

STATE OF VERMONT  
AGENCY OF HUMAN SERVICES

**DCF**

**Department for Children and Families**

**BULLETIN NO.:** 16-28

**FROM:**   
Sean Brown, Deputy Commissioner  
Economic Services Division

**DATE:** 7/11/16

**SUBJECT:** Reach Up Services Procedures

**CHANGES ADOPTED EFFECTIVE** 7/1/16

**INSTRUCTIONS**

- Maintain Manual - See instructions below.**
- Proposed Regulation - Retain bulletin and attachments until you receive Manual Maintenance Bulletin: \_\_\_\_\_**
- Information or Instructions - Retain until \_\_\_\_\_**

**MANUAL REFERENCE(S):**

The sections P-2344A, 2344B and 2344C have been updated to emphasize modifications instead of full deferments when possible, as well as outline the new process for Medical Modification and Deferment from the Work Requirement.

P-2375B has been created to clarify the process for imposing sanctions on PEP households.

Also, tables of contents (TOC) for Reach Up Services Procedures have been updated.

**Manual Maintenance**

**Reach Up Services Procedures**

**Remove**

**Insert**

TOC P-2335	(B99-4)	Nothing	
TOC P-2340-2359 pgs. 1-2	(B99-11)	Nothing	
Nothing		TOC pgs. 1-2	(B16-28)
		P-2335 - P-2375	
P-2344A pgs. 1-6	(B12-14)	P-2344A pgs. 1-6	(B16-28)
P-2344B pgs. 1-5	(B14-12)	P-2344B pgs. 1-5	(B16-28)
Nothing		P-2344B pgs. 6-10	(B16-28)
P-2344C pgs. 1-4	(B14-12)	P-2344C pgs. 1-4	(B16-28)
Nothing		P-2375B pgs. 1-5	(B16-28)

P-2335 - P-2375      Reach Up Services Procedures

P-2335	ANFC/Reach Up Procedures for the ES
	A. Intake
	1. Explanation of Program
	2. Determination of Participant Status
	3. Good Cause Verification/Documentation
	4. ACCESS Coding on the MEMB Panel
	5. Medical Exemption Claimed
	B. Review
	1. Explanation of Program
	2. Evaluation of Participation Status
	C. Changes
	1. Sanctions
	2. Participation Status
	D. Income Needs Projection - DSW 300D
P-2340	Reserved for Introduction and Manual Maintenance Instructions
P-2342	Reserved for Target Population
P-2343	Reserved for Program Participation Requirements
P-2344	Modifications or Deferments
	A. Domestic Violence Modification or Deferment
	B. Medical Modification or Deferment of Work Requirement
	C. General Modification/Deferments Procedures
P-2345	Reserved for Case Management
P-2346	Reserved for Program Activities
P-2347	Support Services (Other Than Child Care and Transitional Child Care Assistance)
	A. Purpose
	B. How Reach Up Support Services Help Individuals Accept or Maintain Paid Employment; Or Learn About, Be Assessed for, or Participate in Reach Up
	C. What Are Program Activity and Support Service Items?
	• Program Activity Items
	1. Education/Training Fees
	2. Tuition
	3. Books

P-2335 - P-2375	<u>Reach Up Services Procedures</u> <ul style="list-style-type: none"><li>• Support Service Items<ol style="list-style-type: none"><li>1. Clothing and Personal Appearance</li><li>2. Relocation</li><li>3. Temporary Housing</li><li>4. Tools</li><li>5. Transportation<ol style="list-style-type: none"><li>a. Mileage</li><li>b. Vermont Public Transportation Association (VPTA) Transportation</li><li>c. Vehicle Repairs</li><li>d. Vehicle Insurance</li><li>e. Vehicle Registration/Title Fees</li><li>f. Driver's/Commercial Driver's License Fees</li></ol></li><li>6. Health Care</li></ol></li><li>D. Steps to Authorize and Pay for Support Services</li><li>E. Spending Limits and Support Services Matrix</li><li>F. One-time-only Employment-related Support Services</li><li>G. How to Issue Payments for Reach Up Support Services</li><li>H. How to Issue Incentive Allowances for Parenting Education and Volunteer Work</li></ul>
P-2348	Reserved for Child Care Assistance (See Also ANFC Procedures at P-2210)
P-2349	Case Management Procedures for Post-60-Month Cases
P-2350	18 and 36 Month Case Reviews
P-2351	Substance Abuse and Mental Health Screening
P-2352	Transitional Child Care Assistance (See Procedures at P-2210)
P-2353	Reserved for Grievance Process for Regular Employees Who Claim Displacement by Reach Up Participants Placed at Their Worksites
P-2375	Imposing Sanctions <ol style="list-style-type: none"><li>B. Primary Earner Parent Sanctions</li></ol>

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P-2344A

P-2344 Modifications or Deferments

A Domestic Violence Modification or Deferment

The following procedures have been updated removing the need for any verification beyond a participants written statement on a 310WA (see exceptions below in #8), the ability to use documentation obtained if a participant received a waiver from OCS in pursuing child support or was granted GA/EA due to Domestic Violence and the elimination of the need for a Notary Public to witness the participants statement.

1. Domestic Violence Notification

If a parent discloses that domestic violence has affected or is presently affecting his or her family, the case manager gives the parent the 201DV (Domestic Violence – You don't have to face it alone) and follows the script at P-2201 K, beginning at #6. P-2201 K provides general information about how to proceed when conversing about Domestic Violence as well.

2. Confidentiality

If the parent is accompanied by friends, relatives or companions do not initiate or persist in discussion about domestic violence unless the parent clearly begins and continues the discussion, since the companion may be the abuser or may report back to the abuser.

Inform the parent that any discussion of domestic violence may take place in a private space in the district office where the conversation cannot be overheard. If the parent wishes to continue in a private space, stop the discussion immediately and follow the district office procedures to move the interview to a private space.

3. Parent Discloses: Child Support Waiver

If a parent tells you about being a victim of domestic violence and wants a waiver from the requirement to cooperate in the pursuit of child support, ask them if they would like to fill out the 137W at this time (see P- 2260.B). Make sure that the 137 they handed in with their application has the waiver box checked, or they will need to complete a new 137 as well. Case Manager will email the District Management Team letting them know the status of the paperwork and asking that the code on the ABSP panel be updated. All waiver related paperwork will be kept in a separate classification file in the office (check with Regional Manager to determine where files are kept and how files are maintained).

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P-2344 Modifications or Deferments

A Domestic Violence Modification or Deferment (Continued)

4. Parent Discloses: Work Requirement Modification or Deferment

If the parent tells you he or she might have difficulty fulfilling the work requirement because of the effects of domestic violence (see policy for details), explain how the modification or deferment works.

5. Explanation of Modifications or Deferments

Explain that:

- the modification or deferment is from the work requirements only, not from Reach Up activities;
- the parent is not required to participate in job search or work while the deferment request is pending;
- the parent's Family Development Plan (FDP) must address the effects of domestic violence through Reach Up activities;
- the modification or deferment lasts for up to six months and may be extended for six-month intervals, with no limit on the number of extensions.

6. Parent Completes the Request for a Modification or Deferment

Give the parent the 310WA (Request for a Deferment from Work Requirements Because of the Effects of Domestic Violence) to complete. Ask the parent if he or she needs help in completing the form. If so, help the parent complete the form, but make sure the request is in the parent's own words.

Tell the parent if he or she wants the statement to include information that is already in other documentation, such as a police report, he or she may attach that documentation and refer to it instead of rewriting the same information in the statement.

7. Case Manager Reviews Parent's Statement

When the parent has completed his/her statement, read it over and see if it is complete and consistent with what else you may know about the family from your own experience with them. The object of your review is to help the parent make a clear, complete, and consistent request that can be used as the basis for a modification or deferment by the Reach Up Supervisor. Be tactful and helpful. Avoid creating the impression that you doubt his/her statement.

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A Domestic Violence Modification or Deferment (Continued)

Talk to the parent about anything you think might raise questions about the situation in the mind of the person who will review the request. If something in the statement seems inconsistent with something else in the statement or with something else you know, discuss it with the parent to see if there is something s/he could add to the statement to clear up the inconsistency or some documentation that might clear it up. If there seems to be something missing in the statement, discuss that with the parent, too, to see whether that can be resolved.

8. Case Manager determines what documentation is available if needed

Explain that supporting documentation is not necessary if the parent's statement on the 310WA is sufficiently detailed, consistent and credible. The decision to grant the modification or deferment would be based on the parent's written statement.

- a. In cases in which the abuser is the mother/father of the child, look in ACCESS while the parent is completing the 310WA to determine if a child support waiver had ever been requested. There may be supporting documentation or relevant information on the 137W regardless of the outcome of the waiver request. The 137W and supporting documentation would NOT be found in OnBase.

To find a child support waiver, look up the STAT/D/ABSP.xx in ACCESS for each noncustodial parent. The COOP field will have a code 2 (requested waiver, pending) or 3 (waiver granted) if there is a waiver. It will have a 5 (waiver denied, cooperating) or 6 (waiver denied, not cooperating) if the parent applied unsuccessfully for a waiver.

- b. Check with the Regional Manager of the district for documentation supporting the waiver request, or indications that such documentation was submitted and is on file at the office.
- c. Check CATN to see if participant was granted catastrophic GA/EA due to domestic violence. Reference will likely be made to a "Sister Agency". If participant was granted GA/EA due to domestic violence obtain documentation that was used to determine eligibility.
- d. Ask the parent what documentation there is to support this request. For examples of documentation, show the parent the acceptable items of documentation in policy (2363.1) or the lists on the 201WC (Authorization to Release Information – Waiver of Confidentiality).

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P-2344 Modifications or Deferments

A Domestic Violence Modification or Deferment (Continued)

- e. When you have determined there is documentation, ask if the parent is willing to submit it with the request. If the parent's unwillingness is because of something other than the safety of a family member, discuss it with the parent. Explore the possibility of the parent's obtaining other documentation, such as a statement from a staff worker he or she has been working with at a domestic violence program.

However, do not insist or pressure the parent in any way to include documentation if he or she is unwilling to, regardless of the reason.

If the parent wants to submit documentation, decide with the parent on a date by which he or she should get the documentation to you, so the request will not be pending indefinitely, and note the date in the case notes. If you do not have the documentation by the date, follow up with the parent to determine what is holding it up.

- f. Offer to help the parent to obtain the supporting documentation to be included with the request. If the parent wants help, provide it. Make sure that your helping will not jeopardize the family's safety. Use the 201WC for the parent's permission to waive confidentiality so you can obtain the documentation for the parent. Explain that this waiver allows the parent to waive confidentiality for a specific purpose, for a specific period of time, for a specific person or people, or a specific document, or in any other way the parent wishes to limit the waiver.

9. Case Manager processes request for modification or deferment

Complete the 310DV. Be sure to include:

- whether there has been a request for a child support waiver and, if so, what the status of the request is;
- whether you think there are any unresolved inconsistencies or missing elements in his/her statement and, if so, the gist and outcome of your discussion of them with the parent;
- whether you have direct personal knowledge of facts that would support the request or call it into question and, if so, what that knowledge is;
- whether there is existing documentation that has not been submitted with the request and, if so, the reasons for not submitting it;

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A Domestic Violence Modification or Deferment (Continued)

- whether, in the case an affidavit submitted without any documentation, you think it meets the requirements of policy as the basis for granting a deferment or modification without documentation.
- whether there is existing documentation that has not been submitted with the request and, if so, the reasons for not submitting it;

Fill out the top of the 620DV (Notice of Decision – Deferment or Modification from Work Requirements) with the name and social security number of both the head of household and the parent as well as your own name.

Discuss with the parent whether it would be safe to mail the 620DV to him or her if the modification or deferment is granted. If so, make a note in the file. Tell the parent that if the modification or deferment is denied, you will schedule an appointment for him or her to come in to discuss it, to see if there might be other ways to address the dilemma or revise the request so it would be granted.

Tell the parent the decision on the request for a modification or deferment will take about two weeks from the time you submit the completed 310WA. During that time the parent is not required to participate in job search or work but must participate in the Reach Up activities in the FDP.

Within two days, give the entire package to the Reach Up Supervisor. The package must include:

- the 310WA,
- any available documentation or reference to any documentation on file at state office (if it was determined to be needed),
- the 310DV, and
- the 620DV with the top portion completed.

Enter the appropriate participation code (01) on the WORK/SUM or STAT/MEMB panel in ACCESS to indicate that the parent is awaiting a deferment or modification decision.

10. Reach Up Supervisor Processes Deferment or Modification

Review the 310WA, the 620DV, and the case manager's comments on the 310DV. Be sure the case manager has addressed the relevant points listed in P-2344 (A)(9). Approve or deny the deferment request on the 310DV and return to the case manager.



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P-2344 Modifications or Deferments

A Domestic Violence Modification or Deferment (Continued)

11. Case Manager Informs Parent of Decision

When you receive the 620 DV, if the modification or deferment was denied, contact the parent and schedule a generic appointment for the parent to come in. Do not mention domestic violence in the appointment notice. If the modification or deferment was granted, either mail the parent the 620 DV, if the parent had consented to that earlier, or contact the parent and schedule an appointment to come in, if the parent did not want you to mail the 620 DV.

Do not mail the 620 DV to the parent unless the parent gave you specific instructions to do so. At the appointment, give the parent the 620 DV and discuss the decision. If the request was denied, explore possible revisions of the request or alternative ways of addressing the situation and explain the parent's appeal rights.

12. Case Manager and Parent Create or Revise FDP

If the modification or deferment is granted, revise the FDP with the parent if necessary, reflecting Reach Up activities that address the effects of domestic violence and help the parent to move towards self-sufficiency in other ways.

File the 620 DV in the parent's classification file. Change the participant's code to 54 in ACCESS and enter the review date. Remember the end date must always be at the end of the month.

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P-2344B

P-2344 Modifications or Deferments (continued)

B. Medical Modification or Deferment of Work Requirement

1. Active Reach Up participant

a. Participant requests a medical modification/deferment:

- i. Case Manager gives participant the Temporary Medical Deferment form (210TMD) to be completed by the participant's health care provider. Enter participation code "01" on WORK.
- ii. If the Case Manager is fairly certain the 210TMD will be returned indicating a modification or deferment of over 60 days, they can decide to give the Medical Records Request Form (660MRR) to a participant when the 210TMD is assigned as a task. Medical records are only necessary if the modification or deferment will be over 60 days and the Medical Review Team (MRT) will be consulted for a decision. A 660MRR will be needed for each provider that fills out a 210TMD indicating over 60 days.
- iii. Add "Return Completed 210TMD" as an activity on the participant's FDP with a deadline of 10 days. The next appointment should be scheduled for the due date of the 210TMD.
- iv. Only one 210TMD need be returned to start the modification/deferment process. However, if participants are looking for a modification/deferment over 60 days and have multiple providers they believe will support them, it is worth giving them multiple forms. The process can start to move forward once the first 210TMD is returned [see (B)(1)(d) or (e)]. Again, a 660MRR will be needed for each provider that fills out a 210TMD indicating over 60 days.

b. If 210 TMD is not returned, Case Manager determines good cause.

- i. If good cause exists, reassign return of completed 210TMD as an activity on FDP.
- ii. If the doctor refuses to fill out the 210TMD follow (B)(1)(c) similar to an incomplete form.
- iii. If good cause does not exist:
  - a. For participants with less than 58 months of assistance, the case moves to conciliation or sanction.
  - b. For participants who have received 58 months of assistance and are currently in their 59<sup>th</sup> month, send appointment letter to talk to participant about impending consequences for continued noncompliance (**do not conciliate or sanction**).

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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

- c. For participants who are in their 60<sup>th</sup> or more month, close the grant no earlier than the end of the participant's 60<sup>th</sup> month.
- c. If 210TMD is returned but is incomplete, Case Manager calls the participant's provider to gather the missing information. If the information cannot be gathered within 5 business days, take the following steps depending on how many countable months of assistance the participant has received:
  - i. For a participant who has less than 60 countable months of assistance, they will need to begin meeting their work requirement immediately; or
  - ii. For a participant who has at least 60 countable months of assistance, the case manager will contact the participant and give them the option of participating in a CSP or other countable work activities. If they don't comply, Case Manager fills out a Close/Break in Benefits Authorization (606CBA) and gives to Reach Up Supervisor who will enter code 83 initiating two-month break in benefits. Supervisor enters CATN and WARN.
- d. 210TMD indicates 60 day or less modification/deferment is needed
  - i. For two parent families if one parent is only able to work part time (less than 35 hours per week) or is unable to work at all, the second parent must take on the 30 hour per week work requirement. Case Manager codes the modified/deferred parent as a 33 regardless.
  - ii. For single parent households, if modified 10 hours or more, Case Manager enters a code of 55 in Work C. If modified less than 10 hours or completely deferred, Case Manager enters code 33 in WORK C.
  - iii. Enter a review date that matches the number of months on the 210TMD (remember that end dates must always be at the end of a month)—this would either be one or two months.

*Example: 210TMD returned on Thursday 4/21/16 states participant should be deferred for up to 30 days. Review date for deferment should be 5/31/16.*

- a. For a participant who has less than 60 countable months of assistance, if modified they will need to immediately begin meeting their suggested modified work requirement and then their full work requirement the day after the modification ends. If deferred they will need to begin meeting their full work requirement the day after the deferment ends.

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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

- b. For a participant who has 60 or more countable months of assistance, if modified they must immediately begin to participate in countable work activities to meet their suggested modified work requirement and then their full work requirement as soon as administratively possible. If deferred they will need to be meeting their full work requirement as soon as administratively possible. Noncompliance can result in closure of their grant.
- iv. Participants can request an extension of their modification/deferment by providing updated medical documentation in the month prior to their modification/deferment expiring. If this extension makes the modification/deferment more than 60 total days follow the procedure below [(B) (1) (e)].
- e. 210TMD indicates 60 days or more modification/deferment is needed and the Medical Records Request Form (660MRR) has not previously been given
  - i. For physical health issues, Case Manager gives participant the 660MRR to be completed by the participant's health care provider. This will indicate that the provider is agreeing to submit copies of the participant's medical records to the Reach Up MRT.
  - ii. For mental health and/or substance abuse issues, providers may prefer to complete the Summary of Diagnosis form, rather than provide records. In these cases give the participant the 660MRR, the Mental Health/Substance Abuse letter and the Summary of Diagnosis (210SUM) to be completed by the participant's health care provider.
  - iii. Add "Return Completed Medical Records Request and/or Summary of Diagnosis" as an activity on the participant's FDP with a deadline of 10 days. The next appointment should be scheduled for the due date of the 660MRR/210SUM.
  - iv. If 660MRR/210SUM is not returned, Case Manager determines good cause. See (B)(1)(b) above with the exception if the doctor refuses to fill out the 660MRR then case manager reaches out to provider. If the information cannot be gathered within 5 business days, move forward without the release and records. If only the 210SUM is returned, but not the 660MRR move forward without the release.
- f. 210TMD indicates 60 days or more modification/deferment is needed and the 660MRR is received.

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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

- i. Case manager completes the fillable MRT Consultation Form (600MRT). Attach the completed 600MRT, 210TMD with signed release, 660MRR and/or 210SUM, and any other pertinent documents (e.g., assessments that have been completed, other documentation that support the modification or deferment). Email the above to their Reach Up Supervisor. The Reach Up Supervisor will then send email to [AHS – DCFESDReachUpMRT@vermont.gov](mailto:AHS-DCFESDReachUpMRT@vermont.gov).
- ii. For two parent households the second parent must take on the 30 hour per week work requirement. Case Manager codes the modified/deferred parent as a 33 regardless.
- iii. For single parent households if modified 10 hours or more, Case Manger enters a code of 55 in Work C. If modified less than 10 hours or completely deferred, enter deferral code 33 in WORK C.
- iv. Enter a review date at least 60 days from the date the modification/deferment was requested (remember that end dates must always be at the end of a month).
- g. When the Reach Up MRT Team receives the documents
  - i. The Team reviews the 600MRT, the 210TMD, 660MRR and other pertinent documents to ensure all information and signatures are on the forms. The Team gathers all medical/treatment records received from providers.
  - ii. After 45 days the Team gives all case-related documents to the designated physician/health care provider for their decision, whether or not records have been received.
  - iii. The Team will return the physician/health care provider's decision to the Reach Up Supervisor as soon as possible.
  - iv. If the modification or deferment is granted, it will include activities that the participant must engage in to address the need for modification and deferment, and also an expiration of the modification or deferment. The Case Manager will notify the participant by mailing a 614DD which will include the decision as well as an appointment date and time to meet with the Case Manager and update the FDP.
  - v. If the modification or deferment is denied, the Case Manager must notify the participant in writing within 5 business days of the denial, outlining in the 614DD what the person must do to remain eligible for financial assistance if they have received over 60 months of assistance (see P-2349 (B) for time frames by which participant must be engaged in countable work activities).

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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

2. Reach Up applicant who has received 60 months of countable, cumulative assistance

- a. Applicant requests a medical modification/deferment:
  - i. During initial case management meeting, Case Manager gives applicant the 210TMD to be completed by the applicant's health care provider. Enter participation code "01" on WORK with a review date 10 days out.
  - ii. Add "Return Completed 210TMD" as an activity on the applicant's FDP with a deadline of 10 days. The next appointment should be scheduled for the due date of the 210TMD.
  - iii. For a two parent household the first parent will be assumed deferred and the second parent will be held to the 30-hour work week requirement until the 210TMD is returned and indicates a modification/deferment is necessary.
- b. If 210TMD is not returned:
  - i. Case Manager first checks OnBase for the forms.
  - ii. If the forms are not in OnBase, for a single parent household Case Manager sends an email to the District Management Team requesting that the application be denied. CATN. For a two parent household see (B)(2)(a)(iii).
  - iii. If participant states they cannot get a provider to fill out the form until they are scheduled an appointment, and the appointment is beyond the 10-day deadline and can be verified; the Case Manager meets with the participant at their next scheduled appointment and updates the FDP to include a new due date for the 210TMD. Case Manager sends an email to the District Management Team letting them know the participant has followed through with the requirements and requests that the application be approved.
  - iv. If the participant only tells us they could not schedule an appointment until after the application is denied, they must reapply and start the process over again.
- c. 210TMD is returned—indicates the applicant is not eligible for a modification/deferment:
  - i. For a single parent household Case Manager contacts the applicant informing them that they must participate in a CSP or employment (or other countable work activities, if necessary) for the remainder of their initial two-weeks in order to receive their benefits. If participant follows through send an email to the District Management Team requesting that the application be approved. CATN

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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

*Example: Participant applies, meets with a Case Manager and requests a deferment on Thursday 4/21/16. The initial two-week period is from Thursday 4/21 to Wednesday 5/4. 210TMD is due Friday 4/29/16 (within 10 days), but form is returned Monday 4/25/16 stating they are not eligible for a modified or deferred work requirement. Applicants work requirement is 20 hours.*

1. *If Case Manager can get applicant to come in earlier, this week would be prorated and applicant must meet a portion of their work requirement for that week (applicant returns on Tuesday and agrees to start CSP on Wednesday—prorate Wednesday/Thursday/Friday at 12 hours), as well as the partial next week that would end the two-week period (Monday/Tuesday/Wednesday at 12 hours) before being granted. Applicant can choose how to split these hours over the partial weeks—for example: 3 four hour days, 2 six hour days, etc. Verification is returned to Case Manager by end of day Wednesday 5/4/16. Case can be granted.*
2. *If Case Manager cannot get applicant to come in prior to their scheduled meeting on Friday 4/29/16, then applicant only has to meet the prorated work requirement for the partial next week that would end the two-week period (Monday/Tuesday/Wednesday at 12 hours) before being granted. Applicant can choose how to split these hours over the partial week—for example: 3 four hour days, 2 six hour days, etc.*
  - ii. For a two parent household see (B)(2)(a)(iii).
- d. 210TMD is returned but is incomplete:
  - i. Case Manager calls the applicant's provider to gather the missing information.
  - ii. If information cannot be gathered in 5 business days, Case Manager will contact applicant and give them the option of participating in a CSP. If they don't comply for the two-week period [see P-2349(A)(c)] send an email to the District Management Team requesting that the application be denied. CATN
- e. 210 TMD indicates 60 day or less modification/deferment is needed:
  - i. For two parent households the second parent may now be adjusted to have a 30 hour per week work requirement for the remainder of their initial two-week period and ongoing after approved. Case Manager codes the modified/deferred parent as a 33 regardless.



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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

- ii. For single parent households if modified 10 hours or more, Case Manger enters a code of 55 in Work C. If modified less than 10 hours or completely deferred, enter deferral code 33 in WORK C.
- iii. Enter a review date that matches the number of months on the 210TMD (remember that the end dates must always be at the end of a month)—this would either be one or two months

*Example: 210TMD returned on Thursday 4/21/16 states participant should be deferred for up to 30 days. Review date for deferment should be 5/31/16.*

- iv. For single parent households with a modification case manager contacts the applicant informing them that they must participate in a CSP or employment (or other countable work activities, if necessary) to meet their suggested modified work requirement for the remainder of their initial two weeks in order to receive their benefits. If participant follows through send an email to the District Management Team requesting that the application be approved. CATN

*Example: Participant applies, meets with a Case Manager and requests a deferment on Thursday 4/21/16. 210TMD is due Friday 4/29/16 (within 10 days), but form is returned Monday 4/25/16 stating they can participate in 10 hours per week of work activities. Case Manager gets participant to return to office on Tuesday 4/26/16. Participant must complete a portion of their work requirement for that week (6 hours of countable work activities by end of week) as well as for the partial next week which would end the two-week period (Mon, Tue, Wed—6 hours) before being granted. Applicant can choose how to split these hours over the partial weeks—for example: 3 two hour days, 2 five hour days, etc. Verification of hours is returned to Case Manager by Thursday 5/5/16. Case can be granted.*

*Example: Participant applies, meets with a Case Manager and requests a deferment on Thursday 4/21/16. 210TMD is due Friday 4/29/16 (within 10 days). Participant attends scheduled appointment with Case Manager and brings in form on the 29<sup>th</sup> stating they can participate in 10 hours per week of work activities. It is now too late to set up work activities for that week, but the partial next week which would end the two-week period (Mon, Tues, Wed—6 hours) can be set up. Case can be granted when verification of hours is received. Applicant can choose how to split these hours over the partial week—for example: 3 two hour days, 2 five hour days, etc. Verification of hours is returned to Case Manager by Thursday 5/5/16. Case can be granted.*

- v. For single parent households if deferred send an email to the District Management Team requesting that the application be approved. CATN



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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

vi. The next business day after the modification or deferment ends, the participant must engage in countable activities to meet their full work requirement or he/she will be terminated from the Reach Up program.

f. 210TMD indicates more than 60-day modification/deferment is needed:

i. For two parent households the second parent may now be adjusted to have a 30 hour per week work requirement for the remainder of their initial two-week period and ongoing after approved. Case Manager codes the modified/deferred parent as a 33 regardless.

ii. For single parent households if modified 10 hours or more, Case Manger enters a code of 55 in Work C. If modified less than 10 hours or completely deferred, enter deferral code 33 in WORK C.

iii. Enter a review date at least 60 days from the date the modification/deferment was requested (remember that end dates must always be at the end of a month).

vii. For single parent households with a modification see (B)(2)(e)(iv).

viii. For single parent households if deferred send an email to the District Management Team requesting that the application be approved. CATN

v. If the application is approved follow steps (B)(1)(e) for ongoing MRT process.

3. MRT has granted the modification or deferment

a. For two parent households the second parent must continue to meet the 30 hour per week work requirement. Case Manager codes the modified/deferred parent as a 34 regardless.

b. For single parent households if modified 10 hours or more, Case Manger enters a code of 55 in Work C. If modified less than 10 hours or completely deferred, enter deferral code 34 in WORK C.

c. Enter a review date for length of time suggested by MRT from the month of notification the modification/deferment decision was sent to the Case Manager (remember that end dates must always be at the end of a month).

*Example: A 3-month deferment decision is emailed on 05/16/16; the end date of the deferment should be 08/31/16.*

d. Code 34 should create a DISA panel in ACCESS. Indicate W for Reach Up disability.

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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

- e. Case Manager sends themselves a TODO one month before the modification/deferment is scheduled to end to remind them to check if the participant would like to continue to maintain their modification/deferment and if so give the participant a new 210TMD.
- f. Modified and deferred participants in two parent households and single parents deferred with less than 10 hours of a requirement can be encouraged to take part in work activities as described in the MRT decision, but cannot be required to participate in work activities. If they agree to participate they may take part in appropriate medical treatments or nonmedical FDP activities. Failure to follow through on suggested activities that may address the need for a deferment may impact the ability to obtain an extension of their modification or deferment when up for review and may result in pursuit of good cause, conciliation and or sanction, or in the case of individuals over 60 countable months, their grant may close for noncompliance.
- g. If new 210TMD is returned see section (B)(1)(e) again.

4. Retaining the Modification or Deferment

- a. The participant should be encouraged to participate in activities as outlined by the MRT in their FDP.

*Example: A deferment given based on a substance abuse problem would require participation in substance abuse counseling to remain in place.*

- b. Participants are asked to return the treatment logs from the providers bi-weekly to verify compliance with the treatment.
- c. If at any time a participant with less than 60 countable months of assistance does not comply with their FDP activities and does not have good cause, the case manager should proceed to conciliation or sanction.

**NOTE: For participants who are in their 59<sup>th</sup> month of assistance (SPEC C CLOCK shows 58 countable months), send appointment letter to talk to participant about impending consequences for continued noncompliance (do not conciliate or sanction) (see P- 2344 C(c)(2)).**

*Example 1: Deferred participant misses a counseling appointment because they just didn't want to go. They have no more available conciliations and have received 56 months of assistance. They may not be eligible for an extension of their deferment after this one ends.*

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P-2344 Modifications or Deferments

B. Medical Modification or Deferment of Work Requirement (Continued)

*Example 2: Same situation as above, but the participant is modified and mental health counseling is an agreed upon activity on their FDP. They can be sanctioned for not following through with their signed FDP.*

*Example 2: Participant misses a counseling appointment because their child was ill and had to go to the doctor. They retain their deferment.*

*Example 3: Participant misses a counseling appointment because they just didn't want to go. They have received 58 months of assistance. They would be sent an appointment letter to discuss impending consequences for continued noncompliance.*

- d. If at any time a non-deferred participant in their 60<sup>th</sup> or more countable months of assistance does not comply with their FDP activities and does not have good cause, the grant must be closed immediately for non-compliance, with a 2-month break in benefits.

*Example 1: Modified participant with 60 plus months misses a counseling appointment because they just didn't want to go. Attending counseling was an agreed upon activity on their signed FDP. Their case would close for non-compliance with a 2-month break in benefits.*

*Example 2: Modified participant with 60 plus months misses a counseling appointment because their child was ill and had to go to the doctor. Their case would remain open because they had good cause.*

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P-2344C

P-2344 Modifications or Deferments

C. General Modification/Deferments Procedures

1. Determining if a Modification/Deferment is Appropriate

a. Case Manager assesses participant's barriers to work. If those barriers are sufficient to limit work hours or prevent work, a modification or deferment may be granted.

b. Verify need for modification/modification:

i. Needed in the Home

(1) Consider this modification/deferment if participant has a seriously ill or incapacitated family member in the home, and cannot work because of caring for this individual

(2) Enter "Completing Needed in Home Paperwork" on FDP with a due date 10 days from when the request is made

(3) On the WORK panel, enter "01" for the participation code

(4) Have participant complete forms 210NH and 210CS

(5) Instruct the participant that a physician treating the ill or incapacitated family member must complete form 210NMR.

(6) When all forms are complete, case manager attaches the fillable MRT consultation form (600MRT), scans the other documents, and emails their Reach Up Supervisor. The Reach Up Supervisor then reviews the forms.

Reach Up Supervisor emails [AHS – DCF ESD Reach Up MRT@vermont.gov](mailto:AHS-DCFESDReachUpMRT@vermont.gov).

(7) Grant or deny: If modification or deferment is granted, set review to date recommended by MRT; if paperwork is not returned by due date on FDP, or if MRT is denied, the participant must meet the work requirement.

ii. Young Child Deferment

(1) Determine if the participant has a child under the age of 24 months. If not, the participant is not eligible for this deferment.

(2) If the participant has a child less than 24 months and requests a deferment, go to PERS D HIST, scroll down to WIN History.

(3) Count all months (including partial months) in codes 30, 31, 45, 46

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P-2344 Modifications or Deferments

C. General Modification/Deferments Procedures (Continued)

- Print pages from WIN history and note how many months have been used as of current date (Example: “*Mary has used 14 months as of 4/17/14*”)
- (4) If total of all months in any combination of above codes is at least 24 months, the participant is not eligible for a deferment
  - (5) If the total from (3) above is under 24 months, the participant is eligible for this deferment until whichever of the following two happens first:
    - The youngest child turns 24 months; or
    - The participant has reached the 24-month limit for this deferment
  - (6) Complete form 622 (Deferment Request Child Under Two) and have participant sign. Give copy to participant and keep original in case file.

**NOTE: Code 31 (13-week deferment) is available only if the 24-month limit for this deferment has been used, or rarely for a PEP household (see rule 2363 E before granting deferment with this code).**

iii. Medical Modification/Deferment (see P-2344 B)

iv. Childcare not Available

- (1) If participant states that no childcare is available to them and would like a deferment:
  - a) Participant must complete the “Childcare Questionnaire.”
  - b) Enter “Child Care Search” on FDP as an activity.
  - c) On the WORK panel, enter “01” for the participation code.
  - d) Participant must complete a childcare search and “Childcare Log” for one week, and return the log after the search.
  - e) Meet with participant again after the childcare search to discuss log.
  - f) Discuss results of log and “Childcare Questionnaire” with Reach Up Supervisor before granting deferment.
  - g) Reasons to defer: if the child care does not meet the criteria in rule 2373.3 for acceptable day care. Reasons not to defer: participant doesn’t like childcare available or wants to stay home with children
- (2) If decision to modify or defer the work requirement is made, set review date on WORK for the amount of time the participant feels he/she needs, but no longer than 60 days.

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P-2344 Modifications or Deferments

C. General Modification/Deferments Procedures (Continued)

v. Transportation Not Available

(1) If participant expresses that no transportation is available to them and would like a deferment:

- a) Participant must complete the “Transportation Survey.”
- b) Enter “Arranging Transportation” on FDP as an activity.
- c) On the WORK panel, enter “01” for the participation code.
- d) Participant must work on arranging transportation and keep track of tasks on the “Arranging Transportation Log” for one week, and return the log after the search.
- e) Meet with participant in one week to discuss log.
- f) Discuss results of log and “Transportation Survey” with Reach Up Supervisor before granting deferment.

(2) If decision to modify or defer the work requirement is made, set review date on WORK for the amount of time the participant feels he/she needs, but no longer than 60 days.

vi. No employment or work activity available

(1) Used in very rare circumstances:

- No CSP available for hours needed, or all sites in area are full; and
- No other countable activities are available at this time; and
- No job search/readiness opportunities available in area (for example, participant is not ready for job search and all employment specialist staff are out

(2) Discuss with Reach Up Supervisor before granting deferment.

(3) Review date should be no greater than 60 days from date of determination

vii. Other Supports Not Available

(1) Used in very rare circumstances, for example:

- Case management staff not available to meet need
- No ESL classes available for non-English speaker

(2) Discuss with Reach Up Supervisor before granting deferment.

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P-2344 Modifications or Deferments

C. General Modification/Deferments Procedures (Continued)

(3) Review date should be no greater than 60 days from date of determination

viii. Participant at least 20 years old participating in HS Education 25 hours/week

ix. Domestic Violence (See P-2344 A)

c. Choose either a modification or deferment

- i. Modify if the participant is able to complete 10 or more countable hours per week
- ii. Defer if the participant is not able to complete at least 10 countable hours (9 or less) per week

2. Review of Modification/Deferment

- a. At least three weeks before the review date for the modification or deferment, set up an appointment and send appointment letter to discuss next steps.
- b. Follow steps in section (1)(b) (“Verify need for modification/deferment”) to determine if modification or deferment should be continued, or if a deferment should be changed to a modification

3. Non-Compliance while work requirement is modified or deferred

- a. Determine good cause according to rule 2373
- b. If good cause does not exist:
  - d. For participants with less than 58 months of assistance, the case moves to conciliation or sanction.
  - e. For participants who have received 58 months of assistance and are currently in their 59<sup>th</sup> month, send appointment letter to talk to participant about impending consequences for continued noncompliance (**do not conciliate or sanction**).
  - f. For participants who are in their 60<sup>th</sup> or more month, close the grant no earlier than the end of the participant’s 60<sup>th</sup> month.

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P-2375B

P-2375 B Primary Earner Parent Sanctions

A. Primary Earner Parent (PEP) is sanctioned and cures their sanction within 30 days

a. Sanction is lifted and PEP continues to meet the family's work requirement.

Example: The PEP, Sam, becomes sanctioned for 5/1/16. If he cures his sanction before 5/31/16 Sam will remain the PEP and continue meeting the family's work requirement.

B. PEP is sanctioned and Caretaker Parent (CP) meets the family's full work requirement in unsubsidized employment for two weeks.

a. PEP's sanction is lifted and CP assumes the role as the PEP

Example: The PEP, Sam, is sanctioned. The CP, Pat, meets the family's full work requirement in unsubsidized employment for two weeks Sam's sanction will be lifted and Pat will assume the role as the PEP.

C. PEP is sanctioned and does not cure their sanction within 30 days

a. CP will assume the role as the PEP and will be responsible for the family's work requirement

i. The Case Manager will send an appointment letter to the CP explaining if the PEP does not cure their sanction within 30 days of their sanction beginning the CP will assume the role of the PEP. The Case Manager will send the letter to the CP within 5 days of the PEPs sanction beginning.

Example: The PEP, Sam, becomes sanctioned for 5/1/16. The case manager will send the CP, Pat, an appointment letter within 5 days of 5/1/16 explaining if Sam does not cure their sanction before 5/31/16 Pat will assume the role of the PEP and be responsible to meet the family's work requirement.

ii. The CP attends their scheduled meeting

1. The CP will assume the role of the PEP and will be responsible for the family's work requirement.

2. The original PEP will no longer have a work requirement, but will have Family Development Plan (FDP) requirements. (example: attending meetings) The case manager will create a new FDP with the original PEP to lift their sanction. (example: attend two meetings with their case manager within two weeks)



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P-2375 B Primary Earner Parent Sanctions (Continued)

3. When the Original PEP cures their sanction they cannot resume the role of the PEP. The CP (New PEP) is responsible for the family's work requirement unless the new PEP becomes sanctioned, there is a break in benefits, or the family demonstrates they can successfully share the work requirement. (The family can demonstrate successfully sharing the work requirement by the PEP continuing to meet the family's full work requirement while the CP volunteers to participate in Reach Up activities successfully for two weeks. The CP's FDP would clearly state they are volunteering to participate in more hours.)

Example: The PEP, Sam, is sanctioned and does not cure their sanction within 30 days. The CP, Pat, assumes the role as the PEP. The case manager will meet with both Sam and Pat. The case manager will create a new FDP for Sam with a new plan to lift their sanction (example: attend two meetings with their case manager within two weeks). The case manager will create a FDP for Pat with activities to meet the family's 40-hour work requirement.

- iii. If the CP does not attend their scheduled meeting the case manager will begin the conciliation/sanction process.
  1. If the PEP cures their sanction before the CP becomes sanctioned the case manager will stop the conciliation/sanction process for the CP. The original PEP will remain the PEP and continue to meet the family's work requirement.
  2. If the CP becomes sanctioned they will assume the role of the PEP at their sanction meeting and be responsible for the family's work requirement
  3. The original PEP will no longer have a work requirement, but will have FDP requirements. (example: attending meetings) The case manager will create a new FDP with the original PEP to lift their sanction. (example: attend two meetings with their case manager within two weeks)
  4. The CP (New PEP) will be responsible to cure their sanction and meet the family's work requirement.
  5. If the CP (New PEP) does not lift their sanction within 30 days repeat steps in section 3 (C) according to the parents' new roles.

P-2375B Primary Earner Parent Sanctions (Continued)

Example: The PEP, Sam, is sanctioned and does not cure their sanction within 30 days and the CP, Pat, does not attend their scheduled meeting with their case manager. The case manager will follow through with the conciliation/sanction process for Pat.

- i. The PEP, Sam, lifts their sanction before the CP, Pat, becomes sanctioned. The case manager will end the conciliation/sanction process for Pat and Sam will continue as the PEP.
- ii. The CP, Pat, becomes sanctioned; The case manager will meet with both Sam and Pat. Sam and Pat will switch roles. The original PEP, Sam, will now become the CP and the original CP, Pat, will now become the PEP. The case manager will create a new FDP for Sam with a new plan to lift their sanction (example: attend two meetings with their case manager within two weeks). The case manager will create a new FDP for Pat with activities to cure their sanction and meet the family's work requirement.
  1. Once Sam and Pat have both lifted their sanctions. Pat will remain the PEP and will be responsible for the family's full work requirement until there is a break in benefits, Pat becomes sanctioned for a second time, or the family demonstrates they can successfully share the work requirement. (The family can demonstrate successfully sharing the work requirement by Pat continuing to meet the family's full work requirement while Sam volunteers to participate in Reach Up activities successfully for two weeks (example: 20 hours at a CSP). Sam's FDP would clearly state they are volunteering to participate in more hours.)
  2. Pat does not lift their sanction within 30 days. The case manager will meet with both Pat and Sam. Pat and Sam will switch roles. The PEP, Pat, will now become the CP and the CP, Sam, will now become the PEP. The case manager will create a new FDP for Pat with a new plan to lift their sanction (example: attend two meetings with their case manager within two weeks). The case manager will create a new FDP for Sam with activities to cure their sanction (if they are still sanctioned) and meet the family's work requirement.
  3. If both Pat and Sam remain sanctioned for several months. The PEP will change every 30 days.

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P-2375B      Primary Earner Parent Sanctions (Continued)

D. Family is sharing the work requirement

- a. Each parent can be responsible to lift their own sanction.

Example: If Sam and Pat are sharing their work requirement.

- i. Sam becomes sanctioned for not attending the Community Service Placement (CSP) for 20 hours per week. Sam can cure the sanction by attending a CSP for 20 hours per week. Sam and the case manager can create a different plan than a CSP if appropriate, but they must comply with 20 hours to cure their sanction.
  - ii. If Sam and Pat both become sanctioned they can continue to share the work requirement. They will both have appropriate FDPs to lift their sanctions.
- b. The family can decide to no longer share the work requirement. The parent designated as the PEP must assume the full work-requirement. The case manager will meet with the family to develop new FDPs as the sanctioned parent(s) are still responsible to follow through with FDP requirements for two weeks to lift their sanction.

Example: If Sam, PEP, and Pat, CP, are sharing their work requirement.

- i. If Sam and Pat both become sanctioned they can decide to no longer share the work requirement. Sam is designated the PEP in ACCESS and would be responsible for the full work requirement. The case manager would develop an appropriate FDP with both Sam and Pat. Pat would be responsible for FDP requirements to cure their sanction. The case manager will create a new FDP for Pat with a new plan to lift their sanction (example: attend two meetings with their case manager within two weeks). The case manager will create a new FDP for Sam with a new plan to lift their sanction and meet the family's full work requirement.

P-2375 B Primary Earner Parent Sanctions (Continued)

