



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Transitional Assistance
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Field Operations Memo 2000-2A
March 14, 2000

To: Transitional Assistance Office Staff
From: Joyce Sampson, Assistant Commissioner for Field Operations
Re: Income/Expenses Report

Introduction

This Field Operations Memo clarifies the procedures described in Field Operations Memo 2000-2, Income/Expenses Report. In addition, a new form is being issued with this memo to enable Transitional Assistance Supervisors to compile the results of their workers' reviews of the cases on the Income/Expense report. Effective immediately, Field Operations Memo 2000-2 is obsolete.

Background

The Income/Expenses report is a monthly report identifying cases in which income on file appears to be less than expenses. The purpose of the Income/Expenses report is:

- To increase case accuracy by identifying potential error-prone cases requiring review and follow-up, as appropriate; and
- To identify cases with an increased potential for homelessness and review for possible homeless prevention services, such as Homelessness Intercept Program (HIP) referrals or Emergency Assistance.

Income/Expenses Report

The Income/Expenses report (Attachment A) is sorted by office, CAN, and alphabetically within CAN, and includes the following information:

- ♦ Case name, SSN and category;

**Income/Expenses
Report (cont.)**

- ♦ Income amounts - Earned Income (EI)
RSDI
Unearned Income (UI) - total of all unearned
income
- ♦ Shelter amount - from PACES block 54
- ♦ Utility amount - from PACES block 55

Space is available to annotate the report with the actions taken.

The report will be run monthly on the second Friday of the month. To appear on the report, the case must:

- Meet the income/expenses criteria (Income on file is less than shelter amount (block 54) plus \$100.00);
- Have a start date (Block 32) or recertification date (Block 57) more than 60 days prior to the report run date; and
- Have not appeared on the Income/Expenses report in the previous six months. After six months if the case still meets the criteria, it will be selected again.

Note: The report dated 2/11/2000 contains all cases statewide that meet the above criteria. The report dated 3/10/2000 contains *only Category 2 and Category 9 cases for TAOs with the exception of Boston Family Housing and Newmarket Square Homeless*. Subsequent reports may have additional changes made to the select criteria. If so, you will be notified of these changes.

**Transitional
Assistance
Worker
Responsibilities**

For each case on the report, the Transitional Assistance Worker must review the case and, if appropriate, schedule a face-to-face interview to review the recipient's circumstances. (Note: For certain cases on the report, a face-to-face interview may not be appropriate or required, for example, homeless cases or EAEDC institutionalized cases.)

At the interview the worker must verify the accuracy of all financial and nonfinancial information on file - income amount(s), shelter amount, utility amount, household composition, etc. Submit changes to PACES as required.

Note: It is particularly important to verify the shelter amount and whether or not the recipient is up to date on shelter payments. The Landlord Verification form has been revised and contains a space for the landlord to indicate if the recipient is behind on rental payments.

**Transitional
Assistance
Worker
Responsibilities -
(cont.)**

Depending on the information obtained, the Transitional Assistance Worker must do either of the following:

- If verifications indicate that the shelter amount is correct and the recipient is up to date on shelter payments, obtain additional information, if necessary, from the recipient to show how the recipient is able to meet expenses.

Note: Additional action may be required at this point. For example:

- Mr. Jones verifies that the landlord provides free utilities because he mows the lawn and shovels the sidewalk (Income-in-kind must be entered);
 - Ms. Smith verifies that she provides room and board to a friend not in the AU (Boarder income must be entered); or
 - Ms. Brown refuses to explain how she is able to meet expenses (BSI referral may be indicated - if all verifications are received, the case cannot be closed for this reason).
- If verifications indicate that the shelter amount is correct and the recipient is not up to date on shelter payments, discuss the situation with the recipient to determine whether the recipient is in need of additional support services to prevent homelessness. These support services may include, but not be limited to:
 - Referral to Structured Job Search;
 - Referral to HIP;
 - Emergency Assistance for rent arrearage, if applicable; and
 - Establishing vendor payments for rent.

The *Emergency Assistance Reference Guide* contains complete information on these topics.

Reminder: A recipient does not have to be eligible for EA to receive homelessness prevention services.

**Transitional
Assistance
Worker
Responsibilities -
(cont.)**

For each recipient on the report, the Transitional Assistance Worker must:

- ✓ Complete the Income/Expenses Form (Attachment B).
- ✓ Annotate the Income/Expenses Report with the results of the review.

Note: The Income/Expense Report dated 2/11/00 contains a field titled "AU/EA Actions." Disregard the headings "AU/EA" and use the space provided to indicate the results of the case review, for example, "BSI referral," "referred to SJS," or "vendor payments established." This field has been renamed "Action/Result."

- ✓ Submit the completed Income/Expenses Form, any pertinent verifications and the annotated report to the supervisor.

**Supervisor
Responsibilities**

The Transitional Assistance Supervisor must:

- ✓ Conduct a secondary review of the action(s) taken by the Transitional Assistance Worker.
- ✓ Sign the Income/Expenses Form and ensure that it is filed in the case record along with any pertinent verifications.
- ✓ Compile the results for all workers in the unit on the Supervisor's Summary Sheet for Income/Expenses Report (Attachment C).
- ✓ Submit the Supervisor's Summary Sheet for Income/Expenses Report to the TAO Director or designee.

**TAO
Director/Designee
Responsibilities**

The TAO Director or designee must:

- ✓ Compile the results submitted by each supervisor.
- ✓ Complete the Director's Summary Sheet for Income/Expenses Report (Attachment D).
- ✓ Return the Director's Summary Sheet for Income/Expenses Report to the Regional Director no later than the end of the month following the month of receipt.

Questions

If you have any questions, please have your Hotline designee call the Policy Hotline at (617) 348-8478. Systems-related questions should be referred to Customer Service at (617) 348-5290.

INCOME/EXPENSES REPORT
TAO 004 CAN 222

NAME	SSN	CAT	EI	INCOME	UI	EXPENSES		ACTION/RESULT	DATE
				RSDI		SHELTER	UTILITY		
		2	311.96	0.00	368.00	850.01	199.00	_____	_____
		2	0.00	0.00	486.00	550.00	24.00	_____	_____



Income/Expenses Form

TAO

CAN

Review Date

CAT	Name	SSN	Income			Expenses	
			Earned	RSDI	Unearned	Shelter	Utility

Check all that apply:

Meeting Expenses by:

- Paying with savings
- Emergency Assistance (EA)
- Fuel Assistance
- Meeting obligations - no explanation given

Receives non-countable income (explain) _____

Not Meeting Expenses

Not paying rent Made referral to:

- Structured Job Search (SJS)
- Homelessness Intercept Program (HIP)
- Emergency Assistance (EA) Date of last EA _____
- Vendor Payments

Date of referral _____

Changes made, no longer meets Income/Expenses criteria (explain changes) _____

Case closed - did not appear for eligibility review Case closed - failure to provide verifications

Case closed - Other (explain) _____

BSI referral made Referral # _____

Transitional Assistance Worker Signature

Transitional Assistance Supervisor Signature



Supervisor's Summary Sheet for Income/Expenses Report

Unit _____

Date of Report _____

Total Number of Cases on this Report for this Unit _____

Action	Total
Cases referred to SJS	
Cases referred to HIP	
Cases referred for EA	
Cases referred for Vendor Payments	
Changes made, no longer meets income/expenses criteria	
Meeting obligations	
Cases closed - did not appear for eligibility review	
Cases closed - failure to provide verifications	
Cases closed - other reason	
Cases referred to BSI	
Other (specify)	

Supervisor _____ Date _____



Massachusetts Department of Transitional Assistance

Director's Summary Sheet for Income/Expenses Report

TAO

Date of Report

Total Number of Cases on this Report for this TAO

Action	Total
Cases referred to SJS	
Cases referred to HIP	
Cases referred for EA	
Cases referred for Vendor Payments	
Changes made, no longer meets income/expenses criteria	
Meeting obligations	
Cases closed - did not appear for eligibility review	
Cases closed - failure to provide verifications	
Cases closed - other reason	
Cases referred to BSI	
Other (specify)	

Director/Designee _____ Date _____