the documented cut off date on the bill. For companies with utility bills which do not have clear shut-off dates, obtain their policy in writing for disconnecting customers so that it is clear the applicant is in a crisis situation. Place a copy of the documentation in the applicant's file (see #25a below).

13. Question #7e - page 2: (If over \$600, explain how excess cost will be met:)

The applicant owes over \$600; EHEAP can only pay \$600.

If amount due is over \$600, provide documentation indicating how excess cost will be met, i.e., the applicant, a church, or other community organization will pay. Prior to approval of the benefit, the agency must receive documentation from the applicant or the vendor that the amount in excess of \$600 has been paid. If the excess amount due cannot be met and the crisis resolved, then you must deny the application.

14. Question #8d – page 2: (Resolution of Energy Emergency - Written notification sent to applicant?)

How much time do we have to send the approval/denial notice?

Within 15 working days of receiving the application, furnish in writing to the applicant a Notice of Approval, which includes the type, the amount of assistance to be paid on his/her behalf, and the name of the energy vendor to be paid, or a Notice of Denial, which includes appeal information. The Notice of Approval/Denial must be on provider letterhead, indicate what EHEAP is furnishing, and be signed and dated. A copy of this notice is to be placed in the applicant's file.

15. Supervisor Signature - Does "prior to payment" refer to the EHEAP provider submitting the paperwork internally to process the payment or does it refer to an EHEAP worker telling an applicant that he/she is eligible and will receive the benefit?

The supervisor must review the application and documentation prior to payment. After the review, the supervisor will sign the application indicating payment can be made. The intent of the supervisory review is to avoid errors in eligibility determination, payment amounts, and the possibility of fraud.

16. Can we approve the application before a delinquent bill and/or income information is received?

No. Funds are not to be obligated until the application is completed and has been approved. Application approval includes receipt of income information and shut-off/delinquent notice.

17. Can the applicant be given additional time to submit missing information, such as income documentation?

Yes, but remember this is an emergency program. You should have specific policies in place to identify how much time you allow an applicant to submit additional information.

18. The 18/48 time frame for resolving the crisis would begin then upon receipt of the required information? Does this include paying the vendor?

When the applicant is not in a life-threatening situation, the EHEAP provider must take actions that will resolve an emergency within 48 hours of the date the application and all required documentation were presented in acceptable form to agency staff (Date Stamp Date) for a crisis benefit. When the applicant is in a life-threatening situation, the EHEAP provider must take actions that will resolve an emergency within 18 hours of the date the application and all required documentation were presented in acceptable form to agency staff (Date Stamp Date) for a crisis benefit. When you authorize payment to the utility company, you have prevented disconnect and "resolved" the crisis. "Payment" is not expected to be made within the 18/48 hours. "Resolution" of the crisis is made within 18/48 hours.

18a. This information is in the LIHEAP Manual. Why not reference it?

The 1998 LIHEAP Manual was removed as a reference beginning with the 2003 –2004 EHEAP contract year. Some of the language excerpted from it is pertinent, but much of it is not current. It should no longer be used as a reference. The current LIHEAP State

Plan and current EHEAP contract and Notices of Instruction should be used.

19. Can EHEAP funds be used to pay delinquent propane bills or is it limited to the purchase of propane?

When the need is for propane or fuel oil to be delivered to resolve the heating or cooling crisis, the applicant's statement of need on the EHEAP application is adequate. If delinquent propane bills prevent the new delivery of additional propane, then it is acceptable to pay the delinquent amount in order to have the tank refilled. This would be the same as if a utility bill was delinquent and the provider paid the delinquent amount in order to maintain service.

Contact the propane/fuel oil vendor and document in the applicant's file the person's name, title, date contact is made and the action to be taken on the applicant's behalf to resolve the crisis.

For propane or fuel oil, the provider will arrange for delivery and for the payment of the propane/fuel oil with the vendor. If the date an agency contacts the propane/fuel oil vendor and arranges for the delivery of propane/fuel oil within the 48 hours of the application date, that arrangement is sufficient to meet the 18/48 hour time requirement for resolving a crisis. Vendor agreements should address policies regarding payment versus delivery and state the delivery will occur within the 48 hours.

19b. The applicant brought in a propane/fuel oil bill for propane/fuel oil that has been delivered. The applicant needs to have the bill paid.

Payment cannot be made for propane/fuel oil that has already been delivered.

DATES:

20a. **Client Application Date** – The date the application is completed (whether by self or with assistance) and signed by the applicant. This date shall not be changed.

20b. **Date Stamp** – This is the date the application and all required documentation is presented in acceptable form to agency staff. An inked stamp must be used and shall not be changed. The 18 and 48 hours rule for crisis resolution begins when the application is date stamped.

20c. **Date of Resolution** – Date that a promise to pay was made to the utility vendor to resolve the energy emergency. This date is also used as the EHEAP Client Enrollment date in CIRTs. This date shall not be changed.

- The amount of time lapsed between the Date Stamp and the Date of Resolution shall determine whether or not the 18/48 hour rule has been met.
- Vendors must be paid within 30 days of the Date of Resolution.

20d. **Caseworker Signature Date** - This reflects the date the client's application was processed, eligibility was determined, and the date that the crisis was resolved, if the applicant was eligible for services. This date shall not be changed.

20e. **Supervisory Review Date** - The supervisor must review the application and documentation prior to payment. After the review, the supervisor will sign the application indicating payment can be made. The intent of the supervisory review is to avoid errors in

eligibility determination, payment amounts, and the possibility of fraud. This date shall not be changed.

20f. **Verification Dates** – This is the actual date the caseworker verified previous LIHEAP crisis benefits with the LIHEAP provider or the minimum amount necessary to resolve crisis with the utility company.

21. If an applicant does not have the required information or documentation at the time of application and is given additional time to submit the information, is the application date changed to the date all information is received?

Should the applicant not have all the required documents necessary to determine eligibility, the provider must have policies and procedures in place to allow the client additional time to present the required documentation. The provider should not accept the application until the client has gathered all the required documentation; therefore, the application would not be date stamped until the application and documentation meets program requirements.

Written notification to client of required documentation must be present in the file if the application has already been date stamped, but client does not have all the required documentation. The written notification will provide a deadline for return items to the agency. The actual date items were received will be recorded on the written notification, thus resetting the 18/48 hours clock rule.

ELIGIBILITY:

22. What are the eligibility criteria?

- **At least one individual residing in the home is age 60 and older.**
- **Household income is within guidelines noted on the application for the number of persons residing in the home.**
- **Applicant is a resident of the service area where applying.**
- **The applicant must have a verifiable home energy crisis, indicating a home energy emergency exists.**
- **The household has not already received a LIHEAP or EHEAP crisis benefit during the application season.**

23. What is a heating home energy emergency?

- **I have a past due or disconnect notice.**
- **I have less than 30 days of deliverable heating fuel on hand.**
- **I need to repair or replace home energy equipment.**
- **My power has been disconnected.**
- **I have no heating fuel.**
- **My home energy equipment is inoperable.**
- **I need deposit to turn on power.**

24. What is a cooling home energy emergency?

- **I have a past due or disconnect notice.**
- **I need to repair or replace home energy equipment.**
- **My power has been disconnected.**

- **My home energy equipment is inoperable.**
- **I need deposit to turn on power.**

25. How is a heating/cooling emergency verified?

- **Cut off, delinquent or past-due notice from the utility company, and**
- **Service provider staff person contacts the energy supplier and records the verification of the cut off date, or**
- **Service provider staff person accepts the applicant’s statement of need for heating or cooling supplies (blankets, portable heaters, wood, L.P. gas, fuel oil, kerosene, fan repairs).**

25a. Some of our utility companies do not provide shut-off dates on the utility bill. The utilities will be shut off after the due date. What should we do if this is their procedure?

Regulated companies are required to provide a written notice prior to any disruption in service. The Public Service Commission provides a listing of regulated utility companies:

<http://www.floridapsc.com/utilities/mcd/>

Click on “View” and the companies will be displayed at the following site:

<http://www.floridapsc.com/utilities/mcd/Display.aspx?numPerPage=50>

For non-regulated companies, obtain the policy regarding disruption of service and place this in the applicant’s file along with the utility bill that documents the applicant’s heating or cooling bill is delinquent or past due. Remember, EHEAP is a crisis program and the applicant must be in immediate danger of losing access to heating or cooling.

These procedures should also be incorporated into vendor agreements.

26. How is eligibility verified?

- **Applicant’s documentation of a person age 60 and residing in the household.**
- **Applicant’s documentation of household income.**
- **Applicant’s documentation of Florida residency.**

27. Who is ineligible?

- **Applicants who live in government subsidized housing projects where home heating and cooling are totally included in their rent and they have no obligation to pay any portion of the home heating and cooling costs.**
- **Resident of a group living facility or a home with residency cost at least partially paid through any foster care or residential programs administered by the state.**
- **Student living in a dormitory.**
- **An applicant with household income that exceeds the limits set by the Department.**

27a. Who is partially eligible?

- **Applicants who live in government subsidized housing projects that receive an energy subsidy during the period covered by the utility bill are only eligible for partial assistance. The energy subsidy must be subtracted from the allowable EHEAP benefit calculated for the household. The housing subsidy must have been paid directly to the client or directly to the utility vendor. This would be an actual cash benefit, not an offset of rent or utilities.**

EXAMPLE: If a client comes in with a bill that is three months delinquent and they receive \$50.00 a month subsidy via a check or paid directly to the utility vendor, then the subsidy to be deducted from the EHEAP benefit would be \$150.00 (\$50.00 a month x three months (delinquent bill time period)).

27b. What documentation is required for the energy subsidy?

The local Housing Authority can provide documentation of the total utility subsidy. Again, this amount must be subtracted from the allowable EHEAP benefit calculated for the household.

27c. I have received an application from a consumer and the account provides only a P.O. Box number. I called to obtain a physical address to cross-reference to the resident's address given on the application, but was told that there is none in the records, and they go by what is called a "pole location" for meter readings; a physical address is not required of the customer.

Normally, a physical address is required and must be verified. Document the "pole location" is in the county area if that is all the utility company can give you.

28. Who is the applicant?

The elder is the applicant. Someone can apply on the elder's behalf and sign the application, but the applicant will be the elder household member age 60 and older. They will still provide identification and proof of income for the elder household member.

28a. What if the applicant dies during the application process?

The applicant would not be eligible for assistance. However, if someone else in the household qualifies and is eligible, transfer the application to that person.

SNAP ASSISTANCE (FOOD STAMPS):

29. Does there need to be any sort of documentation in the file regarding SNAP Assistance (food stamps)?

Yes, there must be documentation in the file to reflect eligibility, and this must be documented on the application. For SNAP Assistance (food stamps), a current approval letter is required, not just a copy of the SNAP Assistance (food stamps) card. You can print verification of SNAP Assistance (food stamps) eligibility in ACCESS. It is acceptable to access Food Stamp eligibility information electronically and document it in the file only when the client cannot provide current hard copy information.

30. If written documentation is required and the applicant fails to bring in notice of decision, etc.,

do we deny the application and give notice of denial for failure to provide information and reschedule an appointment for another day?

If there is no documentation of SNAP Assistance (food stamps) eligibility, the application may be processed based upon income in the household, with proof of income submitted. Explain that one or the other is necessary. The application appointment may be rescheduled. If the applicant chooses to proceed without proof of SNAP Assistance (food stamps) eligibility or proof of income, the application would be denied. The household should have been eligible for SNAP Assistance (food stamps) within the last 12 months.

31. You said to go back a year for eligibility for SNAP Assistance (food stamps), etc. What about income verification, i.e., Social Security Administration (SSA) letter of income? How recent does income verification need to be?

Income verification should reflect the household's current economic status, or in the SSA case, the most recent letter from SSA.

32. What if the household is on SNAP Assistance (food stamps) or SSI but is over on income? (This may occur when there are several members in the household.)

The applicant is ineligible for EHEAP assistance. All applicants must be income eligible to receive program benefits.

33. When the basis of income eligibility is SNAP Assistance (food stamps), SSI or CSBG, what parts of application question #1, income on the front and questions #1, 2 and 3 on the back must be completed? Is it sufficient to enter the household annual income in the CIRTIS portion of the application and omit all other income references?

Automatic eligibility based on Snap Assistance (food stamps) or SSI no longer exists. Applicants must meet income current income eligibility guidelines. Therefore, the household's annualized gross income must be calculated to determine program eligibility and all household income must be entered into the Client Information and Registration Tracking System (CIRTIS).

INCOME CALCULATION:

34. Do we still take the applicant's last paycheck and multiply by 12?

Normally, you will compute income this way. The rule of thumb, when computing annual income, is to use whichever method will provide the most accurate representation of the applicant's current economic situation. You should have a written policy on how you calculate income, whether bi-weekly or monthly and implement it consistently.

34a. The applicant says he/she is paid in cash. What documentation is needed?

For an applicant who is claiming to only receive cash for employment, the provider should make every attempt to obtain income verification, such as statements from employer(s), income tax statements and/or W2 forms attesting to the applicant's income. When an applicant cannot produce income verification, the provider may waive verification and accept the applicant's income as written on the application and attested to on a self-declaration form. Documentation of the waiver and income attestation is

maintained in the applicant's file.

35. Do we need copies of paycheck stubs on all family members?

Yes, proof of income for all family members is required.

36. Do we calculate other family member income the same way?

Yes, the total income of all household members is used in calculating eligibility.

36a. Do we count the income of illegal aliens?

If there is a legal citizen in the household, then the household is eligible to be screened for EHEAP. Income is required for all household members. You do not count the ineligible aliens in the household size.

37. What if the other family members have only recently started working and have not worked all year or have worked in the past and are currently not working?

If the lack of prior work impacts the current economic situation, the actual annual household income could be used because it would capture the no-work period. For family members who are not currently working, remember to use whichever method will provide the most accurate representation of the applicant's current economic status when calculating annual income. In this case, the income of the person who is not currently working is "0."

38. Will we need to document the employer name on paycheck stub if it is not written on the stub?

The name of the employer and pay period should be on the pay stub or noted in the file.

39. If an applicant has a son/daughter or relative living in the household who has no income, do we simply have to mark "0" income in Section 1, page 1?

All information for each member of the household should be listed (Name, ID, Age, DOB, Relationship). Income would be listed as "0." A self-declaration form is completed by the applicant attesting to "0" income for the adult household member(s). The applicant should sign the self-declaration of income statement. If someone is applying on their behalf and the applicant cannot sign, the file needs to document why the applicant cannot sign. Then the person applying and signing the application can complete and the sign the self-declaration of income statement.

40. If an applicant has a caregiver, do we count the money the caregiver receives from the state as income?

If the caregiver lives in the household, the caregiver's income is counted unless it is a type of income which is specifically excluded. See the most recent LIHEAP Allowable Sources of Income chart provided through the Notice of Instruction process.

It is the provider's responsibility to maintain the most recent information provided by the Department through the Notice of Instruction process.

41. Do we look at assets when determining eligibility?

Assets are not required for determining EHEAP eligibility, and no longer requested on the Department's EHEAP application, nor required to be entered in CIRTS.

42. Do we need to have copies of Social Security cards for all family members in the file?

Yes, documentation of Social Security numbers is required for all household members and a copy of each must be maintained in the applicant's file. Proof of income is also required for all household members and must be placed in the applicant's file.

43. How do I know if the Medicare premium has been added?

The current Medicare premium is added in for SSA countable income. In many cases, the current SSA benefit letter will indicate if the Medicare premium is included. If it is not clear on the benefit letter, the provider should contact the Social Security Administration to verify whether or not the premium has been added.

43a. What do we do about Medicare Part D?

If Medicare Part D is taken out, then it must be added back in as it is to be used in calculating the income (the gross amount before any deductions, including taxes, Social Security, Medicare, etc.). This must be documented even if the income amount is under the annual income limit by household size. If it is not clear on the benefit letter, the provider should contact the Social Security Administration to verify whether or not the premium has been added. You should make every attempt to secure the original letter. If that is not possible, call the local SSA office, verify the income amount and document in the applicant's file the person's name, title and the date the information is provided.

43b. We accept self-declaration for "0" income, why can't we accept the applicant's word for this?

You cannot document "0" self-declaration income situations other than having the applicant sign a self-declaration form. The Medicare premium can be documented.

INCOME TYPE/OTHER INCOME/OTHER DOCUMENTATION:

44. Is net or gross income used for earned income?

Gross income, not net income, is used when income is earned. Enter this amount in #1, "Household Income Computation" earned income section of page 2 of the application.

45. Is SSA/SSI earned or non-earned income?

SSA/SSI is non-earned income and should be entered in #1, the "Household Income Computation," unearned income section of page 2 of the application.

46. How do we look at regular gifts in determining income eligibility?

The most recent LIHEAP Allowable Sources of Income chart provided through the Notice of Instruction process indicates "gifts" are unallowable.

However, "regular support from a family member or someone not living in the household

is allowable” (countable). “Regular gifts” must be reported in #1, page 2 of the EHEAP Application.

It is the provider’s responsibility to maintain the most recent information provided by the Department through the Notice of Instruction process.

47. Is interest on savings included in annual income determinations?

The most recent Allowable Sources of Income chart indicates interest is allowable (countable) income.

It is the provider’s responsibility to maintain the most recent information provided by the Department through the Notice of Instruction process.

48. Is income documentation required for someone only requesting a fan, heater or blanket?

The applicant must be income eligible for EHEAP assistance. Income documentation is required for all households applying for assistance with utility bills, fans, heaters, repairs, etc.

48a. What other documentation is required?

Documentation of payment to the vendor is required and must be placed in the applicant’s file. The applicant’s name and amount of benefit should be included. A check stub is acceptable if it identifies the vendor and matches the payment amount. If the utility bill is in someone else’s name, it is acceptable to write the applicant’s name on the documentation. The EHEAP application will document the person named on the utility account.

48b. Does a letter of approval or denial require a signature?

Yes, the letter should be on agency letterhead and should be signed by a supervisor. This reduces the possibility of fraud.

PRIORITIZATION/USE OF FUNDS:

49. May the provider make a decision that EHEAP funds will not be used by the agency for fans, blankets and/or the purchase of air conditioners in order to preserve funds?

No. Fans, blankets, etc, are allowable and if one or more of these items will resolve a crisis, they need to be allowed. If an air conditioner is purchased, the installation must be performed by someone licensed to do so and must meet the Underwriter Laboratory (UL) listings and local codes. You should also make sure the applicant will be able to afford to pay the utility bill using an air conditioner.

49a. May we purchase/repair an air conditioner for a renter?

Owners and renters must be treated equitably according to the current EHEAP Contract, Attachment I, Paragraph 2.1.3.2. If the applicant is in crisis without A/C, then it is acceptable. You should first have documentation of attempts to have the landlord purchase/repair the equipment. If this is not successful, have the landlord's permission

in writing to repair/install the equipment for the file. The equipment must be repaired/installed by someone licensed to do so and must meet the Underwriter Laboratory (UL) listings and local codes. You must also ensure the 18/48 hour time frame is met.

50. In order to manage resources, is it acceptable to restrict an applicant to receiving only one benefit during the contract year instead of two?

The current EHEAP Contract, Attachment I, Paragraph 2.1.4.8, states: "Developing adequate procedures to ensure EHEAP funds are appropriately budgeted and expended to permit payment of energy assistance benefits in both the heating and cooling seasons. Procedures should include referral to other community agencies when funds budgeted for a particular time period are exhausted and consumers are subsequently denied."

We do not advocate limiting funds to one benefit per year; however, the decision to do so would be made at the local level on an individual provider basis and must meet the current EHEAP contract requirements of Attachment I, Paragraph 2.1.3.13. "Based on local need for EHEAP services and other non-EHEAP energy assistance resources in their service area, the Contractor may limit crisis benefits to less than those stated. Policy changes concerning the number of crisis benefits available to consumers requires notification to current and potential consumers of the change."

51. Is it acceptable to develop a policy to prioritize daily in order to follow the guidelines?

As long as you are able to follow it consistently, you have the authority to set the policy. The current EHEAP contract, Paragraph 2.1.4.6 states: "Making payments on behalf of those consumers with the highest home energy needs and the lowest household income, which will be determined by taking into account both the energy burden and the unique situation of such households that result from having members of vulnerable population, including very young children, the disabled and frail older individuals."

51a. Requiring providers to make payments like that conflicts with the "first-come-first-serve" policy. What is the intent?

The intent is for you to develop a policy and prioritize "those consumers with the highest home energy needs and the lowest household income..." You should not utilize a "first-come-first-serve" policy or reference "first-come-first-serve" in any outreach material.

51b. Paragraph 2.1.4.4. of the current EHEAP Contract, Attachment I, requires "Having a written policy that encourages households to seek assistance prior to incurring non-energy penalties such as disconnect/reconnect fees, additional deposits, interest or late payments." How are we supposed to do this if we have to wait until we have a shut-off/delinquent notice? The applicant is already near the point of having to pay re-connection fees.

As a part of your outreach and education, you should encourage the use of LIHEAP Home Energy, encourage the applicant to contact you prior to disruption/disconnection of service, contact the energy vendor for an energy audit, or encourage other energy saving methods. Staff at the AAA should also request training from local energy providers and the information on energy saving methods can be passed along to clients.

51c. What about applicants that come in every six months for assistance?

See response to 51b.

51d. Can Outreach funds be utilized for promotional items?

Outreach funds can be used for brochures to promote the program, but not other promotional items.

52. Can we purchase items such as fans, heaters and blankets in advance so that we can distribute them when someone comes in and needs the item?

No. Items (fans, heaters and blankets, etc.) cannot be purchased in advance using EHEAP funds. Your vendor agreements with energy suppliers should address this. You can purchase these items with unrestricted funds and bill EHEAP at the time an application is approved.

53. Is there a limit to the number of fans, heaters or blankets that can be purchased for an applicant?

The applicant will state in #7, page 1 of the EHEAP application what the crisis is and what is needed to resolve it. If more than one item is needed for the household to resolve the heating or cooling crisis, then it is acceptable to purchase multiple items as long as the total of the purchase is within the limits set by the Department. All heaters must be electric or vented.

54. An applicant came in with a heating repair bill – the repair had already been completed. Can EHEAP pay the bill?

Any repairs to heating or cooling equipment that have already been completed at the time of the application cannot be reimbursed using EHEAP funds.

54a. A client has had a wire broken away from his/her home by a falling tree limb. The power company will not reconnect power until repairs have been completed, which they will not do. Can EHEAP pay for this type of repair?

The agency may pay for repair equipment or systems required to assure that heating or cooling is restored up to the crisis dollar limit. This could include repairing the line to the house, the weather-head, wiring, etc. In the case of propane, this would include repairs to the lines or tank. The agency needs to make sure that the damage is on the client's side of the line thus the client's responsibility, not that of the utility company. The agency must also obtain permission from the owner to make repairs, ensure repairs are performed by a licensed contractor and ensure repairs are performed in accordance with local codes.

54b Can we use donated items and can a volunteer make repairs?

All equipment installed must meet the Underwriter Laboratory (UL) listings and local codes. A licensed contractor must conduct all installation, repairs or replacement.

55. When an applicant comes in at the beginning of a season (April 15, for example, the cooling season) and the bill is for the previous season (the heating season), which season applies?

The application date determines which season applies. Even though the bill is from the heating season, the applicant, applying in the cooling season, still will have a shut-off or delinquent notice and have a “crisis” if the bill is not paid.

55a. Can we purchase a window a/c unit in the heating season?

This can be done on a case-by-case basis. Maintain documentation in the applicant's file the unit was medically necessary and that weather was warm when the unit was requested. All equipment installed must meet the Underwriter Laboratory (UL) listings and local codes. A licensed contractor must conduct all installation, repairs or replacement.

56. If an applicant already received a payment for the utility bill, can he/she receive a fan or a blanket later in the same season?

No. The applicant can only receive one heating or cooling benefit per season. The applicant’s need should be assessed at the time of the application. The benefit(s) necessary to resolve the crisis should be provided within the limits set by the Department.

57. When can EHEAP pay for gas and electricity? Can it pay when it is used for cooking?

EHEAP pays only for heating or cooling emergencies. If the gas is used only for cooking or hot water, then EHEAP cannot pay the bill. You may want to refer the applicant to the local CSBG office for possible assistance. If both gas and electricity are used to heat and/or cool a household, then obtain an explanation from the applicant as to why both gas and electricity are used before approving an application.

57a. We received a refund check from our local electric provider refunding part of a payment we made on behalf of an elderly consumer. We have never had this happen before and just wanted verification that these monies should be re-used within the EHEAP program to provide benefits to another consumer. The account had been closed and efforts to locate the consumer were unsuccessful.

This is correct. The funds should be re-used within the EHEAP program. Be sure and keep all documentation related to the events involving the refund.

57b. Can EHEAP pay for the water and sewage charges on a utility bill?

The current EHEAP contract, Attachment I, Paragraph 2.1.2.4, #7 states, “An understanding that only energy related elements of a utility bill are to be paid. No water and sewage charges may be paid except if required by the energy vendor to resolve the crisis and no other resources to pay that portion of the bill can be secured by the consumer or Contractor.”

The contractor should establish those procedures in vendor agreements.

58. Is LIHEAP part of CSBG funding?

LIHEAP and CSBG funds are received through two separate funding sources/grant awards from the U. S. Department of Health and Human Services (HHS).

59. How are CSBG, WAP, SSI and SNAP Assistance (food stamps) related to EHEAP

benefits?

Automatic eligibility based on CSBG, WAP, SSI and SNAP assistance (food stamps) no longer exists.

60. How does the program handle persons who are very low income, but have high energy costs, receiving the maximum payments?

The current EHEAP Contract, Attachment I, Paragraph 2.1.2.2 states “The contractor, in coordination with the local WAP agency, shall develop a system by which EHEAP applicants who have received more than three EHEAP and LIHEAP benefits in the last 18 months and who are homeowners are referred to a WAP provider. The contractor will maintain copies of all MOUs in each subcontractor’s contract file.”

“Develop a system” means to determine what works in your area. It does not necessarily mean every EHEAP applicant who meets these criteria must be referred to the WAP. The provider and the WAP should work together to determine who should be referred by both parties to the respective programs.

In addition, the provider should coordinate services with the Florida Department of Economic Opportunity’s LIHEAP recipients in the local service area to prevent the duplication of benefits to applicants and ensure LIHEAP benefits are fully utilized.

RECORDS:

The current EHEAP Contract, Attachment I, Paragraph 2.3.3 states:

The contractor will maintain a separate record for each EHEAP consumer that includes the following:

- (1) Application for Emergency Home Energy Assistance for the Elderly, DOEA Form 114, completed and signed by the contractor and the consumer. The application must also be signed by a supervisor prior to payment being made. The contractor is responsible for using the most recent application issued by the department through the Notice of Instruction process.**
- (2) Consumer’s name, address, sex, age;**
- (3) Names, ages and current identification documentation (no more than one year expired) of all household members;**
- (4) Social Security numbers and documentation of that number for all household members (some exceptions may apply and will be outlined by the Department);**
- (5) Signed notice regarding collection of social security number.**
- (6) Income amount and method of verification for all household members;**
- (7) Income documentation to support eligibility and is representative of the applicant’s current economic situation;**
- (8) Statement of self-declaration of income, if applicable;**

- (9) Signed Statement of how basic living expenses (i.e., food, shelter, and transportation) are being provided if the total household income is less than 50 percent of the current Federal Poverty Guidelines and no one in the household is receiving SNAP assistance;**
- (10) Documentation of consumer's obligation to pay an energy bill for the residence in which they live;**
- (11) Services provided, including copies of utility bills, copies of bills for fans, heaters, or blankets purchased and copies of repair bills;**
- (12) Copies of approval or denial letters provided to the applicant;**
- (13) If preference is given due to a disability, documentation of such, disability income or physician's statement;**
- (14) Documentation of referrals to LIHEAP and WAP;**
- (15) • Documentation of coordination with LIHEAP records for households with elderly members to avoid duplication of services;**
- (16) Proof of payment made to vendors;**
- (17) Documentation of calculation of benefits for consumers living in subsidized housing; and**
- (18) Completed EHEAP Client File Content Checklist DOEA Form 211.**