Seattle King County Coalition on Homelessness: Public Benefits 101

December 10, 2019

Katie Scott, Benefits Attorney
Sara Robbins, Program Manager
Benefits Legal Assistance
Before we begin...

- **Remember that public benefits laws and policies are steeped in systemic racism.**

- **Be aware of the impact of “casual racism” and stereotypes when speaking about recipients of public benefits.**
  - [https://www.huffingtonpost.com/entry/americans-welfare-perceptions-survey_us_5a7880cde4b0d3df1d13f60b](https://www.huffingtonpost.com/entry/americans-welfare-perceptions-survey_us_5a7880cde4b0d3df1d13f60b)

- **WorkFirst policies disproportionately harm families of color.**
Aged, Blind, or Disabled (ABD)

- Formerly called General Assistance Unemployable (GA-U/GA-X) and Disability Lifeline
- Income Limit: $197/month
  - Earned income disregard: 50%
- Resource Limit: $6,000 (changed February 2019)
- Program for single adults
- Grant amount is $197/month
- General eligibility: 65 or older, blind, unable to work for 12 months or more due to physical and/or psychological impairments
- DSHS requires current medical evidence to determine ABD/HEN eligibility and considers eligibility for these programs at the same time
Housing and Essential Needs (HEN)

- Income Limit: $339/month
  - 50% earned income disregard
- Resource Limit: $6,000 (changed February, 2019)
- No cash grant
- Program for single adults
- DSHS determines eligibility for HEN
- HEN benefits (housing and essential needs) administered in King County through Catholic Community Services
- General eligibility: Unable to work for at least 90 days due to physical and/or psychological impairments
Changes to ABD and HEN Effective March 13, 2018

Engrossed Substitute Housing Bill (ESHB) 2667

➢ Extended eligibility for a HEN referral to all ABD recipients.
➢ Extended eligibility for a HEN referral to individuals primarily incapacitated due to substance use.
➢ Emergency Amendment indicated that ABD recipients became eligible for HEN referral effective immediately (3/13/18).
HEN King County Information

EFFECTIVE IMMEDIATELY

People receiving ABD (Aged, Blind, and Disabled) benefits through DSHS may now be eligible for the King County Housing and Essential Needs (HEN) Program

Please call 206-328-5755

Intake Line Hours: Monday to Wednesday 9am to 4pm; Thursday and Friday 9am to 3pm

Appointments scheduled first come first served depending on funding availability

What are the benefits of HEN?

- Transportation Assistance (gas card or Orca LIFT bus pass)
- Essential Needs (hygienic and cleaning supplies once per month)
- Ongoing Rent Assistance (most housing situations qualify)

Who qualifies?

- DSHS determines eligibility for ABD and HEN
- Priority for people experiencing homelessness or at risk of losing housing

What is the registration process?

- If you think you qualify, please call 206-328-5755 to be scheduled for the next available intake appointment
- At the intake appointment, the HEN case worker will verify your eligibility
- If eligible, you may receive essential needs supplies and transportation immediately
- Rental assistance may be available as soon as acceptable housing and housing paperwork are in place. For housing paperwork needed, see www.henkingcounty.org

How long can I receive services?

- DSHS determines the length of time a person is eligible for ABD/HEN
- HEN services are provided as long as a person meets eligibility and funds are available

I used to receive HEN but got taken off, do I qualify?

- If you were removed from HEN because DSHS switched you to the ABD program, you may qualify to start receiving HEN benefits again. Call the intake line 206.328.5755
- If you were denied HEN because your disability is related to a substance use disorder, you may now qualify for HEN. Please go to your DSHS office to reapply for HEN

website: www.henkingcounty.org fax: 206-324-4835 email: henko@ccsww.org
HEN Eligibility

• HEN may provide rent and utility assistance if you are “homeless or at substantial risk of losing stable housing without housing support.”

• HEN, not DSHS, makes the determination of whether someone is homeless or at substantial risk.

• Final 2019 Legislative Budget allocates an additional $14.5 million for HEN funding.
Pregnant Women’s Assistance (PWA)

• Cash assistance program for women who are pregnant and not eligible for TANF for reasons other than not cooperating with TANF rules.
• Primarily for pregnant women that do not qualify for TANF because of the 60-month time limit.
• Grant amount is $197 (increasing to $363 in 2020).
TANF Income and Resource Limits

• Must be very low income with less than $6,000 in resources (changed February 2019) and a vehicle worth less than $10,000 (changed February 2019). Resource limits found in WAC 388-470-0005.

• Amount of assistance found in WAC 388-478-0020:

<table>
<thead>
<tr>
<th>Assistance unit size</th>
<th>Payment standard</th>
<th>Assistance unit size</th>
<th>Payment standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$363</td>
<td>6</td>
<td>$877</td>
</tr>
<tr>
<td>2</td>
<td>459</td>
<td>7</td>
<td>1,013</td>
</tr>
<tr>
<td>3</td>
<td>569</td>
<td>8</td>
<td>1,121</td>
</tr>
<tr>
<td>4</td>
<td>670</td>
<td>9</td>
<td>1,231</td>
</tr>
<tr>
<td>5</td>
<td>772</td>
<td>10 or more</td>
<td>1,338</td>
</tr>
</tbody>
</table>
TANF - WorkFirst

• **WorkFirst**: Most TANF recipients are required to participate in employment, job search, education or job training for 30-40 hours per week. Clients sign an Individual Responsible Plan (IRP) outlining these requirements.

• **Exemptions** from WorkFirst requirements:
  - Parent or legal guardian of an **infant** age 24 months or less (and you haven’t already used up the lifetime 24 month infant exemption)
  - **Needy caregiver relative** aged 55 or older
  - A severe and chronic **medical condition**
  - Required to be in the home to care for a **child with special needs** or an adult relative with a severe and chronic medical condition
TANF - Sanctions

• TANF is reduced or terminated (sanctioned) when a participant fails to comply with their IRP for two months in a row unless recipient can show **good cause**.

• **Good cause** is defined as a “significant problem or event outside your control.” This includes, but is not limited to:

  ✓ An emergent or severe **physical, mental or emotional condition**, confirmed by a licensed health care professional that interfered with your ability to participate;

  ✓ You were threatened with or subjected to **family violence**;

  ✓ You could not locate **child care** for your children under 13 years that was affordable, appropriate, and within a reasonable distance;

  ✓ You could not locate **other care** services for an incapacitated person who lives with you and your children;

  ✓ You had an immediate **legal problem**, such as an eviction notice; or

  ✓ You are a person has an **equal access plan** (also called a necessary supplemental accommodation (NSA)) and your limitation kept you from participating.
• If TANF is closed 3 times, the family is permanently disqualified from TANF.

• Effective July 28, 2019 this no longer exists!!

• Second Substitute House Bill (SSHB) 1603 ends the TANF permanent disqualification.
TANF Time Limit Extensions

Exceptions to the 60-month lifetime limit:

- **Disability** related extensions
  - ✓ Severe and chronic disability or
  - ✓ Required to be in the home to care for a child with special needs and this prevents you from participating in work activities for more than 10 hours per week.
  - ✓ Required to be in the home to care for a disabled adult (the adult must be related to you).

- **DV extension**

- **Child Welfare** (involved in an open child welfare case with a state or tribal government for the first time)

- **Employed** (32 hours or more per week in an unsubsidized job)

- **Aged** (at least 65 years old) or **Blind**

- **Homeless-effective July 28, 2019 (SSHS 1603)**
"Homeless person" means an individual living outside or in a building not meant for human habitation or which they have no legal right to occupy, in an emergency shelter, or in a temporary housing program which may include a transitional and supportive housing program if habitation time limits exist. This definition includes substance abusers, people with mental illness, and sex offenders who are homeless.

RCW 43.185C.010(12)
TANF – Support Services

• WorkFirst families can receive a variety of support services to help overcome barriers to employment.

• These include childcare (WCCC), work clothing, transportation assistance, educational expenses, vehicle repair, tools and equipment, licensing fees, relocation expenses, etc.

Emergency Cash Assistance

TANF-eligible families are also eligible for certain Emergency Assistance programs:

• **AREN** (Additional Requirements for Emergent Needs): Have an emergent need to get or keep housing or utilities and have good reason for the need. Maximum benefit is $750 in a 12-month period.

• **Diversion**: Alternative assistance for families who have a short-term need and do not wish to receive TANF. Maximum benefit is $1,250. Must repay a pro-rated portion of the grant if on TANF before one year.

• **CEAP** (Consolidated Emergency Assistance Program): Cash program available to families or pregnant women who face an emergency and do not have the money to meet their basic needs, including families whose TANF cash assistance has been terminated in sanction and those who have already received 60 months of TANF and do not qualify for a Time Limit Extension. Assistance is limited to not more than 30 consecutive days within a period of 12 consecutive months.
Food Assistance

• Several different programs:
  ➢ Basic Food Program (BFA)
  ➢ State-funded Food Assistance Program (FAP) for those who don’t meet the citizenship requirements of BFA
  ➢ Transitional Food Assistance (TFA)
• Income must be at or below 200% FPL (exception: families exiting TANF can receive TFA for up to 5 months at last benefit amount regardless of income)
• For example, 200% of FPL for a HH of 4 is approx. $4,000
• Maximum payment for HH of 4 is $649 (can be as low as $16)
• Deductions allowed for child support paid out, housing/utility costs, out of pocket childcare expenses, and medical expenses if a HH member is disabled or over 65
• Self-employment deduction: 50% of the gross self-employment even if your costs are less than this OR the actual verified and allowable
Food Assistance - Homeless Youth

• If a minor is homeless and is temporarily living at the residence of an adult who is not their parent and does not provide for them financially, they are not considered to be under parental control and can be their own assistance unit.

• A minor is not required to have a residence or income to be eligible for Basic Food. A child should not be considered "financially dependent" unless the child receives significant and sustained financial or other in-kind support from a non-parental adult. However, if the minor regularly buys and prepares food with others, everyone who does must be in the same assistance unit for Basic Food.
From the DSHS policy manual:

• Homeless youths' living arrangements are often different than many other households, i.e., sharing the housing of others in temporary, informal conditions. Temporary living arrangement refers to an arrangement lasting less than 90 days.

• There isn't a minimum age requirement to apply for Basic Food. If there isn't an adult exercising parental control of a minor, the minor can apply.

• Homeless youth may not have readily available photo ID. Just as with adults, we can accept a collateral contact to verify identity as needed and we must assist the youth in gathering needed verification.

• There is no requirement to provide information about persons outside of their household including the youth's parents. We would only request information on their parent's whereabouts if the circumstances of the case are questionable.
Able-Bodied Adults Without Dependents (ABAWD) is:

- A person required to register for work (not exempt),
- Ages 18-49, and
- Does not receive food assistance in an assistance unit that includes a minor child.
- Non-exempt ABAWDs who live in King County (Muckleshoot Reservation exempt) can only receive 3 full months of food assistance in a 36-month period unless they meet the work requirements.
- The current 36-month time limit period began January 1, 2018.
ABAWD Work Requirements

ABAWDs must do one of these:

• Work at least 20 hours per week, averaged monthly (this includes work for pay and work for goods or services, or in-kind work)
• Complete at least 16 volunteer hours at a Workfare organization (DSHS will determine the exact number of required hours)
• Complete 20 hours per week at Work Experience
• Participate in Basic Food Employment and Training (BFET)
• Participate in Resources to Initiate Successful Employment (RISE)
• Participate in a state-approved employment or training program, including but not limited to:
  ➢ LEP Pathway
  ➢ Refugee with Special Employment Needs (RSEN) project
  ➢ Programs included in the Workforce Innovation and Opportunity Act (WIOA)
  ➢ AmeriCorps VISTA
• **Good Cause** for not meeting work or volunteer hours/volunteer-clients should contact DSHS immediately if they miss work and they have a good reason.
• **Exemptions**: There are multiple exemptions to the work requirements.
WCCC Program

• Working Connections Childcare is a program that helps families with children pay for child care (subsidy is paid directly to approved provider).
• Child must be a citizen or legal resident
• Two types:
  ✓ WorkFirst families for "approved activities" (can include something other than employment, such as school or job training)
  ✓ Non-WorkFirst working families with income at or below 200% of the poverty line (approx. $4,000/month for a family of four)
• Families pay a co-pay (can be as low as $15/month or up to several hundred dollars/month)
Effective March 1, 2018, reapplicants/applicants in the WCCC program must:

• Certify under penalty of perjury, the applicant's or reapplicant's status as married, unmarried and living with the parent of any child in the household, or single parent not living with the parent of any child in the household.

• If the WCCC recipient is the only parent named on the benefits application and DSHS is unable to verify household composition in agency records, then the consumer must:
  ✓ Provide the name and address of the other parent, or indicate, under penalty of perjury, that the other parent's identity and address are unknown to the applicant or that providing this information will likely result in serious physical or emotional harm to the consumer or anyone residing with the consumer; and
  ✓ Indicate under penalty of perjury whether the parent is present or absent in the household.
WCCC Homeless Grace Period

What is the Homeless Grace Period?

• Families experiencing homelessness who are not otherwise eligible for the Working Connections Child Care program may be eligible to receive child care through what is called the Homeless Grace Period.

• The Homeless Grace Period will provide 4 months of child care benefits with a licensed provider and $0 copayment (copayment waived) to help families while they are resolving issues surrounding homelessness, such as locating housing, obtaining or verifying employment, or resolving outstanding copayments with previous providers.
WCCC Homeless Grace Period, cont.

- Clients must meet the McKinney Vento definition of homelessness. The McKinney-Vento Act defines “homeless children” as individuals who lack a fixed, regular, and adequate nighttime residence.
- Homelessness must be verified within 30 days of the date of the application (statement from a 3rd party not in the household).
- Eligibility is maintained through the 4th month even if homelessness is resolved.
- A partial month counts as part of the 4-month period.
Medicare Savings Program (MSP)

What is the Medicare Savings Program (MSP)?

• If you’re on Medicare, you may qualify for help with Medicare premiums, deductibles, and cost sharing. There are four programs that can help. They are called “Medicare Savings Programs” or “MSPs.” The MSPs are:

  ✓ Qualified Medicare Beneficiary (QMB)
    ▪ Income at or below 100% FPL
  ✓ Specified Low-Income Medicare Beneficiary (SLMB)
    ▪ Income at or below 120% FPL
  ✓ Qualified Individual (QI-1)
    ▪ Income at or below $135% FPL
  ✓ Qualified Disabled Working Individual (QDWI)
    ▪ Working, under age 65 and 200% FPL or under
Immigrant Eligibility- 3 Groups

• US Citizens and Nationals

• “Lawfully Present” Immigrants
  ➢ “Qualified”
  ➢ “Non-Qualified”

• Immigrants not Lawfully Present

• **WAC 388-424-0001** Definitions

• **DSHS EA-Z Policy Manual Definitions**
Lawfully Present- “Qualified v. Non-Qualified”

• Qualified
  ➢ Legal Permanent Residents
  ➢ Refugees, individuals granted asylum or withholding of deportation/removal, conditional entrants
  ➢ Granted parole for at least one year
  ➢ Cuban and Haitian entrants
  ➢ Certain victims of trafficking
  ➢ Certain abused immigrants, their children and/or parents
Lawfully Present- “Qualified v. Non-Qualified” cont.

• Non-Qualified

➤ Citizens of Marshall Islands, Micronesia and Palau
➤ Immigrants paroled into US less than one year
➤ Immigrants granted temporary protected status
➤ Non-immigrants who are allowed entry such as students and tourists
DACA Eligibility

• Specifically excluded from federal eligibility for Qualified Health Plans/subsidies & tax credits
• Included as “lawfully present” for purposes of Washington state programs, but non-qualified
• May be eligible for state funded programs
• There may be an argument for state eligibility to continue after DACA status expires
5 Year Bar

• Most immigrants barred from receiving federal “means tested public benefits” for the first 5 years in a “qualified status”

• “Means tested public benefits” include: SSI, TANF, Nonemergency Medicaid, and federal food assistance

• Exempt from 5 year bar:
  ➢ Refugees, asylees, persons granted withholding, Amerasian immigrants, Cuban/Haitian entrants
  ➢ Veterans, active duty military (including spouses, unremarried surviving spouses, children)
  ➢ Victims of trafficking
<table>
<thead>
<tr>
<th>Federal</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medicaid</td>
<td>State Family Assistance (state TANF)</td>
</tr>
<tr>
<td>Qualified Health Plans and tax credits/subsidies</td>
<td>State Food Assistance</td>
</tr>
<tr>
<td>Children’s Medical</td>
<td>Aged Blind or Disabled (ABD) cash</td>
</tr>
<tr>
<td>Pregnant Women’s Medical</td>
<td>Housing and Essential Needs</td>
</tr>
<tr>
<td></td>
<td>Medical Care Services (must be ABD eligible)</td>
</tr>
</tbody>
</table>
# Programs Available to Immigrants Lawfully Present-Qualified

<table>
<thead>
<tr>
<th>Federal (after 5-year bar or exempt)</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>TANF</td>
<td>State Family Assistance</td>
</tr>
<tr>
<td>Federal Basic Food</td>
<td>State Food Assistance Program</td>
</tr>
<tr>
<td>Medicaid (non-emergency)</td>
<td>Aged, Blind or Disabled</td>
</tr>
<tr>
<td>Refugee cash and medical (for refugees, asylees and humanitarian entrants)</td>
<td>Housing and Essential Needs</td>
</tr>
<tr>
<td></td>
<td>Medical Care Services</td>
</tr>
</tbody>
</table>

solid-ground.org
206.694.6700
# Programs Available to Immigrants Not Lawfully Present

<table>
<thead>
<tr>
<th>Programs for Immigrants Not Lawfully Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medicaid</td>
</tr>
<tr>
<td>“Alien Medical” Programs (cancer treatment, dialysis, long-term care)</td>
</tr>
<tr>
<td>State-funded pregnancy and children’s medical Charity Care for hospital treatment</td>
</tr>
<tr>
<td>Community Clinics</td>
</tr>
<tr>
<td>Immunizations</td>
</tr>
<tr>
<td>Testing and treatment of communicable diseases</td>
</tr>
<tr>
<td>WIC</td>
</tr>
<tr>
<td>School lunch programs</td>
</tr>
<tr>
<td>CEAP</td>
</tr>
</tbody>
</table>
Reporting Requirements Generally

• Slightly different for each program
• The approval letter should clearly state:
  - What needs to be reported between reviews
  - How to report it
• Reviews are also a part of reporting requirements and signed under penalty of perjury
• Failing to report or accurately complete a review can result in an overpayment of benefits or worse
What to Report to DSHS for Cash

Changes to report for cash benefits:

➢ You move or someone moves out of your home

➢ Your total gross monthly income goes over the payment standard for ABD cash (WAC 388-478-0033) OR the earned income limit for all other programs (WAC 388-478-0035)

➢ You have liquid resources of more than $6000

➢ You have a change in employment

WAC 388-418-0005(1)(a)
When to Report to DSHS for Cash

• Report changes by the tenth day of the month following the month the change happened.

• For changes in income, the date a change happened is the date you receive income based on this change.

• For households receiving TANF/SFA, if a child in your assistance unit (AU) will be gone from your home longer than one hundred eighty days, you must report it within five calendar days.
Cash Approval Letter (Example)

What do you need to report for cash assistance between reviews?

- When you move.
- When someone moves out of your home.
- When your total gross monthly income (money from all sources before deductions) goes over $120.00. **This income amount will be based on the type of benefit received**.
- When your total liquid resources (such as cash, bank accounts, stocks, or bonds) are worth more than $4,000.
- When you have a change in employment.
- When you get a job or change employers.
- When you change from part-time to full-time or full-time to part-time.
- When you change in your hourly wage rate or salary.
- When you stop working.

How do you report changes?

- Report changes by calling 877-501-2233.

When do you need to report changes?

- For cash and food programs, you must report changes by the 10th of the next month after the change.
What to Report for Food Assistance

If you do not receive cash assistance but you do receive benefits from basic food, you must report if:

- Your total monthly income is more than the maximum gross monthly income (described in **WAC 388-478-0060**, OR

- Anyone who receives food benefits in your assistance unit and who must meet work requirements has their hours at work go below twenty hours per week.

**WAC 388-418-0005(2)**
When to Report to DSHS for Food Assistance

WAC 388-418-0007 - When do I have to report changes in my circumstances?

• Report changes by the tenth day of the month following the month the change happened.

• For changes in income, the date a change happened is the date you receive income based on this change.
Food Approval Letter

How do you report changes?

- Report changes by calling 877-501-2233.

What do you need to report for food assistance between reviews?

- When your total monthly gross income (money from all sources before deductions) goes over $1760.00. This amount will depend on family size.

When do you need to report changes?

- For cash and food programs, you must report changes by the 10th of the next month after the change.
When don’t I have to report changes for food and cash?

• If your household has a change of circumstances you are **not required to report** under WAC 388-418-0005, then you do not need to contact DSHS about the change.

• However, if you tell DSHS about the change, they will take action based on the new information.

**WAC 388-418-0007**(1)
Reporting Requirements for WCCC

A recipient or applicant of WCCC benefits **must:**

- Within 24 hours, report any pending charges or conviction information regarding an in-home/relative provider OR anyone sixteen years of age or older who lives with the provider.
- Within five days, report any change in providers.
- Within ten days, report:
  - Changes to your home address or telephone number;
  - Changes to the address or telephone number of an in-home/relative provider;
  - If your countable income increases and exceeds eighty-five percent of state median income;
  - If your countable resources exceed one million dollars.
- You must also notify your childcare provider within ten days if DSHS changes your childcare authorization

**WAC 110-15-0031(1)**
Reporting Requirements for WCCC, cont.

A recipient or applicant of WCCC benefits may report when:

• The number of child care hours you need increases;
• The household income changes, which may lower the copayment;
• The household size increases, which may lower the copayment; or
• Your legal obligation to pay child support increases, which may lower the copayment.

WAC 110-15-0031(2)
# WCCC Approval Letter

<table>
<thead>
<tr>
<th>I am responsible to:</th>
<th>Failure to report required changes promptly may result in an overpayment or you may have to pay more than your share of child care costs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Give us information so we can determine your eligibility and authorize child care payments correctly.</td>
<td>- <strong>Report These Changes</strong></td>
</tr>
<tr>
<td>- Choose a provider who meets requirements of WAC 170-290-0125 or WAC 170-290-3750 and make your own child care arrangements.</td>
<td>- Within five (5) days of changing your child care provider;</td>
</tr>
<tr>
<td>- Return all requested information for your provider immediately. Your in-home/relative provider will not be issued payment for care provided prior to the date all background check results are received and your provider is approved.</td>
<td>- Within 10 days of changing your home address or telephone number;</td>
</tr>
<tr>
<td>- Pay, or make arrangements to have someone pay, your CCSP monthly copayment directly to your child care provider. <strong>Failure to do so may result in your child care subsidies being terminated.</strong></td>
<td>- Within 10 days if your household income exceeds 85% State Median Income;</td>
</tr>
<tr>
<td>- Cooperate with the quality assurance review process to remain eligible for CCSP. You become ineligible for CCSP benefits upon a determination of noncooperation by quality assurance and remain ineligible until you meet quality assurance requirements or thirty days from the determination of noncooperation.</td>
<td>- Within 10 days if your resources exceed one million dollars;</td>
</tr>
<tr>
<td>- Cooperate with the fraud early detection (FRED) investigator. If you refuse to cooperate (provide information requested) with the investigator, it could affect your benefits.</td>
<td>- For WCCC only! Report to your child care authorizing worker, within 24 hours, any pending charges or conviction information you learn about:</td>
</tr>
<tr>
<td>- Notify your provider within 10 days when we change your child care authorization.</td>
<td>1) Your in-home / relative provider. <strong>You are not required</strong> to report the following changes, but doing so may allow us to keep you informed of changes to your child care authorization, may lower your copayment or increase your child care authorization:</td>
</tr>
<tr>
<td></td>
<td>2) Anyone sixteen years of age and older who lives with the provider when care occurs outside of the child’s home.</td>
</tr>
</tbody>
</table>

You are **not required** to report the following changes, but doing so may allow us to keep you informed of changes to your child care authorization, may lower your copayment or increase your child care authorization:

- You need more child care hours than currently authorized;
- Your household income decreases;
- Someone moves into or out of your household; or
- Your legal obligation to pay child support.
Reporting Changes

Call 1-877-501-2233 or Fax 1-888-338-7410
Online at: Washingtonconnection.org

Mail: DSHS Customer Service Center
P.O Box 11699
Tacoma, WA. 98411
Include your Client ID on each page you submit
Overpayments

• Each program has its own definition but generally, an overpayment is when DSHS pays or provides more benefits than the consumer/assistance unit was eligible to receive.

• The overpayment investigation might be triggered at an eligibility review, when a recipient reports changes, or when a DSHS worker or some other party makes a referral to FRED (Fraud Early Detection program).
DSHS may suspect fraud if they feel:

• You have intentionally misstated some information about your circumstances, OR
• You have failed to reveal information which affects your eligibility for benefits.

If DSHS suspects fraud:

• DSHS may look for evidence in the case record which shows intent.
• They may refer the case to a FRED investigator or even a prosecutor if you knew what facts or changes to report AND you knew when to report the changes AND you had a chance to report AND you chose not to.

FRED investigator may:

• Try to interview you or your neighbors, your childcare provider, your child’s school, your landlord or your employer.
• Request documents from all of the above.
• Search databases that get information from Employment Security, Child Support, Department of Licensing, court records, address records, etc.
If DSHS has accused you of fraud and they are investigating you:

➢ Contact a lawyer immediately.
➢ Do not talk to the FRED investigator and advise your neighbors, family members, landlord, etc. to do the same until you have consulted with a lawyer.
➢ Try to get a copy of your file and/or the FRED report to see why DSHS made the FRED referral and why they think you were untruthful.
Equal Access Plans

Necessary Supplemental Accommodations (also called Equal Access)

• DSHS is required to screen and identify individuals needing extra help to access or maintain services because of their disability, learning disability, or literacy issues.
  ➢ DSHS identifies clients who need NSA services if:
    ✓ The client tells DSHS that they need accommodations.
    ✓ DSHS observes the client as having cognitive limitations, whether or not they have a disability, which would limit the client’s ability to understand NSA services or access DSHS services.
    ✓ DSHS staff are responsible for identifying clients who may need NSA services.

• Services can include (but aren’t limited to):
  ➢ Arranging for or providing help to complete and submit forms to DSHS and providing forms in accessible formats.
  ➢ Helping clients give or get the information necessary to determine or continue eligibility for services, request continued benefits, and explaining to clients why benefits were reduced or ended.
  ➢ Assisting clients with their requests for fair hearing and reviewing the decision to reduce, suspend, or terminate benefits upon request.
  ➢ Altering requirements of benefits for clients, including calling clients instead of in-person meetings, contacting clients who missed appointments about the reason why before DSHS reduces or terminates benefits and giving clients more time to respond to DSHS.

If your client needs extra help to access or maintain benefits, you can help them get an Equal Access Plan.
An AREP is authorized by the client to act on behalf of the client for eligibility purposes. An AREP assists the client with the application, recertification, and general eligibility processes. DSHS can only share information with the AREP that is necessary for the purposes of determining financial eligibility.

The client can identify an AREP on the application, eligibility review form, or DSHS 14-532 authorized representative form.

A DSHS Consent form, DSHS 14-012(x) is required for HIPPA related exchange of information.
Requesting a Hearing

• Generally 90 days to request a hearing from the adverse action (termination, denial, or change in benefits).
• To receive continued assistance while the hearing is pending a hearing must be requested within 10 days of the date on the DSHS notice.
  ➢ If the tenth day falls on a weekend or holiday, you have until the next business day to ask for a fair hearing to get continued benefits.
  ➢ If the tenth day happens before the end of the month, you have until the end of the month to ask for a fair hearing to get continued benefits.

• Office of Administrative Hearings for King County call the Seattle Office at 206.389.3400
  ➢ The request can be in writing or calling either OAH or DSHS or going in-person to DSHS.
  ➢ Child care hearing requests must be in writing
Referrals to Benefits Legal Assistance

• We represent clients whose applications have been denied, whose current benefits have been reduced or terminated or who have been assessed an overpayment. We are also happy to answer general eligibility questions and provide brief advice.

• We cannot provide assistance with applications for benefits, unless the client is particularly vulnerable or has tried to apply and is “front-desked” or hits some other roadblock.

• **Intake line:** 206.694.6742 (client or advocate can leave message and we will return call within 24 hours)

• If you have specific benefit questions feel free to contact us by email:
  - Katie Scott kscott@solid-ground.org
  - Sara Robbins sarar@solid-ground.org
  - Will Ross willr@solid-ground.org