

**SEMINOLE COUNTY GOVERNMENT
AGENDA MEMORANDUM****SUBJECT:** Emergency Home Energy Assistance Program - Agreement for Grant Participation**DEPARTMENT:** Fiscal Services**DIVISION:** Administration - Fiscal Services**AUTHORIZED BY:** Lisa Spriggs **CONTACT:** Michele Saunders, Jennifer Bero **EXT:** 2301, 7163**MOTION/RECOMMENDATION:**

Approve and authorize the Chairman to execute an agreement with the Area Agency on Aging of Central Florida, Inc. doing business as (d/b/a) Senior Resource Alliance thereby accepting an authorized agent designation for the Emergency Home Energy Assistance Grant Program.

County-wide

Jennifer Bero

BACKGROUND:

The State of Florida Department of Elder Affairs provides funding to selected agencies throughout the State to administer the Emergency Home Energy Assistance Program (EHEAP). This program assists low-income senior households experiencing a home energy emergency resulting from a delinquent utility bill, lack of fuel or wood, or the receipt of a shut off notice. Reimbursement funds are also available for heating/cooling system repairs and purchase of fans. The Area Agency on Aging of Central Florida, Inc. d/b/a Senior Resource Alliance, is the selected agency for assisting eligible seniors residing in Seminole County.

The Area Agency on Aging of Central Florida, Inc. d/b/a Senior Resource Alliance is requesting that Seminole County enter into an agreement designating the County as an authorized EHEAP agent. If approved, the Community Assistance Division will continue to provide intake services, such as evaluating and reviewing documents submitted by senior residents in the County to determine eligibility for EHEAP funding. Eligible applications would be forwarded to the Area Agency on Aging of Central Florida, Inc. d/b/a Senior Resource Alliance for further processing and payment distributions to heating or cooling vendors, as appropriate. No dollars would be received by or required of the County.

STAFF RECOMMENDATION:

Staff recommends that the Board approve and authorize the Chairman to execute an agreement with the Area Agency on Aging of Central Florida d/b/a Senior Resource Alliance in acceptance of an authorized agent designation for the Emergency Home Energy Assistance Grant Program.

ATTACHMENTS:

1. Agreement

Additionally Reviewed By:

- County Attorney Review (Susan Dietrich)
- Budget Review (Lisa Spriggs)

AREA AGENCY ON AGING OF CENTRAL FLORIDA, INC. AGREEMENT

THIS AGREEMENT is made and entered this _____ day of _____, 20____, by and between SEMINOLE COUNTY, a political subdivision of the State of Florida, whose address is Seminole County Services Building, 1101 East First Street, Sanford, Florida 32771, hereinafter referred to as the "COUNTY," and the AREA AGENCY ON AGING OF CENTRAL FLORIDA, INC., doing business as Senior Resource Alliance, a Florida non-profit corporation, whose address is 988 Woodcock Road, Suite 200, Orlando, Florida 32803, hereinafter referred to as the "CONTRACTOR".

W I T N E S S E T H:

WHEREAS, the CONTRACTOR provides extensive outreach, activities and programs to foster an optimal quality of life for elder Floridians, including those residing in Seminole County, Florida; and

WHEREAS, one program provided by CONTRACTOR throughout Seminole County, Florida is the Emergency Home Energy Assistance Program (EHEAP) which offers home energy assistance aid to elders in the event of a home energy heating or cooling emergency; and

WHEREAS, the COUNTY has deemed that EHEAP serves an important COUNTY purpose and vital need and wishes to participate in EHEAP by receiving designation as an agent for EHEAP,

NOW, THEREFORE, in consideration of the mutual covenants, promises and representations contained herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto agree as follows:

Section 1. Recitals. The above recitals are true and correct and form a material part of the Agreement upon which the parties have relied.

Section 2. Term. This Agreement shall commence on the date set forth hereinabove and expire on March 31, 2010, the date of signature

by the parties notwithstanding, unless earlier terminated as provided herein.

Section 3. Termination. This Agreement may be terminated by either party at any time, with or without cause, upon not less than thirty (30) days' prior written notice delivered to the other party, as provided for herein, or, at the option of the COUNTY, immediately in the event that CONTRACTOR fails to fulfill any of the terms, understandings or covenants of this Agreement. The COUNTY shall not be obligated to pay for any services provided or costs incurred by CONTRACTOR after CONTRACTOR has received notice of termination. Any requirements set forth in Section 6 hereunder shall survive the term of this Agreement as a whole.

Section 4. Services. The CONTRACTOR shall use monies granted by the State of Florida to provide financial assistance to elders residing in Seminole County, Florida in need of emergency heating and cooling services.



Section 5. County Responsibilities.

(a) COUNTY shall provide intake services and process applications from elders residing in Seminole County, Florida. Said applications shall be provided by CONTRACTOR in a form similar to the form attached hereto and incorporated herein as Exhibit "A".

(1) COUNTY shall submit applications to CONTRACTOR within eighteen (18) hours of application completion if a life-threatening situation exists, as solely determined by the COUNTY intake counselor.

(2) COUNTY shall submit completed applications to CONTRACTOR within forty-eight (48) hours of application completion in a non life-threatening situation.

(3) COUNTY shall include proof of income and "cut-off" notices, if applicable, to CONTRACTOR with submissions of completed applications.

(4) COUNTY may submit completed applications to CONTRACTOR by facsimile; however, COUNTY shall subsequently submit the original applications to CONTRACTOR by regular United States mail within five (5) business days of application completion.

(b) COUNTY shall verify by *Contracting RW MB* Case Worker LIHEAP that an elder applicant's household is not receiving a State of Florida Department of Community Affairs Low Income Home Energy Assistance Program (LIHEAP) crisis assistance benefit. Eligible elder applicant households may only receive one (1) crisis benefit for each heating or cooling season.

(c) COUNTY shall not guarantee the award of EHEAP funds to any elder applicant.

(d) COUNTY shall ensure that an elder applicant complies with the qualification guides as provided by CONTRACTOR and set forth in Exhibit "B", attached hereto and incorporated herein.

Section 6. Liability and Indemnification.

(a) CONTRACTOR shall hold harmless and indemnify the COUNTY from and against any and all liability, loss, claims, damages, costs, attorney's fees and expenses of whatsoever kind, type, or nature which the COUNTY may sustain, suffer or incur or be required to pay by reason or as a result of any act or omission of CONTRACTOR in the performance of the Agreement or any part thereof; or failure of CONTRACTOR to comply with applicable laws or regulations; or as may otherwise result in any way or instance whatsoever arising from this Agreement.

(b) Each party to this Agreement is responsible for all personal injury and property damage attributable to the negligent acts or omissions arising out of this Agreement of that party and the officers, employees and agents thereof.

(c) The parties further agree that nothing contained herein shall be construed or interpreted as denying to any party any remedy

or defense available to such parties under the laws of the State of Florida, nor as a waiver of the COUNTY'S sovereign immunity.

Section 7. Unavailability of Funds. If the COUNTY learns that funding from the State of Florida or Federal government cannot be obtained, or continued on a matching basis, if applicable, this Agreement may be terminated immediately, at the option of the COUNTY, by written notice of termination to CONTRACTOR as provided hereinafter. The COUNTY shall not be obligated to pay for any services provided or costs incurred by CONTRACTOR after CONTRACTOR has received such notice of termination.

Section 8. Access to Records. CONTRACTOR shall allow the COUNTY, its duly authorized agent and the public access to such of CONTRACTOR records as are pertinent to all services provided hereunder, at reasonable times and under reasonable conditions for inspection and examination in accordance with the Health Insurance Portability and Accountability Act and Chapter 119, Florida Statutes.

Section 9. Notices. Whenever either party desires to give notice unto the other, it shall be given in writing by certified United States mail, with return receipt requested, and sent to:

For COUNTY:

Seminole County
Department of Community Services
1101 E. First Street
Sanford, Florida 32771

For CONTRACTOR:

Area Agency on Aging of Central Florida, Inc.
988 Woodcock Road, Suite 200
Orlando, Florida 32803

Either of the parties may change, by written notice as provided above, the person or address for receipt of notice.

Section 10. Assignments. Neither party to this Agreement shall assign this Agreement, or any interest arising herein, without the written consent of the other.

Section 11. Entire Agreement.

(a) It is understood and agreed that the entire agreement of the parties is contained herein and that this Agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof as well as any previous agreements presently in effect between the parties relating to the subject matter hereof.

(b) Any alterations, amendments, deletions, or waivers of the provisions of this Agreement shall be valid only when expressed in writing and duly signed by the parties.

Section 12. Compliance with Laws and Regulations. In providing all services pursuant to this Agreement, CONTRACTOR shall abide by all statutes, ordinances, rules, and regulations pertaining to, or regulating the provisions of, such services, including those now in effect and hereafter adopted. Any violation of said statutes, ordinances, rules, or regulations shall constitute a material breach of this Agreement, and shall entitle the COUNTY to terminate this Agreement immediately upon delivery of written notice of termination to CONTRACTOR as provided hereinabove.

Section 13. Disclaimer of Third Party Beneficiaries. This Agreement is made for the sole benefit of the parties hereto and their respective successors and assigns and is not intended to and shall not benefit any third party. No third party shall have any rights hereunder or as a result of this Agreement or any right to enforce any provisions of this Agreement.

Section 14. Governing Law. This Agreement shall be governed by the laws of the State of Florida and the ordinances, resolutions and policies of COUNTY not prohibited thereby. The parties hereby consent to venue in the Circuit Court in and for Seminole County, Florida, as to State actions and the United States District Court for the Middle District of Florida, Orlando Division, as to Federal actions.

Section 15. Interpretation. CONTRACTOR and COUNTY agree that all words, terms and conditions contained herein are to be read in concert, each with the other, and that a provision contained under one heading may be considered to be equally applicable under another in the interpretation of this Agreement

Section 16. Equal Opportunity. The parties agree that they will not discriminate against any eligible person receiving services under this Agreement because of race, color, religion, sex, age, national origin, or disability and will take steps to ensure an eligible person receives such services without regard to race, color, religion, sex, age, national origin, or disability.

Section 17. Severability. If any one or more of the covenants or provisions of this Agreement shall be held to be contrary to any express provision of law or contrary to the policy of express law, though not expressly prohibited, or against public policy, or shall, for any reason whatsoever, be held invalid, then such covenants or provisions shall be null and void, shall be deemed separable from the remaining covenants or provisions of this Agreement, and shall, in no way, affect the validity of the remaining covenants or provisions of this Agreement.

Section 18. Counterparts and Headings. This Agreement may be executed simultaneously and in any number of counterparts, each of which shall be deemed an original, but all of which shall constitute one and the same instrument. The headings herein set out are for convenience and reference only and shall not be deemed a part of this Agreement.

Section 19. Independent Contractors. It is agreed that nothing herein contained is intended or should be construed in any manner as creating or establishing a relationship of copartners between the parties, or as constituting CONTRACTOR, including its officers, employees and agents, the agent, representative or employee of the

COUNTY for any purpose or in any manner whatsoever. The parties are to be and shall remain independent CONTRACTORS with respect to all matters pertinent to this Agreement.

Section 20. Exhibits. Exhibits "A" and "B" to this Agreement shall be deemed to be incorporated into this Agreement as if fully set forth verbatim into the body of this Agreement.

Section 21. Conflict of Interest.

(a) The parties agree they will not engage in any action that would create a conflict of interest in the performance of their obligations pursuant to this Agreement or which would violate or cause others to violate the provisions of Part III, Chapter 112, Florida Statutes, or Section 220.115, Seminole County Code, relating to ethics in government.

(b) The parties hereby certify that no officer, agent or employee has any material interest (as defined in Section 112.312(15), Florida Statutes, as over 5%) either directly or indirectly, in the business of the party be conducted hereunder, and that no such person shall have any such interest at any time during the term of this Agreement.

(c) The parties hereby agree that Federal or State monies, which may be received as a result of activities performed pursuant to this Agreement, shall not be used for the purpose of lobbying any branch of government, agency or employee of the Federal or State government.

[Balance of this page left intentionally blank;
attestations on page 8 of 8]

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

Heating Season (October 2008 - March 2009) Cooling Season (April 2009 - September 2009) **DATE STAMP ↑**

EXHIBIT A

APPLICANT'S CIVIL DATA:

Name: (Household member age 60 and older) Medicaid Number: Social Security Number/I.D.:

Consumer Type: Caregiver (C) Elder Recipient (E) Are you the caregiver of a live-in child or grandchild? Yes No

Physical Address: (Number and Street) City: State: **FLORIDA** ZIP: County:

Phone Number: Does the applicant reside in public housing? Yes No Application Date: Assessment Site: Home (CH) Provider (P) Other (O) Assessment by: EHPAEP (O)

Date of Birth: Sex: Female Male U.S. Citizen or Legal Resident? Yes No

RACE: White (W) Black (B) Native Am. (NA) Asian/Pacific (A) Other (O) Referral Source: CARES (C) APS (A) Lead Agency (L) Hospital (H) Self (S)
ETHNICITY: Hispanic (H) O - Other (O) Upstreaming/CARES (U) Other (O) Aging Out - DCF CCDA Aging Out - DCF HCDA
Primary Language: _____ If at Imminent Risk of NH placement, check: Imminent Risk (IM)
If transitioning out of a Nursing Home, check: Transition from NH (TRNI)
If APS, check level of risk: High (H) Moderate (M) Low (L)
Date of Referral: _____

Marital Status: Married* Single Does the applicant have a primary caregiver? Yes No Living Situation: With Caregiver With Other Alone Need outside assistance to evacuate? Yes No
**Couple's monthly income/assets are required* Registered with county special needs registry? Yes No

Applicant's Monthly Income: \$ _____ *Couple's Monthly Income: \$ _____ Receiving Food Stamps? Yes No

Household's Annual Income (from page 2) \$ _____ Estimated Total Individual Assets: \$0 - \$2,000 (M) \$2,001 - \$5,000 (N) Over \$5,000 (P)

INCLUDE DOCUMENTATION OF HOUSEHOLD INCOME OR SELF-DECLARATION IN THE APPLICANT'S FILE. *Estimated Total Couple Assets: \$0 - \$3,000 (M) \$3,001 - \$6,000 (N) Over \$6,000 (P)

Status: GOAH TRNE (check one) Eligibility Code: _____ Provider ID #: _____ Worker ID #: _____

Primary source of heating home: Electric Gas Fuel Oil Wood Kerosene Is there an individual with a disability in the household? Yes No Is there a child 5 years old or younger in the household? Yes No Number of household members who meet the citizenship/allen status requirements: _____

OTHER ELIGIBILITY DATA:

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

Name	ID	Age	DOB	Relationship To Applicant	Type Income*	Annual Income

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

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

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

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

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

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

7. I certify that I need the following to resolve my heating/cooling crisis:
a. Need to pay utility bill to continue: heating cooling
b. Need to repair: heating system cooling system
c. Need to pay deposit to turn on utilities for: cooling or heating
d. Need to purchase: space heater blanket A/C
 wood fuel oil fan other heating fuel

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

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

10. What is the primary source of energy you use to HEAT/COOL your home during the season for which you are applying? Choose one and provide the information below: Electric Natural Gas Propane Fuel Oil Wood Air Conditioning Fan Other - specify
Company Name Customer Name on Account Customer Account # Company's Telephone #

11. If not given in question 10, provide the following information about your electric company:
Company Name Customer Name on Account Customer Account # Company's Telephone #

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

Your Signature: _____ Date: _____ Caseworker: _____

EXHIBIT A

1. Household Income Computation - List sources and amounts of all household income.
 (Computation is not necessary if consumer automatically qualifies. Documentation must be attached.)

Gross Earned Income Source		Income per month:	Consumer automatically qualifies for EHEAP if:	Annual Income Limit* (150% poverty) by household size:
_____	\$ _____	_____	<input type="checkbox"/> Consumer has a home energy emergency, AND	1.\$16,245
_____	\$ _____	_____	<input type="checkbox"/> Receives Food Stamps, or	2.\$21,835
_____	\$ _____	_____	<input type="checkbox"/> Receives Supplemental Security Income, or	3.\$27,465
_____	\$ _____	_____	<input type="checkbox"/> Applied for Weatherization Assistance Program and is currently eligible, or	4.\$33,075
_____	\$ _____	_____	<input type="checkbox"/> Applied for Community Services Block Grant and is currently eligible	5.\$38,685
Gross Unearned Income Source:		Income per month:		6.\$44,295
_____	\$ _____	_____		7.\$49,905
_____	\$ _____	_____		8.\$55,515
_____	\$ _____	_____		

TOTAL \$ _____ Number of persons in household: _____

2. Show calculations below:

Total Gross Monthly Earned Income:	\$ _____		Annual Income Limit:	\$ _____
Total Gross Monthly Unearned Income:	+ \$ _____	Add in Medicare Premium if not included in SSA above (\$96.40). Also add in amount for Medicare Part D, if applicable		
Add Medicare Premium and/or Part D:	+ \$ _____			
Total Gross Monthly Income:	= \$ _____	(monthly x 12 = annual)		*Poverty Guidelines effective 1/23/2009
Total Gross Annualized Income:	\$ _____			

3. Income is at or below the income limit? Yes No If household income is less than 50% of the current Federal Poverty Guidelines for household size a year, and no one in the household is receiving Food Stamps, explain how basic living expenses (i.e., food, shelter, and transportation) are provided:

4. Date verified household has not received DCA LIHEAP Crisis Benefits: Contact Person: _____ Date: _____
 5. Is the applicant a homeowner? Yes No
 a. If yes, and the applicant and has received more than three LIHEAP or EHEAP payments within an 18-month period, has a referral been made to the WAP? Yes No If no or N/A, explain why: _____

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

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

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

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

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

c. \$ _____ EHEAP Benefit Amount	(Deduct the amount of the allowance for the period covered by the delinquent utility bill, from the total benefit amount, or indicate N/A)
- \$ _____ Deduct the Section 8 or public housing utility allowance	
+ \$ _____ Total EHEAP Benefit Amount (see 6d above)	

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

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

*Examples: Electricity, deposit, propane, fuel oil, wood, blanket, fan, repair to heating system, repair to cooling system, late fees/penalties.
 e. If over \$600, explain how excess cost will be met: _____

8. Resolution of Energy Emergency:

a. Case Approved (check one) Yes No Date: _____

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

c. Was the 18/48 hour rule met? Yes No d. Written notification sent to applicant? Yes No

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

PLACE COPY OF APPROPRIATE NOTICE IN THE APPLICANT'S FILE.

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

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

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

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

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

EHEAP TECHNICAL ASSISTANCE - 2009

PURPOSE of the Program:

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

TABLE OF CONTENTS

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

Sections are arranged in alphabetical order:

Acronyms	page 1
Application	pages 2-6
Date Stamp	page 6
Eligibility	pages 7-9
Food Stamps	pages 9-10
Income Calculation	pages 10-12
Income Type/Other Income/Other Documentation	page 12-13
Prioritization/Use of Funds	pages 13-16
Records	page 16-17

ACRONYMS

The following acronyms are used with this material:

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

APPLICATION:

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

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

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

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

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

Social Security numbers are not required and the Social Security card should not be copied. Pseudo IDs can be created as your agency does for other programs. However, the applicant will still need to provide identification and proof of income. All household members and their income must also be listed. Verification of identification can be documented by viewing the Social Security card as a last resort when no other forms of identification are available. A birth certificate can be used for children. Copy the forms of identification such as the driver's license for the applicant and each household member and place them in the applicant's file.

NOTE: Assessors must inform all applicants that their SSN is confidential under law and disclosure of their SSN is voluntary. To comply with section 119.071(5), F.S., assessors must provide in writing to each applicant the reason the SSN is being collected and explain the use of the SSN to determine benefits or services, including federal benefits, that may be appropriate for the applicant.

3. Can we serve aliens?

The provider cannot serve an illegal alien. To be eligible for EHEAP, the applicant must be a citizen of the United States, or an alien who is eligible for federal benefits. This does not include illegal aliens, aliens with temporary admittance status such as visitors, students, or refugees waiting assignment of official status by the Immigration and Naturalization Service (INS). To be eligible for EHEAP, the applicant must be a legal resident. If there is a legal citizen in the household, then the household is eligible to be screened for EHEAP. It is the provider's responsibility to verify citizenship.

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

If the applicant is not on Food Stamps and we mark "no" at the top of the application and then on #5 we check that the applicant is eligible, will there need to be any documentation on the application?

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

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

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

The purpose of the question is to establish automatic EHEAP eligibility based upon current eligibility for Food Stamps, Supplemental Security Income (SSI), the Weatherization Assistance Program (WAP), or the Community Services Block Grant (CSBG). The applicant would have to provide documentation of the eligibility, including proof of age and documentation proving an obligation to pay for home energy costs. If the applicant is not establishing EHEAP eligibility based upon one of these programs, mark "none of these." For Food Stamps, an approval letter is required, not just a copy of the Food Stamps card. Food Stamps eligibility is based on anyone living in the household, not just the applicant. The elder is eligible based on the Food Stamps eligibility of anyone living in the household.

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

Do we list Low Income Emergency Assistance Program (LIHEAP) assistance and EHEAP assistance provided through other agencies for this time period?

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

7. Question #7 - page 1 (I certify that I need the following to resolve my heating/cooling crisis:
- a. Need to pay utility bill to continue: heating or cooling
 - b. Need to repair: heating system or cooling system
 - c. Need to pay deposit to turn on utilities for: cooling or heating
 - d. Need to purchase: space heater, blanket, wood, fuel oil, other heating fuel, A/C, fan)

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

EXHIBIT B

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

- 7a. Question #3 – page 2: (If household income is less than 50 percent of the Federal Poverty Level for household size a year, explain how food, shelter, clothing, transportation and home utilities are purchased.)

Does this question have to be answered for all applicants?

Yes, if the applicant's annual income is less than 50 percent of the current Federal Poverty Level for household size and does not receive Food Stamps, document how food basic living expenses (i.e., food, shelter and transportation) are provided.

8. Question #4 – page 2: (Date verified household has not received Department of Community Affairs (DCA) LIHEAP Crisis Benefits.)

Why is the LIHEAP provider contacted?

The LIHEAP provider must be contacted as a part of the eligibility process to ensure LIHEAP crisis assistance was not received.

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

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

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

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

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

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

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

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

EXHIBIT B

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

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

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

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

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

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

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

If amount due is over \$600, provide documentation indicating how excess cost will be met, i.e., the applicant, a church, or other community organization will pay. If the excess amount due cannot be met and the crisis resolved, then you must deny the application.

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

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

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

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

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

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

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

EXHIBIT B

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

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

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

When the applicant is not in a life-threatening situation, the EHEAP provider must take actions that will resolve an emergency within 48 hours of the application approval for a crisis benefit. When the applicant is in a life-threatening situation, the EHEAP provider must take actions that will resolve an emergency within 18 hours of the application approval for a crisis benefit. When you authorize payment to the utility company, you have prevented disconnect and “resolved” the crisis. “Payment” is not expected to be made within the 18/48 hours. “Resolution” of the crisis is made within 18/48 hours.

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

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

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

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

DATE STAMP:

20. This should not apply since we do not receive applications through the mail.

No distinction is made for face-to-face applications. See #21 below.

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

The application is date stamped to document when it is first received at the provider agency. A hand written date stamp is acceptable, but not preferable. The 18 and 48 hours for crisis resolution begins when the application has been signed and approved by the provider (all required documentation received and eligibility established). The worker’s signature and date indicating the applicant has been determined eligible will reflect the date approved by the provider (EHEAP Application, page 2; Caseworker Signature Block).

ELIGIBILITY:

22. What are the eligibility criteria?

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

23. What is a heating home energy emergency?

- **The source of heat was cut off.**
- **The household has been notified that the energy source of heat is going to be cut off.**
- **The household has received a notice indicating the energy source is delinquent or past due;**
- **The household is unable to get delivery of heating fuel, is out of heating fuel, or is in imminent danger of being out of heating fuel.**
- **The household has other problems such as lack of a usable heating source.**

24. What is a cooling home energy emergency?

- **The household's home cooling energy source has been cut off.**
- **The household has been notified that the energy source of cooling is going to be cut off.**
- **The household has received a notice indicating the energy source is delinquent or past due;**
- **The household has other problems with lack of cooling in the home.**

25. How is a heating/cooling emergency verified?

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

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

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

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

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

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

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

These procedures should also be incorporated into vendor agreements.

26. How is eligibility verified?

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

27. Who is ineligible?

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

27a. Who is partially eligible?

- Applicants who live in government subsidized housing projects that receive an energy allowance or subsidy during the period covered by the utility bill are only eligible for partial assistance. The energy allowance or subsidy must be subtracted from the allowable EHEAP benefit calculated for the household. The housing allowance must have been paid directly to the client or directly to the utility vendor. This would be an actual cash benefit, not an offset of rent or utilities.
EXAMPLE: If a client comes in with a bill that is three months delinquent and they receive \$50.00 a month allowance via a check or paid directly to the utility vendor, then the allowance to be deducted from the EHEAP benefit would be \$150.00 (\$50.00 a month x three months (delinquent bill time period)).

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

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

27c. I have received an application from a consumer and the account provides only a P.O. Box number. I called to obtain a physical address to cross-reference to the resident's address given on the application, but was told that there is none in the records, and they go by

EXHIBIT B

what is called a "pole location" for meter readings; a physical address is not required of the customer.

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

28. Who is the applicant?

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

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

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

FOOD STAMPS:

29. Does there need to be any sort of documentation in the file regarding Food Stamps?

Yes, applicants receiving Food Stamps, Supplemental Security Income (SSI), (or who have applied and are eligible for Weatherization Assistance Program (WAP) and Community Services Block Grant (CSBG) funds) automatically qualify for EHEAP. There must be documentation in the file to reflect eligibility, and this must be documented on the application. For Food Stamps, a current approval letter is required, not just a copy of the Food Stamps card. Food Stamps eligibility is based on anyone living in the household, not just the applicant. These applicants still must provide proof of age, have a verifiable home energy crisis and not have received a LIHEAP crisis benefit during the season. You can print verification of Food Stamps eligibility in ACCESS.

30. If written documentation is required and the applicant fails to bring in notice of decision, etc., do we deny the application and give notice of denial for failure to provide information and reschedule an appointment for another day?

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

NOTE: Applicants automatically qualifying for EHEAP based upon Food Stamps, Supplemental Security Income (SSI), WAP or CSBG eligibility must also provide a shut-off/delinquent notice or documentation proving an obligation to pay for home energy costs.

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

EXHIBIT B

Income verification should reflect the current economic situation, or in the SSA case, the most recent letter from SSA.

32. What if the household is on Food Stamps but is over on income? (This may occur when there are several members in the household.)

Any applicant who documents current eligibility for Food Stamps is automatically qualified for EHEAP. Information about household income is obtained to enter into the Client Information and Registration Tracking System (CIRTS), but is not the basis for the eligibility decision.

33. When the basis of income eligibility is Food Stamps, SSI, WAP or CSBG, what parts of application question #1, income on the front and questions #1, 2 and 3 on the back must be completed? Is it sufficient to enter the household annual income in the CIRTS portion of the application and omit all other income references?

None of these income questions need to be answered when eligibility is based on Food Stamps, SSI, WAP or CSBG.

INCOME CALCULATION:

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

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

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

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

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

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

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

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

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

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

EXHIBIT B

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

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

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

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

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

All information for each member of the household should be listed (Name, ID, Age, DOB, Relationship). Income would be listed as "0." A self-declaration form is completed by the applicant attesting to "0" income for the adult household member(s).

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

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

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

41. Do we look at assets when determining eligibility?

Assets are not required for determining EHEAP eligibility. Estimated assets are requested on the Department's EHEAP application. This information is to be entered in CIRTS. Assets are requested to screen for Medicaid waiver eligibility.

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

Social Security cards are not required. Proof of income is required for all household members and must be placed in the applicant's file.

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

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

EXHIBIT B

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

If Medicare Part D is taken out, then it must be added back in as it is to be used in calculating the income (the gross amount before any deductions, including taxes, Social Security, Medicare, etc.). This must be documented even if the income amount is under the annual income limit by household size.

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

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

INCOME TYPE/OTHER INCOME/OTHER DOCUMENTATION:

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

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

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

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

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

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

However, "regular support from a family member or someone not living in the household is allowable" (countable). "Regular gifts" must be reported in #1, page 2 of the EHEAP Application.

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

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

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

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

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

Income documentation is required for all households applying for assistance with utility bills, fans, heaters, repairs, etc., unless there is documentation they receive Food Stamps, etc.

48a. What other documentation is required?

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

PRIORITIZATION/USE OF FUNDS:

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

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

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

Owners and renters must be treated equitably according to the EHEAP Contract, Attachment I, Paragraph 2.1.3.2. If the applicant is in crisis without A/C, then it is acceptable. You should first have documentation of attempts to have the landlord repair the equipment. If this is not successful, have the landlord's permission in writing to repair/install the equipment for the file. The equipment must be repaired/installed by someone licensed to do so. You must also ensure the 18/48 hour time frame is met.

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

The 2009 – 2010 EHEAP contract, Attachment I, Section II, 2.1.4.8 states: "Developing adequate procedures to ensure EHEAP funds are appropriately budgeted and expended to permit payment of energy assistance benefits in both the heating and cooling seasons. Procedures should include referral to other community agencies when funds budgeted for a particular time period are exhausted and consumers are subsequently denied."

We do not advocate limiting funds to one benefit per year; however, the decision to do so would be made at the local level on an individual provider basis.

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

As long as you are able to follow it consistently, you have the authority to set the policy. The 2009 – 2010 EHEAP contract, Attachment I, 2.1.4.6 states: "Making payments on behalf of those consumers with the highest home energy needs and the lowest household income, which will be determined by taking into account both the energy burden and the unique situation of such households that result from having members of vulnerable population, including very young children, the disabled and frail older individuals."

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

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

51b. Section 2.1.4.4. of the 2009 – 2010 EHEAP requires “Having a written policy that encourages households to seek assistance prior to incurring non-energy penalties such as disconnect/reconnect fees, additional deposits, interest or late payments.” How are we supposed to do this if we have to wait until we have a shut-off/delinquent notice? The applicant is already near the point of having to pay re-connection fees.

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

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

See response to 51b.

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

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

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

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

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

Repairs that have already been completed at the time of the application cannot be reimbursed using EHEAP funds.

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

The agency may pay for repair equipment or systems required to assure that heating or cooling is restored up to the crisis dollar limit. This could include repairing the line to the house, the weather-head, wiring, etc. In the case of propane, this would include

repairs to the lines or tank. The agency needs to make sure that the damage is on the client's side of the line thus the client's responsibility, not that of the utility company. The agency must also obtain permission from the owner to make repairs, ensure repairs are performed by a licensed contractor and ensure repairs are performed in accordance with local codes.

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

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

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

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

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

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

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

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

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

The 2009 – 2010 EHEAP contract, Attachment I, Section II, 2.1.2.4, #3 states "Only energy related elements of a utility bill are to be paid. In no instance may water and sewage charges be paid except if required by the vendor under the crisis category to meet the requirement of resolving the crisis. Vendors must be made aware that those charges are the responsibility of the consumer."

The contractor should establish those procedures in vendor agreements.

58. Is LIHEAP part of CSBG funding?

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

59. How are CSBG, WAP, SSI and Food Stamps related to EHEAP benefits?

If an applicant is currently eligible for or is receiving support from CSBG (Community Services Block Grant), WAP (Weatherization Assistance Program), Supplemental Security Income (SSI) or Food Stamps, AND HAS A HOME ENERGY EMERGENCY, he/she automatically qualifies for EHEAP benefits. The applicant cannot have received a LIHEAP crisis benefit during the season for which he/she is applying under EHEAP.

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

The 2009 – 2010 EHEAP contract, Attachment I, Section II, 2.1.2.2 states “The contractor, in coordination with the local WAP agency, shall develop a system by which EHEAP applicants who have received more than three EHEAP and LIHEAP benefits in the last 18 months and who are homeowners are referred to a WAP provider. The contractor will maintain copies of all MOUs in each subcontractor’s contract file.”

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

In addition, the provider should coordinate services with the Department of Community Affairs’ LIHEAP Recipients in the local service area to prevent the duplication of benefits to applicants and ensure LIHEAP benefits are fully utilized.

RECORDS:

The 2009 – 2010 EHEAP contract, Attachment I, Section II, 2.3.3 states:

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

- **Application for Emergency Home Energy Assistance for the Elderly, DOEA Form 114, completed by the contractor and the consumer. The application must also be signed by a supervisor prior to payment being made. The contractor is responsible for using the most recent application issued by the Department through the Notice of Instruction process.**
- **Names, ages and identification documentation of all household members.**
- **Income amount and method of verification for all household members.**
- **Age and income documentation to support eligibility.**
- **Statement of self-declaration of income, if applicable.**
- **Statement of how basic living expenses (i.e., food, shelter, and transportation) are being provided if household income is less than 50 percent of the current Federal Poverty Guidelines and no one in the household is receiving Food Stamps.**
- **Documentation of consumer’s obligation to pay an energy bill.**
- **Services provided, including copies of utility bills, copies of bills for fans, heaters, or blankets purchased or copies of repair bills.**
- **Copies of approval or denial letters provided to the applicant.**
- **If preference is given due to a disability, documentation of such, i.e., disability income or physician’s statement.**
- **Documentation of referrals to LIHEAP, CSBG and WAP.**

EXHIBIT B

- **Documentation of payment made to vendors; and**
- **Documentation of calculation of benefits for consumers living in subsidized housing.**

Reviewed and approved by Department of Community Affairs, 7/7/2008