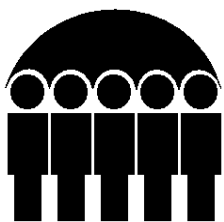


Revised October 9, 2009

Employees' Manual  
Title 4  
Chapter B

# **FAMILY INVESTMENT PROGRAM**

# **APPLICATION PROCESSING**



Iowa  
Department  
of  
Human Services

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## **Overview**

When a person submits a valid application for Family Investment Program (FIP) assistance, the Department of Human Services income maintenance (IM) worker begins processing the application. This chapter describes that process, including:

- ◆ Interviewing.
- ◆ Determining the household's reporting requirements.
- ◆ Verification.
- ◆ Deadlines for approving or denying an application.

## **Legal Basis**

The legal basis for these policies and procedures is found in:

- ◆ Title IV-A of the Social Security Act,
- ◆ Iowa Code Chapter 239B, and
- ◆ 441 Iowa Administrative Code, Chapters 40 and 41.

## **Filing a FIP Application**

**Legal reference:** 441 IAC 40.22(239B)

Any person has the right to apply for assistance without delay. An application for FIP must be submitted on form 470-0462 or 470-0462(S), *Health and Financial Support Application*. The application can be submitted in person, by mail, by fax, or electronically. Applications that are filed electronically or that are signed and then faxed or scanned and e-mailed do not have to be signed again.

Give an application to a person immediately upon request. If asked, mail an application in the next outgoing mail. With the application, give or mail:

- ◆ *Voter Registration* form.
- ◆ Comm. 51, *Information Practices*.

The parent must make the application if the parent:

- ◆ Is in the home with the child, and
- ◆ Is not prevented from acting as payee because of physical or mental impairment.

Document in the case record the impairment that prevents the parent from acting as payee. The impairment must prevent the parent from assuming the responsibility for making the day-to-day decisions regarding the welfare of the child.

Other people may help an applicant apply for assistance. They may represent the applicant in contacts with the Department when accompanied by the applicant. Accept an application from someone acting on behalf of the applicant.

The application must contain a legible name and address. It must be signed:

- ◆ By the applicant,
- ◆ By the applicant's authorized representative, or
- ◆ When the applicant is incompetent or incapacitated, by someone acting responsibly on the applicant's behalf.

When both parents or both a parent and stepparent are in the home, either parent or stepparent may sign the application. When a minor parent lives with a self-supporting parent and applies for FIP, only the minor parent is required to sign the application.

When FIP is canceled or denied because of a Department error, a new application is not required to redetermine eligibility for ongoing assistance or to issue retroactive corrective benefits.

See 4-G, [Changes in Household Circumstances](#), for information on procedures to use when adding a person to an active case.

Families that are subject to the 60-month limit cannot receive FIP beyond that period unless they are determined eligible for a hardship exemption. Check the Eligibility Tracking System (ETS) when a family applies for FIP to determine the status of the family's 60-month FIP period.

Families that have received FIP for 60 months must file form 470-3826, *Request for FIP Beyond 60 Months*, and be determined eligible for a hardship exemption to receive FIP beyond the 60-month limit. Families that are no longer on FIP must also file a *Health and Financial Support Application*, form 470-0462 or 470-0462(S), to regain FIP eligibility.

Issue form 470-3826 to families that have received FIP for at least 58 months. Also issue the form upon the family's request. Provide a return envelope.

The date of the hardship exemption request is the date a valid form 470-3826 is received in any office of the Department or PROMISE JOBS. To be valid, the form must contain a legible name and address and must be signed by an "adult" in the family.

Refer to 4-C, [HARDSHIP EXEMPTION](#), for application procedures and signature requirements specific to families that have exhausted their 60-month FIP period and that are requesting a hardship exemption.

### **Date of Application**

**Legal reference:** 441 IAC 40.23(239B)

| The date of application is the date the form 470-0462 or 470-0462(S), *Health and Financial Support Application*, is received:

- ◆ In **any** Department office. NOTE: Applications received by the Department at a time when the office is open are date-stamped with the same date on which the application is received. Applications left at a closed office or received electronically outside of work hours are date-stamped with the date of the next working day for full-time Department offices.

County A has a less-than-full-time office that is open on Monday and Wednesday. The office was last open Wednesday, April 24. When the office reopens on the following Monday, the staff find applications left under the door. All applications are date stamped as received Thursday, April 25.

- ◆ By an IM worker housed in an outstationing facility. (An outstationing facility can be any disproportionate-share hospital, federally qualified health center, or other facility providing outstationing services.)
- ◆ By a designated worker in an outstationing facility when the applicant does not request Food Assistance. These workers will then forward the application to the Department.

The date of application is important because it is used to establish the eligibility date for benefits. To establish an application date, the applicant is required only to indicate name and address and sign the form.

An application that is faxed or is scanned and then e-mailed is acceptable and will protect the application date. Applications that are signed and then faxed or scanned and e-mailed do not have to be resigned.

When an application is received in an office other than the one responsible for processing it, date-stamp the application with the date of receipt and forwards it to the appropriate office no later than the next working day. The office that processes the application will enter the initial date of receipt on form 470-0554, *Application Register*.

A household may not check all the programs on the *Health and Financial Support Application* for which it wants to apply. If the applicant asks to apply for additional programs during the interview, or before you take action on the application, allow the applicant to check the applicable box.

The filing date for any additional program is the same date as the filing date for the programs that were initially checked on the application form.

EXCEPTION: When the applicant files a different application form, such as form 470-0306 or 470-0307, *Application for Food Assistance*, and during the interview decides to apply for FIP, the applicant must file a *Health and Financial Support Application* to be considered for FIP. The date you get the *Health and Financial Support Application* is the date of application for FIP.

### **Applications for Public Health Services**

A FIP applicant who wishes to apply for prenatal care or well-child care through the Department of Public Health may do this on the *Health and Financial Support Application*, form 470-0462 or form 470-0462(S).

When the applicant signs the release on page 1 of the application, forward copies of the pink and blue sections, Parts A and D, to the public health office that provides these services for the applicant's county of residence.

Forward these pages within two working days of the date you receive the *Health and Financial Support Application*. See [6-Appendix](#) instructions for the *Health and Financial Support Application* for a list of the applicable agencies in each county.

### **Applications Received in Outstationing Facilities**

**Legal reference:** 441 IAC 40.23(239)

The date an IM worker assigned to an outstationing facility receives an application is the date of application for all programs (regardless of whether the applicant wants Food Assistance). The IM worker conducts the interview and determines eligibility before forwarding the application to the appropriate local office.

When a designated worker in an outstationing facility receives an application and the applicant does not request Food Assistance:

- ◆ The date of application is the date the worker receives the application.
- ◆ The designated worker conducts the interview before forwarding the application to the appropriate local office.
- ◆ The IM worker in the local office is responsible for making the eligibility determination.

When a designated worker in an outstationing facility receives an application and the applicant requests Food Assistance:

- ◆ The application is not date-stamped.
- ◆ The designated worker verifies the client's identity, if possible, and faxes the application and the verification of identity to the appropriate local office the same business day. (The applicant may take the application to the local office instead.)
- ◆ The date of the application for all programs is the date the local office receives the application.

When the client does not request Food Assistance until later (for example, during the interview), the designated worker faxes the application to the local office on the same business day. (The applicant may take the application to the office instead.) The date of application for all programs is the date the local office receives the form.

If the client requests Food Assistance after the FIP interview, the designated worker refers the client to the local office to apply for Food Assistance.

### **When an Applicant Has a Guardian or Conservator**

**Legal reference:** 441 IAC 40.22(2)

Before determining eligibility for an applicant that has a guardian or conservator, obtain and file a copy of the court order establishing the guardianship or conservatorship.

When an application is filed by a parent or relative who is already under court-ordered conservatorship or guardianship, the conservator or guardian as well as the applicant must sign the application and participate in the application process.

### **Interviews**

**Legal reference:** 441 IAC 40.22(2), 40.24(2)

#### **Policy:**

An interview must be held before FIP is approved. The interview may be by telephone or face-to-face. EXCEPTION: An interview is not required when adding an individual to an existing eligible group. An interview may be held at the client's home, at the client's request.

Persons attending the interview may include:

- ◆ The applicant (either parent in a two-parent case).
- ◆ The applicant's legal guardian or conservator.
- ◆ Someone acting on the applicant's behalf because the applicant is mentally or physically unable to attend the interview.

#### **Procedure:**

Schedule and hold an interview before FIP is approved.

- ◆ Schedule a telephone or face-to-face interview for each FIP application.
- ◆ Grant requests to reschedule an interview when the client is making every effort to cooperate with the interview process.
- ◆ Deny the application if the client fails to attend or reschedule a required telephone or face-to-face interview.

- ◆ Give the client specific written instructions when additional information or verification is needed to establish eligibility. Include in the instructions:
  - The date the information is due and
  - The consequences for not providing requested information or verification by the due date.

See [Verification](#) later in this chapter for instructions on requesting information or verification.

### **Conducting an Interview**

#### **Procedure:**

At the telephone or face-to-face interview:

- ◆ Review the information on the application form.
  - Resolve any unclear, inconsistent, or incomplete information with the household.
  - Ask if there have been any changes between the application date and the interview.
  - Request any necessary information or verification.
- ◆ Review the following information:
  - The household's rights and responsibilities.
  - The factors considered in determining eligibility.
  - The verification that is required.
  - The requirement to report changes. See [Household Reporting Requirements](#).
  - The requirement to apply for and accept other benefits for which the client is eligible. See 4-C, [Benefits From Other Sources](#).
  - Prospective budgeting.

- ◆ Explain the requirement to cooperate with child support recovery, including:
  - The assignment of rights to child support.
  - The good cause provisions.

Give or send the client a copy of form 470-0169 or 470-0169(S), *Requirements of Support Enforcement*, and document this in the case record.

- ◆ For applicants who appear to be eligible for FIP and not exempt from PROMISE JOBS requirements:
  - Provide an overview of the PROMISE JOBS program by using InfoShare or otherwise providing the information.
  - Explain the requirement to meet with PROMISE JOBS and sign a family investment agreement (FIA) before FIP can be approved.
  - Schedule the PROMISE JOBS appointment. See 4-J, [REFERRING CLIENTS TO PROMISE JOBS](#).
  - Provide a copy of form 470-0806 or 470-0806(S), *Self-Assessment*.
  - For applicants in a limited benefit plan, explain the actions the applicant must take with PROMISE JOBS before FIP can be approved.
- ◆ Explain the 60-month limit on FIP assistance.
  - Issue Comm. 137, *60-Month Limit on FIP*.
  - Issue form 470-3851, *Important Information About Your FIP*.
  - For families who have received 58 or more months of assistance, issue form 470-3826, *Request for FIP Beyond 60 Months*. Explain the hardship provisions.

- ◆ Discuss the options for receiving payment with each FIP applicant:
  - If the applicant requests direct deposit, explain that the initial payments may be issued by electronic access card (EAC) until the direct deposit can start.
  - If the payee does not have a social security number, explain that payments will be made by warrant.
  - If the payee will not be the case name (head of household), explain that payments will be made by warrant unless the payee chooses direct deposit.
  - If none of the previous three bullets apply, explain that payments will be made by electronic access card. Consider and do the following:
    - If it is a two-parent case, explain that only one card will be issued for the household, in the name of the parent who is the case name.
    - Provide a copy of Comm. 377, *Electronic Access Card*.
    - If the case name individual has a "blank" in the EAC indicator field on ABC system's TD03 screen indicating that they have never had an EAC account, explain that if FIP is approved, an electronic access card will be mailed to them. It is important that they keep the card and read the materials that tell them how to use it and especially how to avoid fees.
    - If the case name individual has a "Y" in the EAC indicator field on ABC system's TD03 screen, ask if they still have their FIP EAC card. If they still have it, they will be able to use that card to get their FIP benefits when FIP is approved. If they do not have their FIP card, or if their old card is past the expiration date printed on the front of the card, explain that they will have to call the ACS Customer Service Center at 1-866-899-5611, to request a replacement card.
    - Explain that it is important to report promptly if their address changes before receiving the EAC card. EAC cards cannot be forwarded by the post office. If the card is mailed to the wrong address, the client will have to call the ACS Customer Service Center to report that they did not receive the card and request a new card.
    - Explain that they should keep their card even if they leave FIP or begin getting FIP by direct deposit or warrant, because they will be able to use the same card if they begin getting benefits by EAC again in the future.

- ◆ Provide the following pamphlets, as appropriate to the family's situation:
  - Comm. 108, *The Family Investment Program (FIP)*.
  - Comm. 132 or Comm. 132(S), *Family Planning Counseling*.
  - Comm. 133 or Comm. 133(S), *FIP for Minor Parents*. Provide the pamphlet and explain minor parent provisions if the applicant is a minor parent.
  - Comm. 24, *One-Time Payments*. Provide the pamphlet and explain lump-sum policies if the applicant has received or expects to receive a nonrecurring lump sum.
  - Comm. 233 or Comm. 233(S), *Rights and Responsibilities*. Provide the pamphlet if the applicant has questions about their rights and responsibilities.
  - Comm. 62 or Comm. 62(S), *Child Care Assistance*, if the family has questions about child care assistance.
  - Iowa WIC (Special Supplemental Nutrition Program for Women, Infants and Children) Program Income Guidelines. The Department of Public Health revises the WIC flyer annually in March to incorporate updated WIC income guidelines. Supplies of the WIC flyer are available by calling the following: 1-800-532-1579.

### **Voter Registration Procedures During the Interview**

**Legal reference:** 721 IAC Chapter 23

#### **Policy:**

The Department is responsible for helping clients complete voter registration forms and for mailing the forms to the county election office. The opportunity to register to vote is offered at the time of application and review and when a client reports moving to a new address within Iowa.

#### **Procedure:**

- ◆ Issue a copy of the *Voter Registration* form:
  - With each application and *Review/Recertification Eligibility Document* and
  - When the client moves within Iowa.
- ◆ At each interview, ask if the client wants to register to vote.

- ◆ If the client has not filled out the *Voter Registration* form before the interview, have the client complete the form at the interview.
  - If the interview is by telephone and the form is not complete, ask the questions and send the form to the client for signature. No follow-up is necessary after the form has been mailed to the client.
  - If the client wants to register, offer to help complete the form. Be careful that you do not influence the client's voter registration options in any way. Review the client's rights as listed on the form.
  - If the client chooses not to check "yes" or "no," leave the section blank and consider the client has chosen not to register to vote.
  - If the client chooses not to sign the form, print the client's name and the date where indicated, and initial the form.
- ◆ If the form is completed:
  - Tear off the information section and give it to the client.
  - Keep the declination form, and file it following the instructions in 6-Appendix.
  - If the client chooses to register to vote, send the completed registration form to the county election office following the instructions in 6-Appendix. The actual voter registration occurs at the election office.

### **Household Reporting Requirements**

**Legal reference:** 441 IAC 40.27(1)"a," 40.27(4)"e" and "f"

All applicant households must report changes at the interview and thereafter within five calendar days of the date the change occurred.

All participant households must report changes within ten days of the occurrence.

Day one of either reporting period is the day after the change occurred. If the last day of the reporting period falls on a weekend or holiday, extend the time limit to the next working day with regular mail service.

Both applicant and participant households are required to report the following changes:

- ◆ Changes in mailing or living address.
- ◆ Changes in household membership.
- ◆ Changes in school attendance of a child.
- ◆ Receipt of a social security number.
- ◆ Changes in resources.
- ◆ Beginning or ending income. This includes beginning or ending employment or unearned income or receipt of a nonrecurring lump sum.

### **Verification**

**Legal reference:** 441 IAC 40.24(239B), 40.27(4)

Unless verification is specifically required, accept clients' statements on applications and review forms if the information appears to be accurate and consistent with other information. Use the "prudent person" concept when evaluating verification. See [4-A](#) for a definition of prudent person.

Give the client specific written instructions when additional information or verification is needed to establish eligibility. Include in the instructions the date the information is due and the consequences for failure to supply the information. "Supply" means the requested information or verification is received by the Department by the specified due date.

Allow the client ten days to supply the information. The ten-day period begins with the day after you issue the written request.

The client is responsible for getting the requested information or verification or signing a release to authorize you to get it. A client who provides a signed release to a specific individual or organization for specific information has met the requirement for supplying requested information or verification.

Extend the deadline when the client requests an extension because the client is making every reasonable effort to get the information but has been unable to do so. Help the client to get requested verification as needed. (See [Processing Standards](#) later in this chapter for information on what to do if the client does not meet the deadline.)

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When the due date given a client for reporting information or supplying verification falls on a weekend or legal holiday, extend the due date to the next working day for which there is regular mail service. This applies to:

- ◆ The ten-day period for supplying additional information or verification needed to establish eligibility.
- ◆ The period allowed for an applicant or participant to timely report changes.
- ◆ The ten-day period allowed for reporting a change in exempt PROMISE JOBS referral status.
- ◆ The 20-day period allowed the client to provide evidence to document good cause for failure to cooperate with the Child Support Recovery Unit.

EXCEPTION: If the client is required to report or supply information by the end of the report month and the last day of that month falls on a weekend or legal holiday, the due date is the last working day of the report month. Do not extend the report month. Also see 4-G, [Effective Date of Adjustment](#).

The client must report changes to the Department. The client's report to PROMISE JOBS does not fulfill the reporting requirement. Although PROMISE JOBS staff are under contract with the Department, they are **not** considered employees of the Department.

See 4-C, [HARDSHIP EXEMPTION](#), for procedures for obtaining hardship evidence from families that are applying for FIP beyond the 60-month limit.

Examples of situations in which you should check further are:

- ◆ Living expenses are greater than income. This is the strongest indicator of possible ineligibility or overpayment. Three possible explanations are:
  - The client is not paying all expenses.
  - The client is concealing something that will not affect the case (for example, shared living arrangement, companion in the home, unearned income in kind).
  - The client is concealing something that will affect the case (for example, resources, income, or the presence of a parent or stepparent in the home). The client may also have exaggerated shelter expenses to receive more Food Assistance benefits.

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Since most FIP cases also receive Food Assistance, you probably already verified the household's shelter expenses and already have general knowledge of the family's expenses. However, clients often have expenses besides shelter costs, such as car payments or insurance, credit cards, or life insurance.

Whenever known expenses are close to reported income, you must consider whether the household is likely to have other expenses that cause total expenses to exceed income. You cannot deny or cancel a case simply because expenses exceed income. There must be another reason for the action.

- ◆ The client's circumstances indicate potential resources, such as medical insurance, sick leave benefits, or eligibility for OASDI, veteran's benefits, or unemployment compensation.
- ◆ Property or cash holdings are at or near limits.
- ◆ The person's condition indicates that verification of some or all eligibility factors is necessary, such as when the person:
  - Appears to be mentally confused;
  - Has a known history of misrepresentation;
  - Is a transient who has no permanent address or moves frequently; or
  - Is physically ill or disabled and cannot adequately participate in the eligibility determination process.

### **Suggested Procedure for Reviewing Questionable Information**

Clients are usually able to select the most likely sources of information about themselves. When you require further verification, the client must supply evidence to document information provided.

If the client is unwilling to get the required information or to help you make the necessary inquiries, explain that you are unable to approve assistance because you cannot establish eligibility. When the client cannot clarify the situation, then you should attempt to obtain the verification.

1. Compare the client's known expenses with income. Count the amount of Food Assistance the client receives as income. Find the maximum Food Assistance allotment for the client's family size and count that as an expense. (See 7-F, [Calculating Benefit Level](#), for a chart showing the maximum allotments.)

2. Review the case record for indications of income and resources that may not have been acted upon (complaints, IEVS reports, etc.).
3. Discuss the problem with the client. If the client has a plausible explanation or has solved the problem, document this in the case record. Review the case in a month to ensure that the problem was resolved.
4. If the client does not have a plausible explanation or the problem continues, refer the case to Front-End Investigations or investigate the case yourself. In the latter case, write to the client to schedule an interview.

Here is an example of a letter you might send to schedule an interview:

Dear:

While following up on our earlier contact, I found that your family's expenses seem to be greater than your income. Since this indicates that you may have income or resources that you have not reported, you must explain how you are paying your expenses.

I have made an appointment for you to come in and talk to me about this at ( ). Please bring these with you:

- ◆ Rent and utility bills and payment receipts for the last ( ) months.
- ◆ ( ) bills and payment receipts for the last ( ) months.
- ◆ Your bank statements and checkbook records for the last ( ) months showing the deposits and withdrawals that have occurred on your account.
- ◆ (Other items that the worker believes are appropriate.)

You must appear for your appointment or reschedule the interview. You must bring all of these items with you. If you do not, your FIP, Food Assistance, and Medicaid benefits will be (denied/canceled).

Allow the client at least ten days before the interview date to obtain the requested information.

5. If the client does provide the data, determine if the client is paying all expenses. If expenses are in line with income, the issue is resolved. If not, ask the client to describe how such payments are possible with existing income.

## **Processing Standards**

**Legal reference:** 441 IAC 40.25(239B)

### **Policy:**

A decision to approve or deny an application shall be made as soon as possible, but no later than 30 days after the date the application is filed. The 30-day period may be extended in unusual circumstances. A written notice of decision shall be issued the next working day following the decision to approve or deny.

### **Procedure:**

Approve or deny each application unless the applicant:

- ◆ Dies or cannot be located. Document this in the case record.
- ◆ Voluntarily withdraws the application. Issue a *Notice of Decision* documenting the withdrawal and file a copy in the case record.

Process applications on the earliest possible date. Do not use the 30-day limit as a waiting period before approving the application or as a basis for denial of the application.

Day one of the 30-day processing period is the calendar day after the date of application. Determine eligibility and issue a written notice of decision by making system entries no later than the 30<sup>th</sup> day following the date of application. If the 30<sup>th</sup> day falls on a weekend or holiday, process the application by making system entries the next working day.

You can extend the 30-day limit if:

- ◆ You and the applicant have made every reasonable effort to get information that has not arrived.
- ◆ Emergencies, such as fire, flood, or other conditions beyond control of the local office, delay action.
- ◆ Eligibility is dependent on the birth of a child. You may hold the application for an additional 30 days or slightly longer if the birth appears imminent at the end of the first 30 days. (See [Effective Date of Assistance](#) for more information.)

If the client does not attend a scheduled interview and does not contact the office to reschedule, deny the application.

If the client fails or refuses to provide requested information, deny the application.

If you cannot establish eligibility within the 30-day limit due to local office error, approve the application pending the eligibility determination. After the eligibility determination, issue a corrective payment or recoup the excess amount of assistance paid, if applicable.

Do not deny an application based on presumptive eligibility. If it appears that eligibility does not exist, delay processing of the application until you receive all information you need to make the eligibility determination, even if the delay exceeds the 30-day period.

Determine eligibility on the date information is successfully entered into the system. If the applicant is eligible on that date, approve assistance even if:

- ◆ You know the client will be ineligible for assistance later in the month or in a future month. (For example, if a 17-year-old child becomes 18 during the month of data entry, approve the application unless the birthday falls on the first day of that month.)
- ◆ The client was ineligible some time between the application date and the date eligibility information is entered into the system.

1. Ms. A applies for FIP on June 18. The worker determines that Ms. A received assistance in Missouri for June and was canceled effective July 1. The worker enters eligibility information into the system on July 3. The application is approved for July.
2. Ms. B applies for FIP on June 23. The worker determines that Ms. B was unemployed on the date of application, but she began work on July 5. Her projected income for July exceeds the 185% standard. The worker enters eligibility information into the system on July 14. The application is rejected and no payment is made.
3. Mr. C applies for FIP on June 5. The worker enters eligibility information into the system on June 30. System entry errors prevent processing. The worker corrects and completes the entries on July 1. If there is eligibility for July, the application is approved.

Refer to 4-C, [Hardship Exemption Decision](#), for specific instructions for processing requests for a hardship exemption for families that are applying for FIP beyond the 60-month limit.

### **Grace Period Following Denial of an Application**

**Legal reference:** 441 IAC 40.23(4)

**Policy:**

A grace period may be allowed:

- ◆ When an application is denied for failure to provide requested information. Eligibility for FIP can be reconsidered without a new application if all information necessary to establish eligibility, including verification of any changes, is provided within 14 days of the date on the *Notice of Decision* denying the application.

If eligibility is established, the effective date of FIP is the date all of the information is provided.

- ◆ When an application is denied for failure to attend an interview with the income maintenance worker. Eligibility for FIP can be reconsidered without a new application if the interview is completed and all information necessary to establish eligibility, including verification of any changes, is provided within 14 days of the date on the *Notice of Decision* denying the application.

NOTE: The grace period does not apply when an application is denied for failure to attend an interview with PROMISE JOBS.

If eligibility is established, the effective date of FIP is the date the interview is completed or the date all of the information is provided, whichever is later.

**Procedure:**

When an application is denied for failure to provide requested information or for failure to attend the application interview, allow a 14 calendar day "grace period" to correct the reason for denial.

The first day of the grace period is the day following the date printed on the *Notice of Decision* denying the application. If the fourteenth day falls on a weekend or holiday, the due date is extended to the next working day for which there is regular mail service.

- ◆ **Failure to provide requested information:**

If an application is denied for failure to provide requested information, all of the information requested and verification of any changes in the family's circumstances that affect eligibility must be provided within 14 days of the date on the *Notice of Decision* denying the application. If eligibility is established, the effective date of FIP is the date the final piece of the information is provided.

◆ **Failure to attend interview:**

If an application is denied for failure to attend the application interview, the interview must be completed and all of the necessary information, including verification of any changes in the family's circumstances that affect eligibility, must be provided within 14 days of the date on the **Notice of Decision** denying the application.

If eligibility is established, the effective date of FIP is the date the interview is completed or the date the final piece of the information is provided, whichever is later.

◆ **Family Investment Agreement:**

- If a family investment agreement (FIA) was signed before the application was denied, that FIA will be reinstated if the application is reconsidered during the grace period and eligibility is established.
- If a required FIA has not yet been signed, the agreement must be signed within the 14-day period for eligibility to be redetermined. If a PROMISE JOBS appointment cannot be scheduled soon enough to complete the FIA before the end of the 14-day period, inform the family that a new application is required.

◆ **No information provided or interview not completed:**

If the information is not provided or the interview is not completed by the 14<sup>th</sup> day, no further action is required. Do not issue another notice.

◆ **Partial information provided:**

If part of the information is provided, do not issue a *Notice of Decision*. However, it is good practice to contact the family to let them know that you still do not have everything you need to reconsider the application.

◆ **If a change is reported during grace period:**

If the previously requested information is provided within the 14-day period, but the family also reports another change that must be verified, make every effort to help the client verify the information within the 14-day period.

- A written request for information for the subsequent change is not necessary. However, inform the family that the application cannot be reopened until the change is verified.
- If a generic release is on file, use it to attempt to verify the information.

- If the new information is not verified by the end of the 14-day period, send a *Notice of Decision* stating the application remains denied. This is required because the original reason for denial has been cured, but the family did not provide verification of the new information.

When it appears unlikely that you will be able to verify additional information or complete the interview before the end of the 14-day period, inform the family that they should submit a new application to preserve the earliest possible effective date of assistance.

**Comment:**

1. Ms. A, a FIP applicant, fails to provide verification of income that was requested by the Department. The IM worker issues a notice denying the application, which is dated December 2.

Ms. A provides the verification on December 10. There have been no other changes in the family's circumstances. The IM worker reprocesses the application and approves FIP effective December 10.

2. Ms. B, a FIP applicant, fails to provide verification of income that was requested by the Department. The IM worker issues a notice denying the application, which is dated December 2. Ms. B provides the missing verification on December 10, but also reports that she has begun a new job.

The IM worker explains that Ms. B has until December 16 to provide verification of the change. Ms. B fails to provide the verification. The worker issues a notice stating that the application remains denied for failure to provide the requested verification.

3. Ms. C, a FIP applicant, fails to attend her interview with the IM worker. The IM worker issues a notice denying the application, which is dated December 2. On December 6, Ms C calls the IM worker and asks to complete the interview.

The IM worker completes the interview by telephone that day and schedules an FIA appointment with PROMISE JOBS. Ms C signs her FIA on December 10 and provides the last of the required verification on December 12. The IM worker approves FIP effective December 12.

## **Effective Date of Assistance**

**Legal reference:** 441 IAC 40.24(4), 40.26(239B), 41.24(8), 41.25(2)

### **Policy:**

The effective date for assistance cannot be earlier than seven days after the date of application.

When an application has been denied for failure to provide requested information but eligibility is established during the 14-day grace period, the effective date of assistance is the date the final piece of the required information is provided.

When an application is denied for failure to attend the application interview but eligibility is established during the 14-day grace period, the effective date of assistance is the date the interview is completed or the date the final piece of the required information is provided, whichever is later.

When approving an application for a household following a **first** limited benefit plan imposed effective on or after June 1, 1999, the effective date of assistance is the **latest** of the following:

- ◆ The date the FIA is signed, or
- ◆ Seven days from the application date, or
- ◆ The date the household is otherwise eligible.

When approving an application for a household following a **subsequent** limited benefit plan imposed effective on or after June 1, 1999, the effective date of assistance is the **latest** of:

- ◆ The date the FIA is signed, or
- ◆ Seven days from the application date, or
- ◆ The first day after the six-month period of ineligibility expires, or
- ◆ The date the household is otherwise eligible.

When approving an application following any limited benefit plan effective **before** June 1, 1999, the effective date of assistance is the **latest** of the following dates:

- ◆ Seven days from the application date,
- ◆ The first day after the period of ineligibility expires, or
- ◆ The date the household is otherwise eligible.

Families that are subject to the 60-month limit cannot receive FIP beyond that period unless they are determined eligible for a hardship exemption. For applicants whose FIP eligibility depends on qualifying for a hardship exemption, the effective date of assistance cannot be any earlier than the **later** of:

- ◆ The date a valid form 470-3826, *Request for FIP Beyond 60 Months*, is received in any Department or PROMISE JOBS office, or
- ◆ Seven days from the date the *Health and Financial Support Application* was received.

**Procedure:**

Approve the application when you have established that the applicant meets all eligibility requirements. Check the Eligibility Tracking System (ETS) whenever a family applies for FIP to determine the status of the family's 60-month period.

Determine the date seven days after the date of application by counting the day after the application is received in the office as "day one." Do not include any period for which a client received assistance from either Iowa or another state.

When approving an application following a subsequent limited benefit plan, do not process the approval until PROMISE JOBS stops the limited benefit plan. This will occur after all people who are required to do so have signed an FIA and completed 20 hours of work or other approvable PROMISE JOBS activity. See 4-J, [Reconsidering a Limited Benefit Plan](#), for more information.

If the effective date is not the first of the month, prorate the initial grant. To prorate:

1. Determine the amount of assistance for a full month for the case.
2. Subtract the effective date of assistance from 31. Divide the resulting figure by 30.
3. Multiply the amount from Step 1 by the result in Step 2. Carry to five decimal places.

Total amount of assistance	×	$\frac{(31 - \text{effective date of assistance})}{30}$	=	Prorated amount (before rounding)
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4. Round this figure down to the next whole dollar.

If the client is eligible only on the thirty-first of a month, prorate based on one day of eligibility.

When the applicant is eligible for some, but not all, months of the application period because of the 60-month limit, first determine FIP eligibility for the month of decision. Then determine eligibility for the immediately preceding month, the second preceding month, and so on, until the 60-month limit has been reached. For additional information, see 4-F, [Determining Eligibility for a Prior Month](#).

**Comment:**

When FIP eligibility depends on the birth of a child, the effective date is either seven days from the date of application or the date the child is born, whichever is later. (For more information, see 4-C, [Who Must Be in the Eligible Group](#).)

1. The C household applies for FIP on May June 15. The household received TANF benefits in Mississippi for June. The effective date of assistance is July 1.
2. Ms. A applies for FIP on May 10. She expects her first child at the end of the month. The child is born on June 5. The FIP effective date is June 5 if the family is otherwise eligible.
3. Ms. B is pregnant with her first child. She applies for FIP on August 5. On August 10, Ms. B gives birth. The FIP effective date is August 12 if the family is otherwise eligible.

See [Grace Period Following Denial of an Application](#) for more information on approving applications during the 14-day grace period

See 4-C, [Effective Date of Assistance for a Hardship Exemption](#), for specific information on qualifying for an exemption.

An applicant becomes a participant on the date you enter eligibility information into the system and the system determines the applicant is eligible for assistance. Payments are not made when:

- ◆ The budgetary deficit is less than \$10, or
- ◆ The initial payment is less than \$10 due to proration.

The client is still considered a participant for any month for which there is FIP eligibility but a payment is not issued because of the limitation on grants below \$10 or due to rounding.

## **Referrals to CSRU**

**Legal reference:** 441 IAC 41.22(5)

Refer the absent parent (including an adoptive parent) to the Child Support Recovery Unit (CSRU) within two working days of the date assistance is approved.

- ◆ If a mother claims more than one alleged father for a child, enter a referral on the **same** ICAR case for each alleged father.
- ◆ If the mother claims that her children have different but unknown fathers, establish a **separate** ICAR case for each child to reflect that child's alleged fathers.

The father of child A is unknown, and the father of child B is unknown. The mother states that child A and child B have different fathers, but that child B's father could have been one of two people. One ICAR case must be set up for child A's father, and another ICAR case for child B's alleged fathers.

- ◆ When the putative father is deceased, send CSRU a copy of the application that lists the deceased father. Attach a memo stating that the information pertains to a deceased father.
- ◆ If a mother claims that the father of the child is someone other than the man to whom she was married when the child was conceived or born (the legal father), make a referral on the legal father, but identify the biological father in the "Comment" section of the REFER2 screen.
- ◆ When FIP is reapproved following a break in assistance, link the FIP case to the ICAR case established previously on the same absent parent. Update information in the "Comment" section of the REFER2 screen as needed.
- ◆ Make a new referral whenever a new absent parent is determined on a FIP case that was previously referred for a different absent parent. If a parent later leaves the home, refer the absent parent via entries on the REFER screen.
- ◆ See 4-L, [Battered Aliens](#), for instructions on making child support referrals for battered alien FIP cases.

EXCEPTIONS: Do **not** make a referral to CSRU:

- ◆ When both parents are in the home and **paternity has been established** or there is no other legal father.
- ◆ On a parent whose parental rights have been **terminated** by the court.
- ◆ On the parents of the **underage** parent who is a payee.

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- ◆ When the **same** absent parent was referred while a Medicaid-only case. Link the existing ICAR case to the FIP case. Update information in the "Comment" section on the REFER2 screen as needed to reflect current case circumstances.
  - ◆ When a parent's absence is solely because of the performance of **active duty** in the uniformed services of the United States. "Uniformed service" means the United States Army, Navy, Air Force, Marine Corps, Coast Guard, National Oceanographic and Atmospheric Administration, or Public Health Service.

NOTE: A parent whose absence is because of active duty is considered to be absent for purposes of determining FIP eligibility and benefits. See 4-C, [ABSENCE](#). However, a parent who is absent for this reason is not referred to CSRU.

If the parent leaves the household and the children later receive FIP on a nonparental case, notify CSRU of the change in caretaker by making entries on the system. Refer both absent parents when establishing the nonparental case. CSRU makes the determination of whether a caretaker assignment is necessary or whether the existing assignment can continue with the new caretaker.

If an absent parent returns to the home and FIP eligibility continues, continue to link the case. Enter in the "Comment" section on the REFER2 screen that the absent parent has returned to the home and that FIP eligibility continues. Do not make a new referral, but change the code in the ABC system's deprivation (DEP) field on the TD03 screen to reflect the change.