STATE OF VERMONT AGENCY OF HUMAN SERVICES

DCF

Department for Children and Families

BULLETINNO.: 23-08

DATE: 04/13/23

FROM: Miranda Gray, Deputy Commissioner Economic Services Division

SUBJECT: Reach Up Services Procedures

CHANGES ADOPTED EFFECTIVE 04/13/23

INSTRUCTIONS

 X
 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):

P-2200 P-2300

Reach Up Services Procedures P-2270, P-2320, P-2320A, P-2320B, P-2345, P-2346, P-2347, P-2347A, P-2347B, P-2355, P-2375A, updated.

The following procedures above (P-2345, P2346, P-2347, P-2347A, P-2347B) pertaining to Good cause, conciliation, sanction, Implementing Sanctions, and Sanction in Households with Two Parents have been updated to reflect program changes following the universal engagement model. Procedures P-2320, P-2320A, P-2320B pertain to Medical deferments and reflect changes with the end of the Medical Review Team process. Procedure P-2375A reflects the addition to a Case Note Template to Reach Up Services and lastly Procedures P-2355 and P-2270 clarify guidance on Temporary Absence and information needed in determination of this.

Manual Maintenance

Significant changes are indicated by highlighting text in gray.

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Reach Up Procedures

Remove		Insert	
P-2270	(22-06)	P-2270	(23-08)
P-2310B	(22-14)	Nothing	
P-2320	(21-02)	P-2320	(23-08)
P-2320A	(21-02)	P-2320A	(23-08)
P-2320B	(21-02)	P-2320B	(23-08)
Nothing		P-2347	(23-08)
P-2347A	(21-08)	P-2347A	(23-08)
P-2347B	(21-08)	P-2347B	(23-08)
P-2355	(21-02)	P-2355	(23-08)
P-2373	(17-12)	P-2345	(23-08)
P-2374	(17-12)	P-2346	(23-08)
P-2375A	(21-08)	P-2375A	(23-08)

P-2270 Temporary Absence (Reach Up rule 2230.3)(B23-08)

Reach Up benefits can continue for a household if temporary absence is granted by the department. The absence must be more than 30 days, but not expected to last more than 180 days. Reunification must be the goal.

Absence of Parent/Caretaker:

- inpatient or outpatient care from a hospital,
- substance abuse treatment facility,
- other medical treatment institution.

Absence of Child:

- custody of Family Services Division (FSD);
- receiving care from a hospital, substance abuse treatment facility, or other medical institution;
- child is incarcerated;
- voluntary agreement to place the child in someone else's care; or
- substantially similar circumstances

Example of a voluntary placement:

Mom has been experiencing an increase in mental health symptoms and is considering checking into Brattleboro Retreat for a period of time. Mom is supported by her mental health clinician and her primary care provider. Family Services is <u>not</u> involved. Provider(s) writes letter of support stating that it is in Mom and child's best interest, the child be separated from Mom and returned within 180 days. Child can stay temporarily with maternal grandmother, but Mom continues to need financial assistance so she can maintain her apartment. Case may be eligible for Temporary Absence.

Shared or Conditional Custody

Shared custody and Conditional Custody Orders (CCO) do not require Temporary Absence unless the child(ren) is out of the home more than 50% of the time.

Homelessness

Participants separated because of homelessness may be eligible for Temporary absence if the goal is to reunify within 180 days.

Reporting Temporary Absence

The participant is responsible for reporting all changes in their household, but if reported by Family Services Division (FSD), Economic Services <u>must</u> act on the information.

Family Services can either provide:

- form <u>FS 201 FC-M</u> indicating if household is receiving Reach Up
- an email to ESD stating that a child(ren) was removed and that the current case plan includes reunification

If the participant tells their case manager about the absence and it is not already reported, the case manager <u>must</u> let Eligibility know.

Assumption of continued benefits

It can be assumed that participants will want their Reach Up benefit continued. If participants decide they do not want Temporary Absence, voluntary withdrawal will be entered as soon as possible.

Temporary Absence not reported

If a temporary absence is not reported and Reach Up benefits have been ongoing, use the actual left date to determine how much of the 180 days remains.

Determining Eligibility

Reunification within 180 days <u>must</u> be the goal to be eligible for temporary absence.

A Waiver of Confidentiality (form <u>201WC</u>) is not necessary to approve the temporary absence but can be requested to help coordinate the case. If a case manager is assigned, the case manager can obtain a release after temporary absence is granted.

District Management Teams will decide who is responsible for determining temporary absence eligibility in their own office.

Benefits Programs Specialist (BPS) gives all information to their District Management Team designee to make the decision if the grant will remain open, needs to be closed, or should be approved or denied.

New Reach Up applicants

New Reach Up applicants, and current participants adding an absent child that is <u>not</u> already on the Reach Up grant, can also apply/add the child to grant requesting temporary absence eligibility. Look at the date of the first Reach Up benefit as the start of the 180-day period.

Multiple Temp Absences in same household

If a household has more than one child, and the children are removed from the household on different dates, it is possible to grant multiple temp absences for the same family. Determine the 180-day period per child.

FSD related cases

The most common Temporary Absence cases involve FSD custody. In these cases, unless clearly indicated on a received <u>FS 201 FC-M</u> contact should be made with the local FSD office to ensure that the current plan includes reunification. District offices may have different methods for making this contact and may include District Management, Eligibility or Case Management staff.

• If child is placed in out of state care but the plan is to reunify the child with their family in Vermont, the household may be eligible for temporary absence. This is true even if another state has custody of the child.

The FSD social worker assigned to the family, the parent/caretaker's Reach Up case manager, and Eligibility will work together to assist the family.

In cases of a child only Reach Up grant, case management will <u>not</u> be set up and communication will remain between FSD and the District Management Team. Request that FSD inform the management team if the court order goal no longer includes reunification. Management should reach out to FSD the month prior to the temporary absent ending to receive an update.

Non-FSD related case

Accept the participant's statement regarding their plan for reunifying. If it is questionable ask the participant to provide statements from others who are familiar with the families' circumstances.

Granting Temporary Absence

CATN all information in ACCESS. Enter a WARN and set up a future TODO that indicates when the maximum of 180 days will be reached.

The absent household member will remain active for Reach Up. The absent household member must be removed for 3SVT and Supplemental Fuel. The full Reach Up grant that the household is receiving must be counted for 3SVT and Supplemental Fuel.

If a case manager is assigned, inform them of the following:

- If the absence is expected to last more than 180 days.
- Any change to the parent/caretaker's plan for the child to return home at the end of the absence, or for the parent to return home.
- Indications or reports that it is no longer the parent/caretaker's intent to maintain a home or be responsible for the child during the absence.
- Changes in the parent/caretaker's living situation.
- Information regarding the child's incarceration, medical care, or DCF custody status, or the parent/caretaker's inpatient or outpatient care from a hospital, substance abuse treatment facility or other medical institution.
- Changes affecting the parent/caretaker's eligibility for Reach Up.
- Changes in the designated responsible adult (caretaker) and alternate payee if applicable.

Temporary Absence of Parent/Caretaker

If the parent/caretaker is the one that is absent from the home, they must assign a protective payee and complete a Protective Payment Agreement (form 207) otherwise, the benefit will close. The parent who is temporarily absent should <u>not</u> retain access to benefits.

If housing costs are included in the Reach Up budget, vendor payments will be set up. Housing includes rent, mortgage, property taxes, insurance, allowable maintenance and repair.

A protective payee may apply for 3SVT and Supplemental Fuel for themselves and the child(ren) if income eligible. They should <u>not</u> gain access to the temporarily absent parent/caretaker's 3SVT or Supplemental Fuel benefit. If the protective payee is also caring for the child(ren) outside of the child(ren)'s typical house they may also be eligible for a caretaker benefit.

Caretaker Grant for Child(ren) (if applicable)

A caretaker may receive a child only Reach Up benefit at the same time that a parent is receiving a temporary absence benefit.

Extending Temporary Absence

Temporary Absence extensions are determined on an individual basis. Not all cases will need to request an extension. An extension should only be requested

if the participant or case manager/service provider feels additional time will help the family to be reunited and reunification is anticipated to occur in the next several months. The request for the extension should be requested the month prior to the 180th day.

If there is a Reach Up case manager working with the family, they will be working with FSD and will be responsible for requesting the extension. See Reach Services procedures <u>Temporary Absence P2355.docx</u>

To request an extension, for a household that doesn't have a Reach Up case manager assigned the below questions need to be completed by the FSD worker and the eligibility worker. Responses need to be emailed to RUFA AOPS. <u>AHS.DCFESDCOReachUp@vermont.gov</u>

Questions for eligibility to complete.

- 1. What is the original expiration date of the 180-day temporary absence?
- 2. Has AOPS already granted an extension?
- 3. Is there any information related to the family's housing that should be noted (are they in a GA hotel, waiting for a voucher, etc.)?

Question for Family Service Worker to complete:

- 1. Is the case plan goal still reunification? If yes, when is FSD recommending the child(ren) return home 50% of the time or full time?
- 2. Has reunification been delayed due to a circumstance beyond the parent(s) control or a catastrophic event? (Please be as specific as possible)
- 3. Has the parent(s) been consistently engaged with FSD and making progress on case plan goals?
- 4. Are unsupervised visits occurring? If so, where, and how often? If not, is there a plan for this to happen in the next 30 days?
- 5. Are unsupervised overnights occurring? If so, what is the plan? If not, is there a plan for this to happen in the next 30 days?

Ending Temporary Absence

If an FSD custody case and FSD reports to Economic Services at any point that the court approved plan for the family no longer includes reunification as a goal prior to the 180th day, the BPS reports this to the District Management Team designee who will send an email to RUFA AOPS AHS.SCFESDOReachUp@vermont.gov change for review of the household.

Cases that are closing prior to the 180th day for other eligibility related reasons should be treated as any ongoing Reach Up household.

Cases which are <u>not</u> reunited within 180s days should be closed as soon as possible after the 180th day.

Continuation or Reopening Under Temporary Absence

Case closes for Eligibility related reasons (non-coop, over income, etc.)

If verification or new information comes in before the closure date, the household would be reopened with no changes to the temporary absence eligibility.

If verification or new information comes in after the closure date, the participant <u>must</u> reapply. Use the date of the first Reach Up benefit as a starting point for the remaining time period:

- If the child(ren) will return to the household within 30 days case can be approved.
- If the child(ren) will <u>not</u> return to the household within 30 days, BPS or Case Manager should determine if the goal is still reunification. Consider how much of the 180 temporary absence period the household has already utilized.

<u>Example</u>: A household was approved and had been on Reach Up for 120 days under temporary absence eligibility before closing for not returning an Interim Report. If they reapply the next month, subtract 120 from 180 days to determine the time frame for when the child <u>must</u> return to the home (180 – 120 = 60 days remaining of temporary absence eligibility).

Case Closed in Error

If we close a temporary absence case in error offer the household an underpayment for the months, they were closed in error or extend the 180 days.

<u>Example</u>: A household was closed for not returning the non-mandatory 201WC form. Contact the household to see if they would like to have an underpayment issued or have their case reopened and 180-day time frame extended.

Sanctioned cases

If reopened case is about to be sanctioned—make sure to allow 10 days for household to receive notice of reduced sanction amount (sanction may need to be put in place for following month depending when case is reopened).

BPS Support

The 180 Day Temporary Absence Calculator can be found on the RUFA tab of the <u>ESD Calculator</u>.

District Temporary Absence spreadsheets are located on the Share Drive at the following location: Y:\AHS ALL SHARE\ESD\Temp Absence. District Management Teams will determine who is responsible for entering information into the spreadsheet on a regular basis. RUCO periodically compiles the information for data collection purposes.

Temporary Absence of Child(ren)

Enter left date on the child(ren)'s MEMB panel in ACCESS with code 6 "allowable for RU." Left date will be the first day that the child is consecutively absent, or the first day that the child is consecutively <u>not</u> in the household 50% of the time or more.

Entering code 6 on the MEMB panel will remove child(ren) from the 3SVT and SF budgets Approve the changes in 3SVT and SF ELIG.

Enter a UNEA panel countable for 3SVT and SF just for the portion of the Reach Up grant that isn't being counted and write "RU Temp Absence" in the description field.

<u>Example:</u> Reach Up benefit is \$640. The 3SVT and SF budget is only counting \$426.70 (because of the person being removed for RUFA). A UNEA panel needs to be created for \$213.30 (\$640-426.70).

Temporary Absence of Parent/Caretaker

In two parent households, enter a left date on the parent's MEMB panel in ACCESS with code 6 "allowable for RU". Left date will be the first day that the parent is consecutively absent. Follow instructions above to count full RUFA grant amount in 3SVT and SF budgets.

For single parent households, enter a left date on the parent's MEMB panel in ACCESS with a code 6 "allowable for RU" and approve closure of 3SVT and SF benefits, unless parent is maintaining eligibility on their own. If parent is remaining active on 3SVT or SF, a left date on the child(ren)'s MEMB panel with a code 6.

Setting up Protective Payee

See <u>SOP 2104 Entering an Alternate Payee in ACCESS/Processing a 139AP form</u> and follow directions with information from form <u>207 Protective Payment</u> <u>Agreement</u>.

When selecting EBT Alternate Payee Status select 1C "Cash Only First Alternate"

Setting up Child Only Caretaker Grant

Use the caretaker's real SSN if they are not already or have never received Reach Up for themselves, and they do not have their own children in the household. Otherwise follow District process to obtain a temporary SSN for the caretaker.

Follow District process to obtain a temporary SSN for the child(ren). Keep all other information the same. Indicate "no" when ACCESS asks if this child(ren) is really the other child(ren) in temporary absence household. Do not merge SSNs.

Create WARN and enter CATN that this child(ren) is also open in temporary absence household.

When closing child only caretaker benefit, **contact COPS** if a temporary SSN was used so COPS can merge the cases.

Ending Temporary Absence

If household is reunified within 180 days:

- Remove the left date and code 6 on the MEMB panel
- Remove the UNEA panel for "RU Temp Absence"
- Add the child(ren) back to 3SVT/SF household effective the date of return (if applicable)
- Remove the temporary absence WARN
- Enter CATN indicating child(ren)'s name and date of return
- Contact COPS if a temporary SSN was used in a Child Only Caretaker benefit and COPS will merge the SSNs as needed
- If a protective payee was assigned follow the directions for "Removing or Making Changes to an Existing Alternate Payee" in the <u>SOP 2104.</u>

Transferring a temporary absence case to a different district

When a household that is currently granted temporary absence moves to a different district:

- Make sure the WARN clearly states when the temporary absence started and when it will expire, as well as if any extensions have been granted.
- V off the future TODO for the current district and create a future TODO for the new district.
- Update the current district Temporary Absence spreadsheet indicating the household moved to which specific district.
- Send an email to the new district's management team so they can the household to their Temporary Absence Spreadsheet.

P-2320 DEFERMENTS (Reach Up Services rule 2363)(B23-08)

Determining if a deferment is appropriate

Participants may qualify for a deferment if they are facing obstacles to meeting their goals. Obstacles may be openly identified by the participant or may become apparent as the participant identifies a goal(s) and attempts to work towards the goal(s).

Use open ended questions to help the participant express how they view the obstacle and explore what activities they feel they can take part in. See the following procedures (P-2320A, B, C, D and E) for further information about specific types of deferments.

Deferment codes in ACCESS help collect information about what the most common obstacles Reach Up households are facing. Going forward, only deferment codes that stop the clock on a participant's countable months will be used. Other procedures will be updated over time to support this. See below for more information about "stopping the clock."

Review Dates

Deferment codes will require a review date to be entered. This date indicates when the deferment needs to be reviewed and potentially updated or ended.

Review dates should end on the last day of the calendar month whenever possible. See section specific to review dates and codes related to young child deferments in procedure 2320C.

If a deferment review date passes and is not updated, the code will revert back to the able to work "02'' code.

Reviewing the need for a deferment

At least three weeks before the review date for the deferment, set up an appointment and send appointment letter to discuss next steps.

Discuss with the participant if the deferment should be continued or if the participant is no longer interested in pursuing a deferment.

See the following procedures (P-2320A, B, C, D, and E) for what additional information (updated forms, etc.) is needed if the deferment is to continue.

Deferments and Time Limits

The purpose of offering deferments is to prevent the month from counting against the participant's time limit. Certain deferments "stop the clock" when counting the number of countable months of Reach Up the participant has received.

Deferment codes that "stop the clock":

- Code 11 Needed in the Home
- Code 33 Unable to work-medical
- Code 34 Unable to work--medical
- Code 35 Unable to work and applying for disability
- (Code 38 Accepted for VR Services—typically no longer used)
- Code 54 Unable to work due to domestic violence
- Codes 30, 45 and 46—young child deferment—ONLY the first 12 months of deferment

The code showing at the end of the month determines if a month counts or not towards the participant's time limit. See procedure 2320C about young child deferment review dates.

If the review date is not updated and the code reverts back to an able to work "02" code, the month will be countable towards the participant's time limit.

P-2320A DEFERMENTS (con't)

P-2320A Medical (B23-08)

Participants who feel they cannot take part in activities related to their goals based on medical reasons, may qualify for a deferment that stops the clock on the participant's time limit on countable months. Documentation from the participant's medical provider(s) is required to help determine if the deferment is needed.

Active Reach Up participant requests a medical deferment

Give participant the following form to be completed by the participant's medical provider(s) and explain what the form is used for:

- The Temporary Medical Deferment form (<u>210TMD</u>) is completed by the participant's provider and includes information about the participant's medical condition(s) and how the condition(s) impacts the participant's ability to take part in activities. The form also indicates how long the health condition(s) will last.
- Equivalent documentation is acceptable in lieu of the Temporary Medical Deferment form (<u>210TMD</u>). Equivalent documentation includes obtaining a letter from the participant's provider with information about the participant's medical condition(s) and how the condition(s) impacts the participant's ability to take part in activities. Verbal confirmation of this information can be accepted and documented in the participant's case note.
- Enter deferment code 34 with a review date 6 months out using the last day of the month as the deferment ending date. At the 6-month review date obtain a new Temporary Medical Deferment form or Equivalent documentation if the participant requests additional time.

Gathering the medical information

Create a plan with the participant to provide the medical form(s). If it is helpful to the participant, fax or email paperwork to their provider. Include this plan on the participant's FDP.

Provide the participant with a pending temporary medical deferment (code 01) in ACCESS while waiting for the paperwork to be returned. Set the review date for when the medical forms are due.

High risk pregnancy

High risk pregnancy does need to be verified. Verification can be completed through a collateral call to the medical provider. The medical provider can also provide verification in a written statement, or by using form(<u>210TMD</u>) or by using the specific high risk pregnancy medical report form (<u>210HRP</u>).

Enter the appropriate participation code in ACCESS through the end of the anticipated month of delivery. If the participant continues to need a medical deferment after the birth, obtain new paperwork and follow the medical deferment procedure as you would for other medical reasons.

LUND participants

Reach Up participants living at LUND can be deferred based on their residency status and the services LUND provides. Reach Up participants living at Lund can be placed in a medical deferment code 34 for 6 months using the last day of the month as deferment ending day. If the participant discharges from Lund before 6 months this will need to be re-evaluated at discharge and a new Temporary Medical Deferment or Equivalent documentation obtained as appropriate. If participant stays at Lund longer then 6 months, then this review date can be extended.

Participant goals during deferment request

Use Stepping Stones and the goal achievement model to see what goal(s) the participant would like to focus on while the deferment request is being determined, and if it is approved. Create a plan with the participant to achieve their goal(s). It may be a very short time between when it is decided to pursue the deferment, and when a decision can be made.

For some participants, their goals will focus on the medical reasons they are requesting the deferment. For other participants, different goals may be discovered through motivational interviewing techniques. Encourage participants to engage in whatever activities they are motivated to take part in.

Medical deferment paperwork is not returned

Meet with the participant to find out if they would like to change their plan, or if there is a good cause reason why they did not return the paperwork.

Update the FDP or the goal sheet with the new plan or a new deadline for returning the paperwork. Reach out to the provider to assist the participant with the process of obtaining the paperwork. Update the review date for when the paperwork is due.

Medical deferment paperwork is returned incomplete

Contact the participant's provider to gather the missing information.

Some providers also require their own releases be completed instead of or in addition to the ESD release.

Medical deferment paperwork is returned

Reach Up Case Managers can determine the length of the deferment needed based on the medical recommendations of the participant's provider and the participant's input. The review date can be entered in ACCESS for a maximum of 6 months but can then be extended if it is determined to still be needed.

Reach Up Case Managers should continue to work with families on identifying their short- and long-term goals and use the Goal, Plan, Do, Review and Revise (GPDR/R) process to support participants in breaking these goals into manageable steps.

Sending deferment decision

Try to review the medical documentation with the participant and discuss the decision. If the participant is not available to meet, send the participant a Deferment Decision form (614DD) with basic information about the decision including dates of when the deferment starts, changes or ends. The form should include an appointment date and time to discuss the decision with the participant.

Participant disagrees with the medical decision

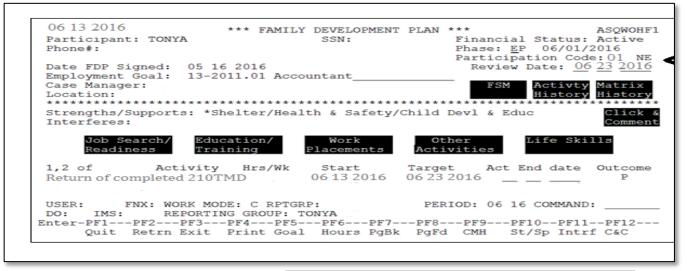
Consider a redetermination of the medical decision by reviewing current documentation and collecting any additional documentation from the participant's medical provider. If the redetermined decision is still not agreed with, a Fair Hearing can be requested by the participant.

Case Manager Support

Reach Up Participation Codes related to medical deferments

- 01 Pending decision for deferment
- 33 Medically exempt for 1 to 3 months
- 34 Medically deferred >3 months
- 35 Medically deferred > 3 months and applying for SSI/SSDI





Enter code "01" on WORK/C Panel. Enter a review date that matches when the medical forms are expected to be returned.

Medical deferments and DISA panels

Codes 33, 34, 35, and 38 (usually not used) cause a DISA pop up box to appear. This will create a DISA panel in the STAT screens.

Name of Disabled Person Katie Beckett Date Mo Year -	Disability Medical Factor Decision W E	Review Date Mo Da Year 04 30 2021
Disability Factor: D - Disability W - RU & FS Temporary Deferment B - Blind X - Not relevant to any factor	Medical Decision: E - Medically Eligible I - Medically Ineligible P - Provisionally Eligible	

Enter Disability Factor of "W" RU & FS Temporary Deferment.

"D" is only used if the person is determined disabled by the Social Security Administration and should not be used for entering a Reach Up deferment code.

Enter Medical Decision as "E" Medically Eligible.

The review date that is entered on the WORK screen should auto-populate.

P-2320 DEFERMENTS (con't)

P-2320B Needed in the Home (B23-08)

Participants who feel they cannot take part in activities related to their goals based on caring for a seriously ill or incapacitated family member in the home, may request a needed in the home deferment. Needed in the home deferments can stop the clock on a participant's time limit on countable months. Participants will continue to meet with Reach Up Case Manager while in a needed in the home deferment to explore future goals and access supports.

The family member must be a parent, spouse, civil union partner or child of the participant requesting the deferment. Documentation from the family member's medical provider(s) and/or school is required to help determine if the deferment is needed.

Needed in the Home documentation

The Medical Report, Needed in Home form (210NMR) must be signed by the family member (or their authorized rep or parent) needing the care. Their medical provider then completes the rest of the form providing information about the family member's medical condition and their need for care.

Equivalent documentation is acceptable in lieu of the The Medical Report, Needed in Home(210NMR). Equivalent documentation includes obtaining a letter from the family members provider with information about the family members medical condition(s) and how the condition(s) impacts the family member. Verbal confirmation of this information can be accepted and documented in the participant's case note.

The ESD Authorization to Release Information form (<u>201WC</u>) only needs to be completed if the family member is a child and the child is connected with an educational program that would not be included on the 210NMR This will allow contact to be made with the educational program to help determine if the participant is needed in the home due to educational needs as well.

Active Reach Up participant requests a needed in the home deferment

Give participant the following form(s) to be completed:

- The Medical Report, Needed in Home(<u>210NMR</u>)
- ESD Authorization to Release Information (<u>201WC</u>) (if appropriate, see explanation of form above)

Gathering the medical information

Create a plan with the participant to provide the medical form(s). If it is helpful to the participant, fax or email paperwork to their provider. Include this plan on the participant's FDP or on their goal sheet.

Provide the participant with a pending temporary medical deferment (code 01) in ACCESS while waiting for the paperwork to be returned. Set the review date for when the medical forms are due.

Participant goals during deferment request

Use Stepping Stones and the goal achievement model to see what goal(s) the participant would like to focus on while the deferment request is being determined, and if it is approved. Create a plan with the participant to achieve their goal(s).

For some participants, their goals will focus on the family member for whom they are caring. For other participants, different goals may be discovered through motivational interviewing techniques. Encourage participants to engage in whatever activities they are motivated to take part in.

Medical deferment paperwork is not returned

Meet with the participant to find out if they would like to change their plan, or if there is a good cause reason why they did not return the paperwork. Update the FDP with the new plan or a new deadline for returning the paperwork. Reach out to the provider to assist the participant with the process of obtaining the paperwork. Update the review date for when the paperwork is due.

The Medical Report/Needed in Home paperwork is completed and returned

Update the participation code in ACCESS with the correct review date. The deferment should be based on the providers recommendation and participant's input. The deferment should always be the last day of the month, never mid month. The review date can be entered in ACCESS for a maximum of 6 months but can then be extended if it is determined to still be needed.

Sending deferment decision

Try to review the medical documentation with the participant and discuss the decision. If the participant is not available to meet, send the participant a Deferment Decision form (614DD) with basic information about the decision including dates of when the deferment starts, changes or ends. The form should

include an appointment date and time to discuss the decision with the participant.

Participant disagrees with the medical decision

Consider a redetermination of the medical decision by reviewing current documentation and collecting any additional documentation from the participant's medical provider. If the redetermined decision is still not agreed with, a Fair Hearing can be requested by the participant.

P-2345 Good Cause (B23-08)

General Procedures

If a participant is not engaging or continues to not follow through on a plan they have come up with, utilize <u>appreciative questions</u> and <u>powerful questions</u> to explore what is going on. Express your belief that they are the expert in their life, and that Reach Up is here to support them in identifying their goals and achieving them.

Examples of appreciative and powerful questions: Can you think of things you have done that helped things to go well? What achievements have you made? How did you make them happen? What are three things that have helped you overcome obstacles?

Before even considering if a good cause reason is needed, reach out to the participant by all known methods of communication, including phone, text, email and mail. Offer to meet in person, over the phone and virtually.

Good cause should only be pursued as a last resort when a participant has consistently not made contact, not been engaged, and a pattern of non-engagement has been demonstrated.

If after attempts to both form a relationship and obtain buy in from the family on their goal and plan, the participant has still not engaged or is not following through on their plan make a good faith effort to establish good cause. Enter into the good cause determination process with the assumption that the participant has good cause.

<u>Rule 2373</u> Good Cause Criteria provides a list of acceptable good cause reasons for non-engagement. Other good cause reasons should be considered, and if unsure consult with the Reach Up Supervisor in the district.

Determining Good Cause

After becoming aware of the non-engagement, call or text the participant as soon as possible to find out why they did not participate. Document the effort in case notes.(The preliminary steps of forming a relationship and obtaining buy in from the family should be well documented in case notes also.)

Participant cannot be reached

Leave a message on the individual's phone and ask them to return the phone call or text. Then, follow up with a letter (see below to determine which type of letter).

If the participant is eligible for conciliation, mail a conciliation letter through ACCESS. Conciliation Letter (617) should be used ONLY if ACCESS is not available. Good cause may be determined at the conciliation appointment. Follow the Conciliation Procedure P-2346 including adding conciliation to the FDP.

If the participant is not eligible for conciliation, send a Reach Up Good Cause Request (601GCR). Request the participant to contact you within five business days from the day you mail the Good Cause Request letter (start counting with the next business day).

Reasons for not being eligible for a conciliation:

- Participant has already used up their conciliation for the year--the next step would be sanction; or
- Participant has already received 60 countable months—the next step would be closure.

Able to reach the participant and they provide a good cause reason

Establish an agreed upon next step to resolve the situation (such as rescheduling the missed appointment, creating a new plan to reach the next step of their goal). Schedule a next appointment and update the FDP and/or goal sheet as soon as possible.

Able to reach the participant but good cause cannot be provided

Follow the steps for a conciliation, sanction or closure depending on what the participant is eligible for by mailing a conciliation letter, starting the sanction process or closing the benefits. Case notes should clearly indicate what efforts were made to engage the participant beforehand and why it is believed good cause does not exist. Remember that conciliation, sanction or closure should only be considered if the non-engagement was a pattern, is not connected to an undiagnosed health related issue or there are extreme circumstances identified that got in the way of engagement.

Requesting verification of good cause

Verification of good cause is not needed. Trust that the participant is doing their best. Request verification only if the situation seems questionable. If requesting verification, be clear and specific about what you are requesting, when you need to receive it, and the consequences of not receiving the verification of good cause. If documentation of good cause is necessary; the participant should have 10 days from the date the good cause reason was provided to obtain the documentation. If the participant asks, provide support obtaining the verification.

Good cause is found

At any time when good cause has been established, remove the conciliation, end the sanction, or do not follow through on the closure. If the closure date has already passed, the family will have to reapply.

Good cause based on deferment

When it is discovered that a participant qualifies for a deferment that stops the participant's countable month clock, the reason for the deferment (including medical, needed in the home, young child, domestic violence) may count as good cause.

If the option of deferment was never offered, but the participant may be eligible for the deferment and does not know it, conciliation, sanction or closure should not occur.

Good cause during young child deferment or new baby deferment

Participants should not be conciliated, sanctioned or closed for missing an appointment if they are eligible for:

- A deferment for a child under 6 months old (code 30) or
- A 13-week deferment for a new baby.

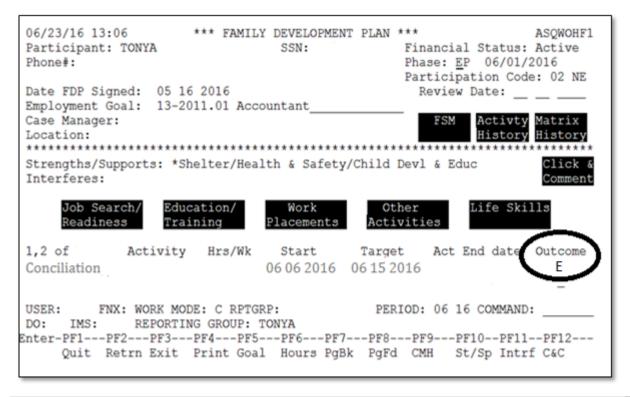
These are the two cases where participants are deferred from the services component of Reach Up which includes case management, support services and referrals.

Follow Reach Up Services procedure <u>2320C</u> for the Young Child Deferment process.

Case Manager Support

Removing conciliation if good cause found

For conciliation enter an "E" for ENTERED IN ERROR as the "Outcome" code in ACCESS on WORK C.

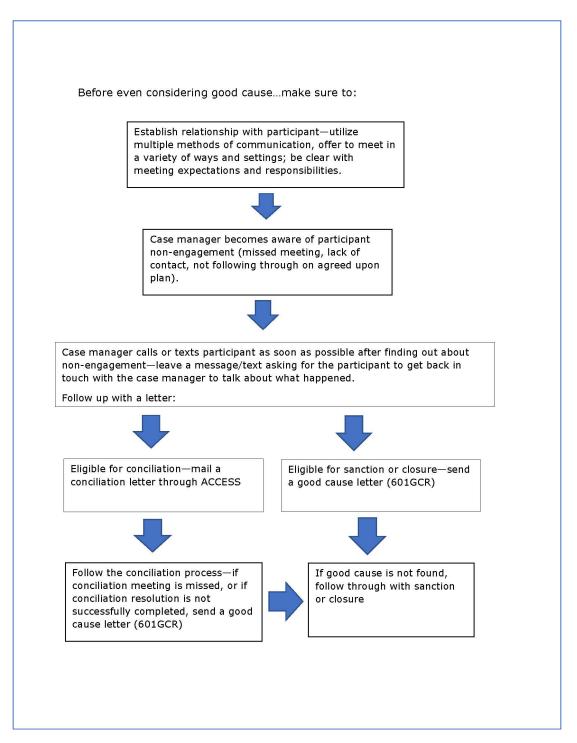


If an E cannot be entered, email COPS to have the conciliation removed from the history. Make a note on any related documentation in the file indicating the Conciliation did not occur.

Removing sanction if good cause found

For a sanction place the cursor on the "SANCTION RSN" and hit "Shift-F12" for a list of "END SANCTION CODES" and enter "F" (good cause found). Email COPS to have the sanction history corrected and replace any lost benefits. Discuss with the participant lessons learned in the process and how to avoid the situation in the future.

Good cause flow chart



P-2346 Conciliation (B23-08)

General Procedures

Conciliation is an intervention, a time to influence what happens next and help the participant work out a way to resolve the issues around their nonengagement with the Reach Up program. If the participant is struggling to attend meetings, make sure to offer options that accommodate different meeting preferences (such as over the phone, home or community visits, specific times of day). Conciliation should only be considered if a person receiving Reach Up has shown a pattern of non-engagement.

Conciliating during the goal achievement process

Consider if a goal needs to be adjusted or changed, or if a different plan needs to be considered before moving toward conciliation (see Reach Up Services procedure <u>2310</u> on goal achievement).

It is important to remember that a participant could be in the review phase of Goal Plan Do Review and Revise (GPDRR) for a long time. As long as the participant is revising their goal or the steps of their plan, a conciliation is not needed.

Consider the following and make sure to document the participant's progress in case notes:

- Have you used the review and revise portion of the GPDRR process, utilizing multiple tools when appropriate, to make sure the goal and plan is still what the participant wants to focus on?
- Have you revisited Stepping Stones to see if something else is rising to a higher level of priority?
- Have you offered support services to help remove barriers that might get in the way of accomplishing the goal or plan?
- Have you considered underlying reasons (mental health issues, domestic violence, etc) for the participant's lack of progress?
- After all of these efforts, is the participant still choosing to not set/change their goal or change their plan, but they continue to not take part in the do part of GPDRR?

Determining if conciliation is necessary during the goal achievement process is very subjective. Consult with the Reach Up Supervisor when unsure.

Counting conciliations

Check for prior conciliations both in ACCESS and in the electronic case file. Ensure all conciliations are entered into ACCESS on the WORK screen. If a conciliation is found that is in the file but not in ACCESS, enter it in ACCESS with a start and end date for purposes of updating the history.

Participant can only have one conciliation within a calendar year (January – December).

Determining which calendar year conciliation occurs

To determine which calendar year the conciliation occurred, use the date the conciliation resolution was signed. If the participant does not attend the originally scheduled conciliation appointment, or a rescheduled appointment, and does not provide good cause, utilize the original conciliation appointment date to determine the calendar year.

Sanction takes place in following calendar year

If a participant has already had one conciliation in the calendar year, and another act of non-engagement occurs without good cause towards the end of the year—the corresponding sanction can take place the following calendar year due to the adverse action timeframe.

Example of how adverse action works: *Participant conciliated in May 2023. In November 2023, another conciliation is determined to be needed. Adverse action has passed so sanction cannot begin* 12/1/23. *Sanction can be put in place for* 1/1/24.

Conciliation appointment

Schedule a conciliation appointment by sending a conciliation letter written through ACCESS, so it is stored in the system. If ACCESS is not available, Conciliation Letter 617 may be used.

The letter must be mailed within ten business days of first becoming aware of the non-engagement.

Schedule the conciliation meeting as soon as administratively possible, but no sooner than within four business days after the date the conciliation letter is mailed. This allows the participant to have advance notice of the meeting. Make sure to provide options for how the meeting may be held (over the phone, virtually, in person).

Update the participant's Family Development Plan (FDP) to include Conciliation as an activity (see Case Manager Support for more details).

Conciliation appointment letter

The conciliation appointment letter should include the specific dates and activities of non-engagement (refer to FDP when appropriate).

Use strength-based language in the conciliation appointment letter that can be understood by the participant.

Example #1: You did not come to our scheduled meeting on Friday, 2/24/23 at 2:00pm or call to reschedule. I could not reach you by phone or text on 2/24/23 but left a voice mail message requesting a call back. I also sent you an email and text. As of today, I have not heard from you.

Example #2: According to our meetings, between Thursday 1/5/23 and Thursday 3/16/23 we have been working to support you on your agreed upon goal to get your license and you were going to schedule and attend your driver's test. We have reviewed and revised the steps to this plan 3 times and you stated you did not want to change this goal. You still have not scheduled the appointment.

The conciliation appointment letter should not include:

- The words "failure to" (do activity, meet with case manager, etc),
- Jargon such as "no-call, no-show", or
- Abbreviations such as WKEX, CSP, VDO, VDOL, ABE, etc.

Waiving advance notice of appointment

Participants can waive advance notice of the conciliation appointment but must sign a statement verifying this request for waiver. The waiver request should include the same information that is provided on the conciliation appointment letter. The easiest way to ensure that all required information is included in the B23-08

Page 10

waiver is to print/email/text a conciliation letter for them to read and sign (physically or verbally).

Rescheduling the conciliation appointment

If the participant requests a rescheduled appointment, provide a rescheduled conciliation appointment. The goal is to hold the conciliation meeting within ten days from the awareness of the non-engagement, though this is not always

possible. Indicate on the conciliation letter that this is a rescheduled appointment.

At the conciliation meeting

If there is good cause for the non-engagement, the scheduled meeting will be a regular case management meeting. Under these circumstances, there will be no conciliation resolution plan, and the conciliation will not be counted toward the limit of one conciliation within a calendar year as defined above. See Reach Up Services procedure 2345 on Good Cause.

If there is not good cause and the participant attends the meeting, follow through with the conciliation resolution process below.

Participant does not attend meeting

If the participant does not attend the meeting, and no other form of good cause has been presented, mail a Reach Up Good Cause Request (GCR601) before moving to sanction. Indicate on the letter that the next step is sanction. Include as much information in the good cause request as possible, clearly indicating the initial non-engagement, as well as the missed conciliation appointment.

Request the participant to contact you within five business days from the day you mail the Good Cause Request letter (start counting with the next business day). See Reach Up Services procedure 2345 on Good Cause. If there is no good cause, the sanction process begins.

Conciliation Resolution

The Conciliation Resolution is a **plan** (lasting from two weeks to three months) that contains what the participant agrees to do in order to avoid a sanction.

During the Conciliation Resolution appointment:

- Use a strengths-based approach and focus on next steps,
- Use open ended questions and listen to what the participant thinks is the reason for the non-engagement, and
- Explore any circumstances that may have interfered with the participant's engagement and how to resolve these issues.

Writing the conciliation resolution

Write a conciliation resolution and indicate on the FDP that a resolution is being signed. Bulleted lists may be used. The conciliation resolution should only include the issue(s) of non-engagement that brought the participant into conciliation.

The conciliation resolution must start within 5 calendar days and should include a description of how long it will last (from two weeks to three months). A shorter timeframe is most effective. However, if a participant has had a pattern of nonengagement, a longer timeframe may be appropriate.

Example: I will attend the next two appointments with my case manager. These appointments will be held via phone on Monday 3/13/23 @ 1pm and Monday 3/20/23 @ 1pm.

Have the participant sign both the Conciliation Resolution and the updated FDP. Scan a copy in the electronic case file and offer a copy to the participant.

Outcome of the conciliation resolution

A conciliation is successfully resolved when the participant has complied with the tasks on the conciliation resolution plan as well as the updated FDP. A conciliation still counts even if it is successfully resolved. The only time that a conciliation does not count is if it is later determined that the participant had good cause for the non-engagement.

If the participant does not follow through with the tasks on the conciliation resolution the case manager must determine if the participant had good cause for not doing what is in the resolution plan. See Reach Up Services procedure 2345 on Good Cause. If there is no good cause, the sanction process begins.

Case Manager Support

Counting past conciliations in ACCESS

On the WORK screen, place cursor on the box that says Activity History and double-click. Press "enter" and count the number of times Conciliation shows in the activity history.

	*** ACTIVITY HIS		ASQWOHN1
Participant:		SSN:	PAGE 2
	Start Date Proj En		utcome
		14 07/31/2014 Inactiv	
		<u>14 12/23/2014 Inactiv</u>	
< <u>Conciliation</u>	08/05/2014 09/05/203		'e
IFBS Intensive Famil	08/08/2014 12/30/20	1 <u>4 12/23/2014</u> Inactiv	e
		_	
			FSM FDP
USER: FNX: WORK N	MODE: C RPTGRP:	PERIOD: 03 16 CO	MMAND:
DO: B IMS: REPORT	TING GROUP:		
Enter-PF1PF2PF3-	PF4PF5PF6	PF7PF8PF9PF10-	-PF11PF12
Quit Exit	t I	PgBk PgFd	

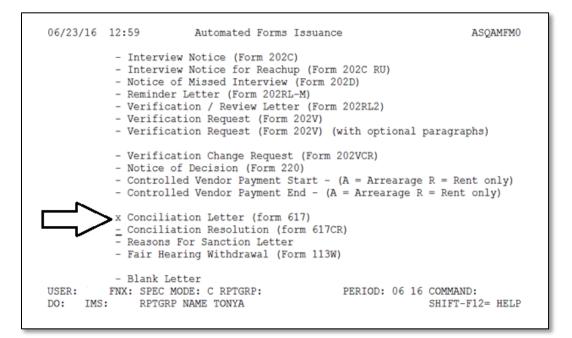
Creating a Conciliation Letter in ACCESS:

Enter SPEC/C/FORMS.

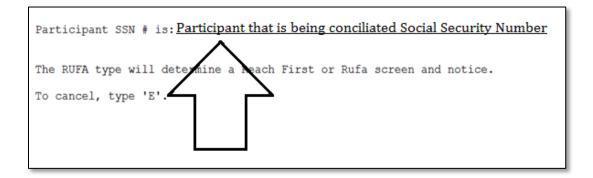
~~~~ Function Codes (FNX) ~~~~ ABWD - ABAWD Food Stamp History APPL - Application	~~~~ Function Codes (FNX) ~~~~ MAIL - Send or Read Mail
	MANA - Managed Care Maintenance MONY - Financial Subsystem NAME - User Name/Number Lookup PCOL - Premium Collections PERS - Person Search PMGT - Premium MGT Report PREM - Premium Management QUAL - Quality Review RECO - Recoupment Schedule REPT - Report Selection SPEC - Special Functions STAT - Statement of Need

Always use the Head of Household Social Security Number when entering SPEC/C/FORMS even if it is the second parent that is being conciliated.

Place an "X" next to "Conciliation Letter (Form 617)".



Enter the Social Security number (SSN) of the participant that is being conciliated.



The name of the participant that is being conciliated will appear on the top of the screen.

If the name is not correct, try entering the SSN again.

06/23/16 1301271	Conciliation Letter	ASQAMF16
Dear TONYA		
	g for us to discuss your participa to talk about the following unmet	
Ц/		
T have acheduled your ear	cilition encontract for	
-	nciliation appointment for:	
Date Time		7
Location		<b></b>
USER: FNX: SPEC MODE: DO: IMS: RPTGRP NAME		

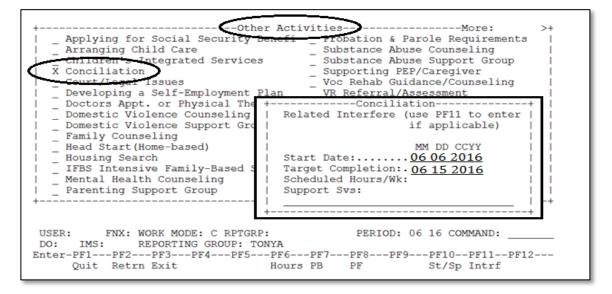
Enter the following information:

- The reason the participant is being conciliated (include specifics)
- The Date, Time, and Location of the meeting

Type "APP" in the command field to print the conciliation letter.

#### Entering conciliation as an activity on the FDP

Select "Conciliation" as an activity on the WORK screen. Conciliation is found under "Other Activitis."



Enter the start date as the date you send the Conciliation Letter and the target completion as the date of the Conciliation Appointment.

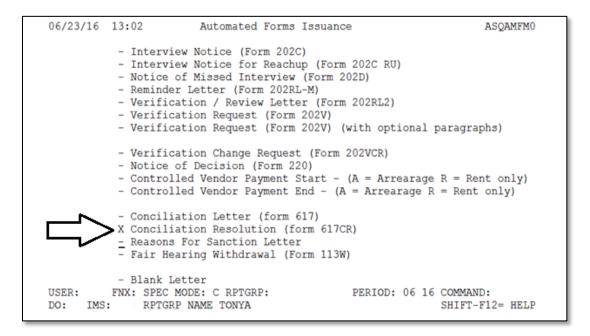
06/23/16 13:06 *** FAMIL Participant: TONYA Phone#:	Y DEVELOPMENT PLAY SSN:	N *** ASQWOHF1 Financial Status: Active Phase: EP 06/01/2016 Participation Code: 02 NE	
Date FDP Signed: 05 16 2016 Employment Goal: 13-2011.01 Acc Case Manager: Location:	ountant	Review Date: FSM Activty Matrix History History	
Strengths/Supports: *Shelter/Hea Interferes: Job Search/ Readiness Education/ Training	Work	d Devl & Educ Click & Comment Dther Life Skills civities	
1,2 of Activity Hrs/Wk Conciliation	Start Targ 06062016 0615		
USER: FNX: WORK MODE: C RPTGRP: PERIOD: 06 16 COMMAND: DO: IMS: REPORTING GROUP: TONYA Enter-PF1PF2PF3PF4PF5PF6PF7PF8PF9PF10PF11PF12 Quit Retrn Exit Print Goal Hours PgBk PgFd CMH St/Sp Intrf C&C			

#### Enter SPEC/C/FORMS.

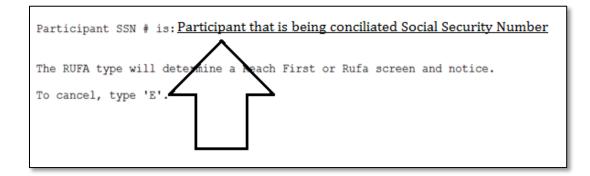
06/23/16	12:59 IV-A SELEC	T FUNCTION	ASTCA1
ABWD - APPL - CASE - CATN - EDS - ELIG - FIAT - FUEL - GAEL - IDEA - INFC - INQB - INQD - IV-D -	Function Codes (FNX) ~~~~ ABAWD Food Stamp History Application Case Status Display Case Action Log Cost Allocation/Time Study Medicaid Management System Eligibility Results/Approval Fiat Eligibility Supplemental Fuel General Assistance System Change Request Interfaces Benefit History Benefit Disbursement History IV-D Select Function Jobs For Independence	MAIL - Send or Read MANA - Managed Care MONY - Financial Su NAME - User Name/Nu PCOL - Premium Coll PERS - Person Searc PMGT - Premium MGT PREM - Premium Mana QUAL - Quality Revi RECO - Recoupment S REPT - Report Selec SPEC - Special Func STAT - Statement of	d Mail Maintenance hbsystem mber Lookup lections ch Report agement iew Schedule ction ctions f Need Reporter/Payee Report cked Cases
		** ** ** ** ** ** ** ** ** ** ** ** **	ng dag dag
USER:	FNX: SPEC MODE: C RPTGRP: HOP	PERIOD: 06 16	F8 = MORE

Always use the Head of Household Social Security Number when entering SPEC/C/FORMS even if it is the second parent that is being conciliated.

Place an "X" next to "Conciliation Resolution (617CR)".



Enter the Social Security number (SSN) of the participant that is being conciliated.



The name of the participant that is being conciliated will appear on the top of the screen.

If the name is not correct, try entering the SSN again.

06/23/16	1303486	Conciliation Resolution	ASQAMF17
🔿 begin t		solve this conciliation, I must e as <u>outlined above</u> within five for	
unsubsi	dized employme FNX: SPEC MODE	for two weeks and fulfill my w ent for two consecutive months. E: C RPTGRP: PERIOD AME TONYA	

Type in the participant's plan to resolve their conciliation.

Enter an "X" next to the top option to resolve the conciliation:

 "Begin to participate as outlined above within 5 days and continue to participate in it for _____"

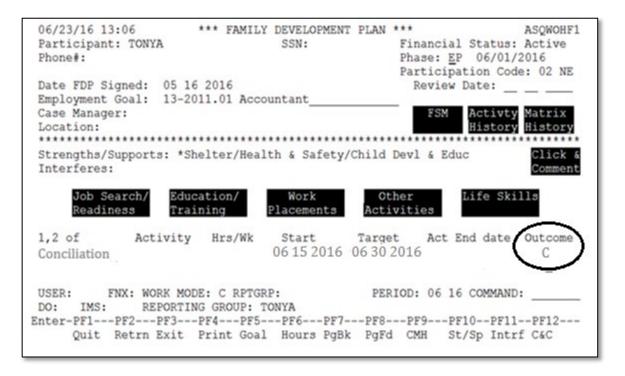
This option is not used at this time and will be removed in the future.

 "Engage in job search for two weeks and fulfill my work requirement in unsubsidized employment for two consecutive months."

Type "APP" in the command field to print the conciliation resolution.

Update the conciliation activity on the participant's FDP to include what was agreed in the conciliation resolution or reference the conciliation resolution was signed. Do not end the conciliation activity at that time, instead just change the target date to include the time period the resolution will last.

#### Entering the conciliation outcome in ACCESS



Enter a "C" (successfully completed) or "U" (unsuccessfully completed) as the "Outcome" code in ACCESS in WORK C.

# P-2347 Sanctions (Reach Up Services rule 2375) (B23-08)

# **General Procedures**

If a person who receives Reach Up does not engage in the Reach Up program, their benefit amount may be reduced, or sanctioned. If the participant is struggling to attend meetings, make sure to offer options that accommodate different meeting preferences (such as over the phone, home or community visits, specific times of day). Sanction should only be considered if a person receiving Reach Up has shown a pattern of non-engagement.

Once a fiscal sanction has been imposed, a sanctioned adult who reengages and follows through with program requirements may cure the sanction and have the full Reach Up benefit amount restored (rule 2372).

See Reach Up procedure <u>2240</u> Sanctioned Households for basic eligibility related information about Reach Up sanctions.

### Sanctioning during the goal achievement process

Consider if a goal needs to be adjusted or changed, or if a different plan needs to be considered before moving toward sanction (see Reach Up Services procedure <u>2310</u> on goal achievement).

It is important to remember that a participant could be in the review phase of Goal Plan Do Review and Revise (GPDRR) for a long time. As long as the participant is revising their goal or the steps of their plan, a sanction is not needed.

Consider the following and make sure to document the participant's progress in case notes:

- Have you used the review and revise portion of the GPDRR process, utilizing multiple tools when appropriate, to make sure the goal and plan is still what the participant wants to focus on?
- Have you revisited Stepping Stones to see if something else is rising to a higher level of priority?
- Have you offered support services to help remove barriers that might get in the way of accomplishing the goal or plan?
- Have you considered underlying reasons (mental health issues, domestic violence, etc) for the participant's lack of progress?
- After all of these efforts, is the participant still choosing to not set/change their goal or change their plan, but they continue to not take part in the do part of GPDRR?

Determining if sanction is necessary during the goal achievement process is very subjective. Consult with the Reach Up Supervisor when unsure.

# P-2347 Sanctions (Con't)

# P-2347A Implementing Sanctions (B23-08)

In general when starting a sanction in ACCESS, the following steps should be taken. Districts may have their own process for ensuring these steps are done.

See Reach Up procedure <u>2240</u> Sanctioned Households for basic information about Reach Up sanctions.

#### Sanction Authorization

Complete a Sanction Authorization (form 606) and include the following:

- Specific information about the non-engagement;
- Explanation about why the sanction will be implemented;
- Rule cite(s) relied on to make this determination; and
- The sanction meeting date.

Give the completed Sanction Authorization (606) to the Reach Up Supervisor, or their designee, for review.

#### Review by Supervisor

The Reach Up Supervisor, or their designee, will determine:

- What were the participant's circumstances?
- Were multiple methods of communication attempted, was the goal achievement process used to determine the participant's goal(s)?
- Was good cause explored?
- Is the paperwork complete?
- Was rule 2375.1 followed?

The sanction will be approved or reversed at this time.

#### Sanction reversed

If the Supervisor decides to reverse the sanction, it is recorded in the case file and e-mailed or discussed with the case manager.

#### Sanction approved

If the Supervisor agrees with the decision and the sanction is approved, they will sign off on the Sanction Authorization (606) on the district director/designee line. Follow your district specific process to implement the sanction.

A copy of the signed 606 should be kept in the case management file. Another copy is given to eligibility staff so they can follow through with the eligibility steps. The signed 606 should also be scanned into OnBase.

#### Sanction start date

Sanctions always start at the beginning of the month and always end at the end of the month.

Adverse action deadlines affect when a sanction can be imposed. Look at the current ACCESS calendar on SharePoint to find out what month the next sanction can start.

### Sanction Notices

Four notices should be created and mailed to the household at least 10 days before the sanction is scheduled to begin.

The four notices include:

- Sanction Appointment letter (created through CASE C SANC);
- Reasons for Sanction letter (created in SPEC C FORMS); and
- 2 Eligibility Notices created when sanctioned amount is approved in eligibility budget – 1st notice states the sanction is starting, 2nd notice shows the reduced benefit amount.

Whenever possible, these notices should be mailed together.

#### Sanction meeting with case manager

Once a sanction starts, the sanctioned participant must meet with their case manager before any of the Reach Up benefit will be released. The purpose of the meeting is to try to develop a plan for the participant to start following through with Reach Up Services requirements again and end the sanction.

# Waiving the meeting

The sanction meeting may be waived for the following reasons:

- Severe illness
- Death in the family
- Other equally compelling reason justifies an exception.

# **Case Manager Support**

Check out the Sanction Flow Chart to see the full Sanction process.

#### Entering the Sanction into ACCESS

Only enter the sanction into ACCESS after a supervisor, or designee, approves the sanction.

## Enter CASE/C/SANC.

06/23/16	15:29	IV-A SELECT	FUNCTION	N ASTCA1
ABWD - APPL - CASE - CATN - EDS - ELIG - FIAT - FUEL - GAEL - IDEA - INFC - INQB - INQD -	Function Codes (FNX) ABAWD Food Stamp His Application Case Status Display Case Action Log Cost Allocation/Timm Medicaid Management Eligibility Results, Fiat Eligibility Supplemental Fuel General Assistance System Change Reques Interfaces Benefit History Benefit Disbursement IV-D Select Function	story System Approval st : History	MAIL - MANA - MONY - PCOL - PERS - PMGT - PREM - QUAL - RECO - REPT - SPEC - STAT - SUBS -	Function Codes (FNX) ~~~~ Send or Read Mail Managed Care Maintenance Financial Subsystem User Name/Number Lookup Premium Collections_ Person Search Premium MGT Report Premium MGT Report Premium Management Quality Review Recoupment Schedule Report Selection Special Functions Statement of Need Substitute Reporter/Payee Daily To-Do Report
	Jobs For Independent	ce		Releases Locked Cases
LOGO -	Logoff		VEND -	Vendor Search
USER:	FNX: CASE MODE: C H	RPTGRP: HOH S	SSN 1	PERIOD: 06 16 COMMAND: SANC F8 = MORE

Always use the Head of Household Social Security Number when entering a sanction even if it is the second parent that is being sanctioned.

Place an "X" next to the participant that is sanctioned.

06/23/16 15:30	*** CASE SANCTIONS MENU S	SCREEN ***	(ASPEBH)
	a name for full CASE/SAN w person's Sanction Histo		
× RL MEMBER		CURRENTLY AGE SANCTIONED 25	
- * THE EARLIE	ST A NEW SANCTION CAN BEG	IN IS 08/01/16 * *	
	MODE: C RPTGRP: P NAME: TONYA	PERIOD: 06 16 COMMAN	D:3

Place cursor on the sanction start reason ("RSN").

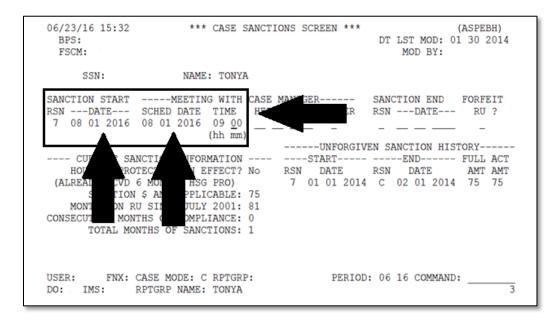
*** CASE SANCTIONS SCREEN *** 06/23/16 15:31 (ASPEBH) DT LST MOD: 01 30 2014 BPS: FSCM: MOD BY: SSN: NAME: TONYA SANGTION START ----MEETING WITH CASE MANAGER----- SANCTION END FORFEIT RSN ---DATE--- SCHED DATE TIME HELD DATE WAIVER RSN ---DATE--- RU ? (hh mm) _____ _ __ _ _ _ _ _ _ _ _ -----UNFORGIVEN SANCTION HISTORY--------- CURRENT SANCTION INFORMATION ---- START----- END----- FULL ACT HOUSING PROTECTION IN EFFECT? NO RSN DATE RSN DATE AMT AMT (ALREADY RCVD 6 MONTHS HSG PRO) 7 01 01 2014 C 02 01 2014 75 75 SANCTION \$ AMT APPLICABLE: 75 MONTHS ON RU SINCE JULY 2001: 81 CONSECUTIVE MONTHS OF COMPLIANCE: 0 TOTAL MONTHS OF SANCTIONS: 1 USER: FNX: CASE MODE: C RPTGRP: PERIOD: 06 16 COMMAND: 3 DO: IMS: RPTGRP NAME: TONYA

#### Hit "Shift F12" for a list of sanction reasons.

#### Select the appropriate sanction code.

06/23/ BPS FSC		
SANC RSN	START SANCTION CODES ASHD32AA 1 - Adult requested Fair Hearing AFTER sanction started 2 - Minor Parent failed approved living	IT ?
 (AL	<ul> <li>3 - Failed job search requirements</li> <li>4 - Refused job or work placement</li> <li>5 - Quit job or work placement</li> <li>6 - Dismissed from job or work placement without good cause</li> <li>7 - Failed to comply with Reach Up requirements</li> </ul>	 ACT AMT 75
CONS	M - Mandatory Youth failed to comply with Reach Up H - Mandatory Youth requested Fair Hrng AFTER sanction started F - Sanctions on hold: Fair Hearing requested before sanction	
USER . DO:	Started. Use for adult or youth. YOUR SELECTION: . IMS: RPTGRP NAME: TONYA	3

Enter the "Sanction Start Date" and the meeting with case manager "Sched Date and Time".



Entering the sanction start date should create a new version of Eligibility with the budget reduced by the sanction amount. It also creates a TODO for the district's G_1 caseload.

Entering the appointment date should create the Appointment Reminder letter.

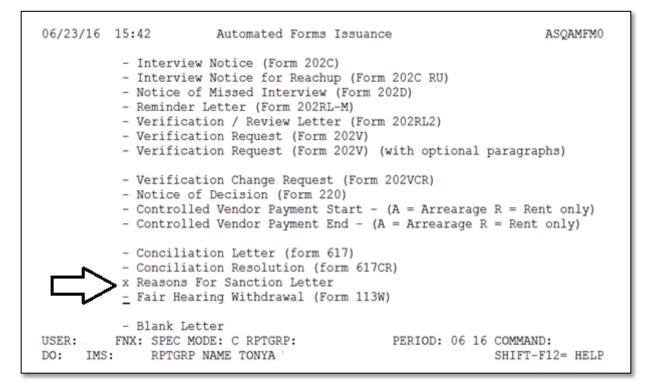
#### Completing the Reason for Sanction letter

Enter SPEC/C/FORMS.

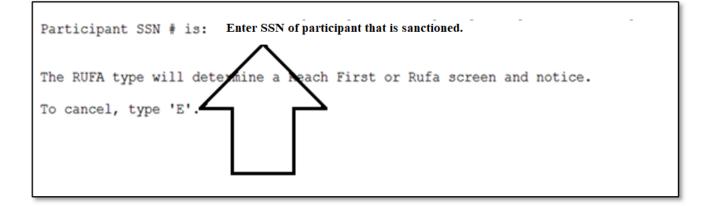
06/23/16	12:59 IV-A SELECT	FUNCTION	ASTCA1
ABWD - APPL - CASE - CATN - EDS - ELIG - FIAT - FUEL - GAEL - IDEA - INFC - INQB - INQD - IV-D -	ABAWD Food Stamp History Application Case Status Display Case Action Log Cost Allocation/Time Study Medicaid Management System Eligibility Results/Approval Fiat Eligibility Supplemental Fuel General Assistance System Change Request Interfaces Benefit History Benefit Disbursement History IV-D Select Function Jobs For Independence	PERS - Person Search PMGT - Premium MGT Report PREM - Premium Management QUAL - Quality Review RECO - Recoupment Schedule REPT - Report Selection SPEC - Special Functions STAT - Statement of Need	enance n pokup 3 e c/Payee
USER:	FNX: SPEC MODE: C RPTGRP: HOH S		ND: FORMS_ MORE

Always use the Head of Household Social Security Number when entering SPEC/C/FORMS even if it is the second parent that is being sanctioned.

Place an "X" next to "Reasons for Sanction Letter".



Enter the Social Security Number of the participant that is being sanctioned.



The name of the participant that is being sanctioned will appear on the top of the screen.

If the name is not correct, try entering the SSN again.

Dear	TONYA		Reason	ns for Sanct	ion Letter		ASQAMF21
		anctioned	because,	without goo	d cause, y	ou:	
	Choose one	date crit	eria:_	on MM DD Y			
			-	irom MM DD	YYYY to 1	MM DD YYYY	
ノ							
$\Rightarrow$							
\$							
Rule	Citations Examples:	(rule 23	72) or (	(rules 2193,	2240) Command =	<	

Enter an "X" next to one of the date criteria:

MM DD YYYY- use this option if it was a onetime event

Example: This would be used for not attending a conciliation meeting.

MM DD YYYY to MM DD YYYY- use this option if it was for a period of time

Example: This would be used if a participant did not engage in an activity over a period of time.

Enter the following information:

- The reason the participant is sanctioned (include specifics)
- Appropriate rule citations (refer to the "Reason for Sanction Letter Desk Aid")
- Check ACCESS to determine if the landlord/mortgage company information is listed. If the landlord/mortgage company name and address is not listed include the statement below on reason for sanction letter:
  - After you attend your sanction meeting, we cannot release your benefits until you provide your landlord/mortgage company name and mailing address. Please have your landlord/mortgage information available when you attend your sanction meeting.

Type "APP" in the COMMAND field of the Reasons for Sanction letter.

## Final steps to implementing a sanction

Enter a CATN explaining that the participant has been sanctioned, when the sanction starts and stating that they must meet with their case manager to receive any benefits.

Include the Sanction Appointment letter and Reason for Sanction letter with the the signed 606 and get it to the Supervisor/BPS/district designee who enters Reach Up sanctions.

Approve the decrease in benefits on ELIG/C/RUFA. This will create the final two sanction letters, the start of the sanction letter and the reduced benefit letter.

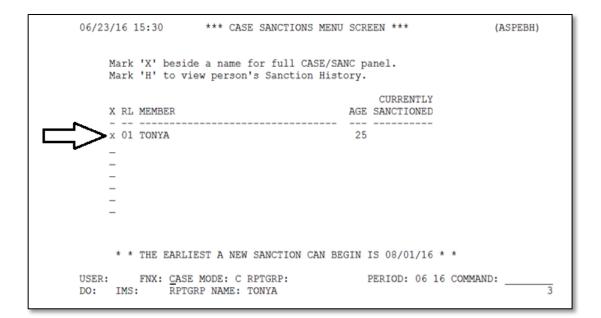
#### Entering Sanction meeting held date

After participant attends their sanction meeting, enter the sanction meeting held date on CASE/C/SANC screen.

#### Enter CASE/C/SANC.

06/23/16	15:29 IV-A SELECT	FUNCTION	ASTCA1
ABWD - APPL - CASE - CATS - EDS - ELIG - FIAT - FUEL - GAEL - IDEA - INFC - INQB - INQD - IV-D -	Function Codes (FNX) ~~~~ ABAWD Food Stamp History Application Case Status Display Case Action Log Cost Allocation/Time Study Medicaid Management System Eligibility Results/Approval Fiat Eligibility Supplemental Fuel General Assistance System Change Request Interfaces Benefit History Benefit Disbursement History IV-D Select Function Jobs For Independence Logoff	MAIL - Send or Read Mail MANA - Managed Care Main MONY - Financial Subsyst NAME - User Name/Number PCOL - Premium Collectio PERS - Person Search PMGT - Premium MGT Repor PREM - Premium Managemen QUAL - Quality Review RECO - Recoupment Schedu REPT - Report Selection SPEC - Special Functions STAT - Statement of Need	tenance em Lookup ns_ t t t le er/Payee t
USER:	FNX: CASE MODE: C RPTGRP: HOH S		AND: SANC = MORE

Always use the Head of Household Social Security Number when entering a sanction even if it is the second parent that is being sanctioned. Place an "X" next to the participant that is sanctioned.



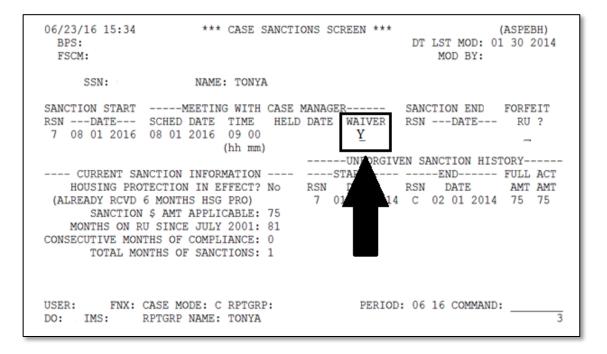
#### Enter the sanction held date.

06/23/16 15:34 BPS: FSCM:	*** CASE SANCTIONS	SCREEN ***	(ASPEBH) DT LST MOD: 01 30 2014 MOD BY:
SSN:	NAME: TONYA		
RSNDATE	MEETING WITH CASE MANA SCHED DATE TIME HELD DAT 08 01 2016 09 00 08 01 20 (hh mm)	E WAIVER H	SANCTION END FORFEIT RSNDATE RU ?
HOUSING PROT (ALREADY RCVD 6 SANCTION MONTHS ON RU CONSECUTIVE MONT	<b></b>	-START DATE I	N SANCTION HISTORY END FULL ACT RSN DATE AMT AMT C 02 01 2014 75 75
	ASE MODE: C RPTGRP: PTGRP NAME: TONYA	PERIOD:	06 16 COMMAND:3

The sanction held date will create a TODO to the district G_1 case load indicating the benefit can be released. Some districts enter a manual TODO to the district G_1 caseload as well. Other districts send emails to the District Management team or designated staff member.

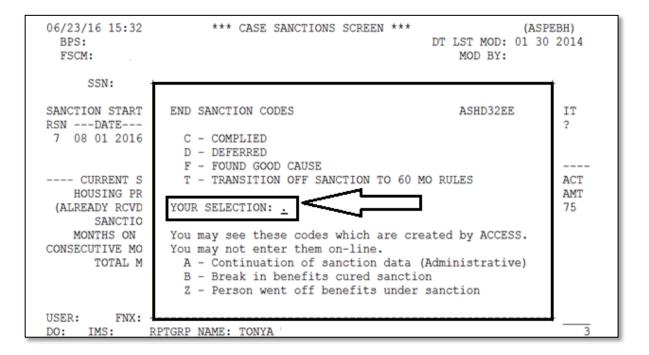
#### Waiving the sanction meeting

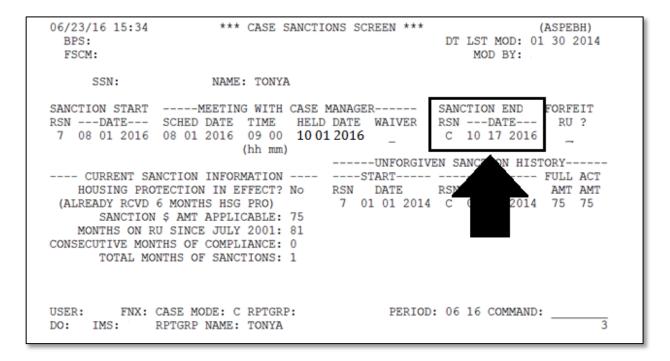
Enter "Y" in the Meeting with Case Manager "Waiver" field.



#### Lifting the sanction in ACCESS

From the CASE/C/SANC screen, place the cursor on the "SANCTION RSN" and hit "Shift F12" for a list of "End SANCTION CODES".





Enter the "SANCTION END DATE".

Enter a CATN stating the sanction has been lifted.

Entering the Sanction End date should create a new version of ELIG to be approved. Send a TODO to the district G_1 caseload letting them know the sanction has been lifted. Some districts also send an email to the District Management team or a designated staff member.

# P-2347 Sanctions (con't)

# P-2347B Sanctions in Households with Two Parents (B23-08)

Sanctions are applied at the individual level. In a two-parent household, both parents can be sanctioned for not engaging in Reach Up Services. If one parent is sanctioned, the other parent should be encouraged to follow through on their own plan to accomplish their

own goals. This may mean one parent is engaged, and the second parent may remain sanctioned.

Even if the non-sanctioned parent is engaged, the parent that is sanctioned may remain sanctioned until they meet with their case manager and update their own FDP and identify and develop a plan to work towards their own goals.

Case managers should consider what is preventing the sanctioned parent from participating in activities and attending appointments. Review the guidance offered at the beginning of the good cause, conciliation and sanction procedures. Offering home or community visits, phone check ins, and referrals to other services may help the parent lift the sanction. A family meeting with both parents is encouraged whenever appropriate.

# Example:

John and Amanda are a couple included in the same Reach Up household. John is sanctioned for not attending appointments with his case manager. Amanda can continue to follow her FDP and work towards her goals. John would remain sanctioned until he met with his case manager and started to identify his own goals.

If it was discovered that John qualified for a deferment that would stop the clock on his countable months, the case manager would meet with John and Amanda to explain how countable months are determined. John's sanction may be lifted if the deferment he qualifies for impacts his ability to engage in the activities for which he was sanctioned.

# P-2355 Case Management Procedures for Temporary Absence(B23-08)

# **General Procedures**

Refer to Reach Up P2270.pdf (vermont.gov) for more information about Temporary Absence, such as granting absence, BPS support and transferring a temporary absence case to a different district.

# **Case Management Responsibilities**

Continue to administer the services component of the Reach Up Program even after a temporary absence has been granted, including work with families on identifying their short- and long-term goals and use GPDR/R to support participants in breaking these goals down into manageable steps.

Increased contact with the participant and service providers is encouraged to support the steps towards reunification. Frequent revisions of the plan for reunification may be necessary. Continue to review the timeframe with the participant, to ensure they are aware of the time limit.

Participant goals should be supported, unless they are in direct conflict with what is being required of the participant by Family Services Division (FSD). FDP activities that support the parent's engagement with FSD is recommended.

When contacting members of the household, service providers and other supports it is important to keep reunification in the conversation.

- Are there steps and behavioral changes that need to be taken to increase the chance of reunification?
- What is the parent/caretaker's living situation? (Are they maintaining a home for the child's return? Up to date on rent? Looking for housing if "homeless"? ...etc.)

Share information necessary for the coordination of services from Eligibility or an institution with the FSD social worker when one is assigned. Medical and Substance Use information obtained from a treatment provider (including specialized the Reach Up Mental Health Substance Abuse case manager/clinician) or health care provider, cannot be shared without the participant's written authorization to release specified information.

Report any changes to Eligibility that might affect continuing eligibility for the Reach Up benefit.

If it is unlikely that reunification will occur before the 180 days is completed and an extension of the temporary absence does not seem appropriate, help the participant plan for their transition from Reach Up after their 180-day period has expired. This could include referrals to additional supports or resources for housing and income.

# Temporary Absence of Child(ren)

## **Case Management Responsibilities**

Assist in obtaining a <u>201WC</u> release from the parent/caretaker in situations where the child's absence is due to incarceration (of the child), medical care, or a voluntary placement. Contact the appropriate parties (including the parent/caretaker) two or more times per month including face to face, phone, and email contact.

In cases of FSD custody, have contact two times or more per month with the parent/caretaker and the FSD social worker. This could include a monthly team meeting, such as a safety planning meeting, as well as phone and email contact. Can ask for a copy of the case plan "actions steps" this will outline safety concerns that need to be address for FSD to support reunification.

The month prior to the 180 days deadline. Send the FSD worker the below questions to gather information regarding progress and timeframe for reunification. If the FSD worker reported reunification will occur by the deadline, follow up with them again the following month to confirm that child/ren are home with their parent/caregiver at least 50% of the time, if so, send a TODO message to eligible to add the child(ren) to the grant and end the temporary absence.

# **Extending Temporary Absence**

Temporary Absence extensions are determined on an individual basis. Not all cases will need to request an extension. An extension should only be requested if the participant or case manager/service provider feels additional time will help the family to be reunited and reunification should be occurring in the next several months. The request for the extension should be requested the month prior to the 180th day.

To request an extension, the below questions need to be completed by the FSD worker and case manager. Responses need to be emailed to Reach Up Central office. <u>AHS.DCFESDCOReachUp@vermont.gov</u>

# Questions that need to be completed by the Reach Up case manager when requested a temporary absence extension.

### Questions for RUCM:

- 1. What is the original expiration date of the 180-day temporary absence?
- 2. Has AOPS already granted an extension?
- 3. Has the household member(s) been meeting with their RUCM consistently?
- 4. Is the family making progress on their goals?
- 5. Is there any information related to the family's housing that should be noted (are they in a GA hotel, waiting for a voucher, etc.)?

# Questions that need to be completed by the Family Service worker when requesting a temporary absence extension.

# Question for Family Service Worker:

- 1. Is the case plan goal still reunification? If yes, when is FSD recommending the child(ren) return home 50% of the time or full time?
- 2. Has reunification been delayed due to a circumstance beyond the parent(s) control or a catastrophic event? (Please be as specific as possible)
- 3. Has the parent(s) been consistently engaged with FSD and making progress on case plan goals?
- 4. Are unsupervised visits occurring? If so, where, and how often? If not, is there a plan for this to happen in the next 30 days?
- 5. Are unsupervised overnights occurring? If so, what is the plan? If not, is there a plan for this to happen in the next 30 days?

# **Temporary Absence of Parent/Caretaker**

# **Case Management Responsibilities**

When possible, assist in obtaining a 201WC from the parent/caretaker and contact the hospital, substance abuse treatment facility or other medical institution where the participant is receiving care.

Code absent parent/caretaker as medically deferred.

Have a minimum of contact two times per month with the absent parent/caretaker, if the facility and situation permit, in part to monitor the parent/caretaker's continuing ability to return within 180 days. This requirement can be waived in situations where it has been verified with the hospital, substance abuse treatment facility or other medical institution, that contact is not allowed, would be unreasonably difficult to arrange, or would be detrimental to the parent/caretaker's treatment plan.

# P-2375 Case Management (con't)

# P-2375A Case Notes (B23-08)

Individual case notes should give a clear description of the interaction with the participant, provider, or team member, and actions taken because of the contact. This includes households receiving Reach Ahead.

The case note template (Example Case Note Template) will be used when writing case notes for regularly scheduled meetings. The case note template provides a standardized Statewide approach for content in case notes. Additionally, it helps as a reminder of the key areas to document in case notes, gives a clear outline when transferring between districts, and allows for reader to find information quickly and efficiently.

Case notes will be recorded in the participant's case note folder on the share drive. Case notes should be written within 2 business days of the interaction.

# Format and qualities of good case notes

Case notes should:

- Be written in complete sentences;
- Be typed;
- Refer to the person writing the note as "I" (not "this case manager" or "this worker");
- Use professional and courteous language;
- Be relevant to the goals of the participant and their family;
- Use abbreviations minimally, if at all. If used, they should only be commonly known statewide abbreviations (ESD, FSD, etc.). Remember, files may leave the district, so district specific abbreviations should be avoided.
- Demonstrate at least monthly contact, and follow up support related to specific goal steps;
- Be easy to read so that another person reading the case notes would understand what is going on for the family; and
- Provide verification and explanation of issues that could come up in a Fair Hearing, such as reasons for conciliation and sanction.

### Case Note Template Completion

- Header should include Participants name, social security number, and email address. (to set up header go to insert, header, blank, and enter information under [type here])
- Templates should be used at each regular monthly meeting and can be copied and pasted into the case note word document.
- Templates do not need to be used for additional unplanned contact such as texts, brief phone calls, emails, or team meetings. Please write a case note for these using Date/RUCM name and a summary of the contact.
- Stepping Stones does not need to be completed each meeting if there is no change. If it is at initial assessment, 6-month review of Stepping Stones, or there is a change where Stepping Stones was used then complete this section on template. If in between these times, then can leave blank or put N/A.

# Monthly Case Note Template

**Date and RUCM full name:** Write the date the meeting was held and your full name

**Type of contact with participant:** Note whether completed over phone, through TEAMS, in the community, or at home visit.

Stepping Stones(Housing, Childcare, Transportation, Mental/Emotional/Physical Well Being, Children's Well Being, Community Supports, Legal, Education/Training, Job skills and Employment): If Stepping Stones is not completed due to initial assessment, 6 month review, or a change in goal where the tool was used then you can leave this blank or write N/A. If this is an initial assessment appointment, 6 months Stepping Stones review, or it has been used due to a change in goal then complete with the areas that were discussed.

#### Uncope and PHQ date completed: Write date that this was completed.

**Meeting Summary:** Overview of the meeting. Consider adding information such as date last FSM updated, provider information and conversations when applicable (name and role), if participant is in temporary absence the review of this, notable observations, deferment status, reference to any calls made to the Child Abuse Hotline when child abuse is suspected with intake number and conversations around non engagement (good cause, concil/sanction, letter sent). **Current Employment (Improving Finances) Goal:** Write current Employment (Improving Finances) Goal as reflected on Family Development Plan.

**FDP & GPDR/R Review:** Write review of participants identified goal/s, important next steps, supports needed, and barriers. Write the GPDR/R tool used when applicable and whether this was completed verbally or by participant. If FDP was updated note this and if verbally signed, please use the following language. Reviewed FDP with _____ over the phone; _____agreed to FDP dated **/**/****.

**Support Services:** Write any support services that were written to the participant or offered to the participant. Check box that ICAN RU support services were reviewed as applicable.

**Referrals and Resources:** Write any referrals or resources offered to the participant even if not accepted by the participant.

**Next meeting date, time, location:** Write in next monthly meeting date and time as well as the participants preference of where or how to meet (i.e., phone, TEAMS, home, community).

### What should not be included in case notes

Case notes should not include the following:

- Opinions, judgments, or speculation about the participant (for example, "She's not motivated", or a case manager's "diagnosis").
- An email correspondence entered as a substitute for written notes.
- Irrelevant information (for example, detailed information about "small talk" conversations).
- Statements that you would not want the participant to read or hear.

# **Specific Content in Case Notes**

#### **Domestic Violence**

When domestic violence is involved, describe the general nature of the discussion with participant (i.e., for safety planning, resource options, referrals). Consider that documentation of specific elements of the adult victim's location or details of their safety plan (if they are fleeing or planning to flee the abuser), may increase risk to the family. Use general terms, not specific details about safety plans or exact location of safe housing.

# Calls made to Child Protective Services

When a call has been made to child protective services, provide a brief description of concern, identify which supervisor was consulted in making decision of next steps and if an official report was made or not.

### *Fair Hearings and Consultation with Assistant Attorney General's (AAG) Office*

No documentation of consultation with the AAG's office should be included in case notes as they are protected attorney/client communications. If specific documentation was requested from a participant or the AAG, that could be indicated in case notes.

# Case Manager Support

### Case Note Template Example

Date and RUCM name: 4/1/2023 [Reach Up Case Manager name]

Type of contact with participant: In person contact with John Smith.

Stepping Stones (Housing, Childcare, Transportation, Mental/Emotional/Physical Well Being, Children's Well Being, Community Supports, Legal, Education/Training, Job skills and Employment): Reviewed Stepping Stones with John Smith. John identified that his primary focus is on housing and childcare as John is currently living at the shelter and is working towards securing stable housing. Additionally John is interested in returning to school once childcare is obtained for his daughter. John identified transportation as a support as he has a vehicle and also has family supports.

**Uncope and PHQ2 date completed:** Completed 10/1/2022. John is already engaged in Mental Health counseling and reports having ample supports at this time. John is being seen through the Howard Center for therapy and meets with[insert provider full name].

**Meeting Summary:** John attended appointment on time and reported that he is still interested in working on obtaining housing and securing childcare as noted from review of Stepping Stones. Completed GPDRR tool My Action Plan to outline steps towards these identified goals. John reported that he is completing 3 housing applications for subsidized housing options and is meeting regularly with shelter staff to explore housing opportunities. John is also contacting childcares to get his daughter on waitlists and has a tour scheduled at Little Tots childcare on 4/15/23 for a potential opening. John is continuing mental health counseling

weekly with [insert provider full name] and reported this is going well and that he is maintaining his transportation.

# Current Employment (Improving Finances) Goal: LNA

**FDP & GPDR/R Review:** FDP updated with housing and childcare goal and signed in person this date 4/1/23. Copy given to John. My Action plan completed.

# Reviewed FDP with participant over phone (or Teams meeting); they agree to FDP dated **/**/***

**Support Services:** Childcare authorization, FDP incentive for housing applications submitted. John is not ICAN eligible at this time.

# □ I reviewed Reach Up ICAN participant support services.

**Referrals and Resources:** Vermont Rental Subsidy Program and Childcare Resources.

Next meeting date, time, location (preference of mtg location discussed ☑) Next meeting preference is home visit, scheduled 4/25/23 at 3pm.