

**Title 18: Human Services**

**Part 24: Divisions of Community Services**

**Part 24: Chapter 1: Low-Income Home Energy Assistance Program**

*Rule 24.1 Low-Income Home Energy Assistance Program (LIHEAP) Policy Manual*

Source: Miss Code Annotated 43-1-2.



# **Low-Income Home Energy Assistance Program (LIHEAP)**

## **POLICY MANUAL**

MISSISSIPPI DEPARTMENT OF HUMAN SERVICES

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## **Part 24 Chapter 1: Introduction**

The Low-Income Home Energy Assistance Program (LIHEAP) is administered by the Division of Community Services (DCS) at the Mississippi Department of Human Services (MDHS). LIHEAP is designed to provide appropriate and timely assistance to eligible households by paying home energy bills and assisting with other energy related services. LIHEAP provides federal funds to subsidize the cost of energy bills for low-income families throughout the state of Mississippi. Information contained in this manual is in compliance with the Omnibus Budget Reconciliation Act of 1981, DHHS-OCS regulations, MDHS policies and procedures, and the LIHEAP state plan.

\*Due to technical aspects of the LIHEAP Weatherization program (WX) a separate manual is required.

**Rule 1.1 Legal Authority.** LIHEAP is authorized by the Low-Income Home Energy Assistance Act of 1981 (under Title XXVI of the Omnibus Budget Reconciliation Act of 1981, as amended.)

- A. Statute- Sections of the LIHEAP statute are listed below as amended through August 1, 1999. The LIHEAP statute was amended in 2005 by Subtitle B of the Energy Policy Act of 2005 (Public Law 109-58) which reauthorized LIHEAP through FY 2007. The LIHEAP statute is in the United States Code at: 42 U.S.C. § 8621-8630 (2008).
- B. Regulations- The HHS regulations for the LIHEAP block grant are found in Title 45 (Public Welfare) of the Code of Federal Regulations, Part 96 (Block Grants)(45 CFR 96)

*Source: 45 CFR 98; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4 Revised: May 2022*

**Rule 1.2 Program Purpose.** The purpose of LIHEAP is to provide appropriate and timely assistance to eligible households to pay home energy bills and to assist with other energy related services. The amount of financial assistance an eligible household will receive will be determined by the amount of the bill at the particular time the bill is due. Assistance will be provided in the form of payments made directly to energy vendors on behalf of eligible households.

- A. LIHEAP is offered in each of the 82 counties in Mississippi, pending the availability of funds. Once income eligibility criteria are established, priority is then given to vulnerable households. Vulnerable households include those households with members who are elderly, disabled, or with children age 5 or younger.

The State of Mississippi may elect to use up to 12% of the state's LIHEAP allocation for LIHEAP Weatherization (WX). \*The administration of LIHEAP WX follows the Department of Energy rules for weatherization. The eligibility criteria for LIHEAP WX is 200% of the federal poverty guidelines.

- B. Subgrantees are required to refer households with high energy bills to the weatherization program. WX funds are used to improve the conditions of eligible clients' homes. The program is designed to reduce home heating and cooling costs by improving energy efficiency and ensuring health and safety. Priority is given to low-income elderly, disabled individuals and household with children five (5) or younger.
- C. Program Operation Dates: LIHEAP is available year-round based on availability of funds. Clients are eligible to receive heating and cooling assistance regardless of season.
- D. The State allocates ten percent (10%) of the total state allocation for administrative cost and ninety percent (90%) for program cost. Administrative cost refers to the cost of central executive functions that do not directly support a specific project or service. They are incurred for common objectives that benefit multiple programs administered by the organization and are not readily assignable to a particular funding stream.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

**Rule 1.3 Manual Purpose.** The purpose of this manual is to provide program policy to clients, subgrantees and the public, in order to implement a range of services and activities having a measurable and potentially major impact on the causes of poverty in the State of Mississippi. This manual provides clear policies for implementing LIHEAP. Subgrantees must comply with the rules and guidelines set forth in this manual, and all applicable Federal and State laws, policies and procedures

MDHS reserves the right to alter any policy during emergencies such as: natural disasters, pandemics, or other circumstances deemed appropriate by the DCS Director or the MDHS Executive Director.

Any questions regarding this policy should be submitted in writing to:

Mississippi Department of Human Services  
 Director, Division of Community Services  
 200 South Lamar Street  
 Jackson, Mississippi 39201

Source: *45 CFR 98.10; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: May 2022

**Rule 1.4 Non-Discrimination Statement.** As a recipient of Federal financial assistance, MDHS and its subgrantees do not exclude, deny benefits to, or otherwise discriminate against any person on the basis of: race, color, gender, sexual orientation, national origin, disability, religion, political beliefs, or age; in admission to participation in, or receipt of the services and benefits under any of its programs and activities, whether carried out by MDHS and/or its subgrantees directly or through a contractor or any other entity with which MDHS and/or its subgrantees arranges to carry out its programs and activities. This statement is in accordance with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Regulations of the U.S. Department of Health

and Human Services issued pursuant to these statutes at Title 45 Code of Federal Regulations Parts 80, 84, and 91.

*Source:* 45 CFR 98.10; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4 *Revised:* May 2022

**Rule 1.5 Organizational Structure of LIHEAP.** The following summarizes the Organizational Structure for LIHEAP:

- A. MDHS as Lead Agency:  
MDHS is the designated State agency to receive funds and administer the program covered in this manual. MDHS assists the Division of Community Services (DCS) by providing support services in a timely manner that is consistent with program goals, objectives and guidelines. MDHS awards LIHEAP subgrants based on the receipt of the Federal Notice of Award for LIHEAP, and the timely receipt and approval of subgrants for funding. MDHS is responsible for monitoring and evaluating the program performance of subgrants.
- B. Division of Community Services (DCS):  
The Division of Community Services provides the necessary interface between the subgrantee and other divisions of MDHS. Responsibilities include, but are not limited to:
  - 1) Administering the program in accordance with all applicable federal and state rules, regulations and guidelines;
  - 2) Informing the public of program rules, regulations, and guidelines through public hearings, announcements and publications;
  - 3) Establishing criteria and processing applications for funding from subgrantees to implement programs;
  - 4) Monitoring subgrantees' spending levels and processing claims requests to ensure compliance with Federal, State, and MDHS guidelines;
  - 5) Reviewing subgrantees' applications for funding to ensure compliance with federal, state and MDHS guidelines;
  - 6) Providing training and technical assistance to subgrantees;
  - 7) Keeping subgrantees informed of changes in Federal, State and MDHS regulations and guidelines;
  - 8) Providing responses to clients regarding inquiries concerning programs;

- 9) Preparing annual State Plan applications to receive the federal funds;
- 10) Collecting and disseminating information to appropriate funding sources and others as deemed necessary; and
- 11) Serving as a liaison between county, state, and federal agencies in regard to program implementation.

*Source:* 45 CFR 98.10; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4 Revised: May 2022

**Rule 1.6 Partner Roles in Administration of Program.** LIHEAP must perform numerous federally mandated functions in order to remain compliant. MDHS enlists several partners through formal agreements to perform some of those functions. The following summarizes those roles:

A. Subgrantees/ Community Action Agencies (CAA):

The community action agencies are the subgrantees in the LIHEAP program. Each subgrantee is responsible for performing program activities in accordance with the terms and provisions of the grant. The responsibilities of the subgrantee include, but are not limited to:

- 1) Operate the program in accordance with the terms and provisions of the grant and all applicable federal and state rules, regulations and guidelines;
- 2) Process applications, determine eligibility and provide appropriate/timely service(s) with measurable outcomes;
- 3) Make referrals to and accept referrals from, and coordinate program information with other social service agencies;
- 4) Maintain all financial and program records;
- 5) Submit required reports to DCS in a timely manner;
- 6) Maintain administrative and internal controls;
- 7) Monitor its financial and programmatic activities;
- 8) Implement a fair hearing process for clients;
- 9) Cooperate with Federal/State investigating teams;
- 10) Establish emergency and disaster procedures;

- 11) Train and certify staff;
- 12) Use the Virtual ROMA system;
- 13) Have at least one intake site in each county of its service area with posted hours of operation;
- 14) Adhere to the terms of the “MDHS Subgrant/Agreement Manual.”  
[\(www.mdhs.ms.gov/subgrantee-manual/\)](http://www.mdhs.ms.gov/subgrantee-manual/)
- 15) Establish partnerships with local entities and organizations to assist in the provision of services to meet the needs of the clients they serve. These partnerships should cover monetary or non-monetary services. Intra-office referrals should be made as most subgrantees have additional programs not funded by DCS (e.g., Head Start, Congregate Meals, Rural Housing Services and Transportation Program).
- 16) Make referrals to the WX agency that covers its service area on behalf of clients seeking WX services or have high energy bills.
- 17) Certify that all entities that they are in partnership with are not on the list for debarment. This information can be found in the Excluded Parties List System (EPLS), now known as System for Award Management (SAM). Proof of documentation of partnership verification with SAM shall be kept on file and the debarment status shall be checked prior to submission of every subgrant and modification to DCS. The subgrantee must also understand that if an entity they are in partnership with is on SAM, the agreement should be terminated immediately.
- 18) Conduct local public hearings regarding the LIHEAP program. Information such as LIHEAP funding for the county, services provided, income guidelines, etc. must be presented in efforts to reach low-income communities.
- 19) Conducting outreach activities to reach eligible persons or households in need of services. Subgrantees may utilize the media (newspaper, TV, radio, flyers, internet, community meetings, etc.) to inform individuals of services available and eligibility requirements. Outreach materials should include the local and toll-free telephone numbers for subgrantee offices. Subgrantees should rely on their existing network of volunteers, community leaders, and faith-based groups to provide outreach to eligible persons in the greatest need of assistance.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

## **Part 24 Chapter 2: Definitions**

**Rule 2.1 Definitions.** The Definitions below will assist both clients and subgrantees on the various terms used for LIHEAP:

- A. Abuse - Involves behavior that is deficient or improper when compared with behavior that a prudent person would consider reasonable and necessary business practice given the facts and circumstances. Abuse also includes misuse of authority or position for personal financial interests or those of an immediate or close family member or business associate.
- B. Administration Cost - Cost to support administrative operations, planning and development to include but not limited to: Fiscal operations (payroll, procurement, software, etc.), program and fiscal reporting, audit, personnel, registration and dues, training for executive and administrative staff, cost of executive and administrative staff (salaries, fringes, travel, supplies, equipment), consultants, staff meeting cost, etc.
- C. Assurance 16 Costs - Cost to support the direct staff providing outreach, energy education, budget counseling, advocacy with energy providers, and referral to include Salaries, Fringes, and Travel.
- D. Countable Income - Income that must be included when determining eligibility for LIHEAP.
- E. Emergency - A natural disaster; a significant home energy supply shortage or disruption; a significant increase in the cost of home energy, as determined by the Secretary; a significant increase in home energy disconnections reported by a utility, a State regulatory agency, or another agency with necessary data; a significant increase in participation in a public benefit program such as the supplemental nutrition assistance program carried out under the Food and Nutrition Act of 2008 (7 U.S.C. 2011 et seq.), the national program to provide supplemental security income carried out under title XVI of the Social Security Act (42 U.S.C. 1381 et seq.), or the State temporary assistance for needy families program carried out under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.), as determined by the head of the appropriate Federal agency; a significant increase in unemployment, layoffs, or the number of households with an individual applying for unemployment benefits, as determined by the Secretary of Labor; or an event meeting such criteria as the Secretary, in the discretion of the Secretary, may determine to be appropriate.
- F. Energy burden - The expenditures of the household for home energy divided by the income of the household.
- G. Energy crisis - Weather-related and supply shortage emergencies and other household energy-related emergencies.

- H. Energy Crisis Intervention Program (ECIP) - Cost to provide direct client services for emergency and crisis situations. See policy on crisis. This activity does not include cost for staff.
- I. Exempt income - Income that should not be included when determining eligibility for LIHEAP.
- J. Expenditures - Funds spent by subgrantees; Funds paid for services or contracts; and Funds paid at the State level to contracts and salaries.
- K. Fraud - A type of illegal act involving the obtaining of something of value through willful misrepresentation. A false representation of a material fact, whether by words or by conduct, by false or misleading allegations, or by concealment of that which should have been disclosed, which deceives another so that he acts, or fails to act to his detriment.
- L. Unobligated funds- Funds that are not considered obligated or expended include: State administrative dollars that do not fall within the definition stated above; Vendor refunds are considered unobligated; and Funds transferred from one subgrantee to another are considered unobligated until funds are awarded in another subgrant.
- M. Highest home energy needs - The home energy requirements of a household determined by taking into account both the energy burden of such household and the unique situation of such household; such as; having members of vulnerable populations, including very young children, individuals with disabilities, and elderly individuals.
- N. Home energy - A source of heating or cooling in residential dwellings.
- O. Household - Any individual or group of individuals who are living together as one economic unit for whom residential energy is customarily purchased.
- P. Income - Income is money received on a regular and recurring basis by any household member. Income may be earned or unearned.
- Q. Line Items - Line Items for LIHEAP as specified in the MDHS Subgrantee Manual are: Salaries, Fringes, Travel, Equipment, Contractual Services, Supplies, & Subsidies, Loans & Grants.
- R. Natural disaster - A weather event (relating to cold or hot weather), flood, earthquake, tornado, hurricane, or ice storm, or an event meeting such other criteria as the Secretary may determine to be appropriate.
- S. Obligations - Amounts which may be legally required to pay out of its resources, including encumbrances, as well as accounts payable and accrued liabilities. Obligations

may include: any funds issued in the Notice of Funding Availability (NOFA); any funds encumbered in a contract; and any funds committed to State Office FTEs. This does not include vacant positions.

- T. Poverty level - With respect to a household in any State, the income poverty line as prescribed and revised at least annually pursuant to section 9902(2) of this title, as applicable to such State.
- U. Program Assistance - Cost to provide direct client services to include energy assistance payments on behalf of eligible households; cost of purchase/repair/replacement of air conditioners, fans, furnaces, heaters, blankets, home meter bases, energy kits/incentives, and other energy-related expenditures to include disaster-related expenditures for eligible households; cost for a contractor to install the air conditioners, etc. Cost (salaries, fringes, supplies, equipment) for direct staff for intake, case management, case worker supervisors and file reviewers; and travel for this staff which includes training and home visits.
- V. Secretary - The Secretary of Health and Human Services.
- W. State - Each of the several States and the District of Columbia.
- X. State median income - The State median income promulgated by the Secretary in accordance with procedures established under section 1397a(a)(6) of this title (as such procedures were in effect on August 12, 1981) and adjusted, in accordance with regulations prescribed by the Secretary, to take into account the number of individuals in the household.
- Y. Waste - Involves the taxpayers not receiving a reasonable value for money in connection with any government funded activities due to an inappropriate act or omission by players with control over or access to government resources.

*Source: 45 CFR 98; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4 Revised: May 2022*

## **Part 24 Chapter 3: Priority Populations**

**Rule 3.1 Priority Populations.** Priority Population is a designated population treated differently than the general population for eligibility and access purposes, in order to address a particular need of that population. Priority Populations include:

- A. Elderly - Individuals age 60 and over
- B. Disabled - Individuals who have been determined disabled by authority- SS/SSI
- C. Children five (5) years of age and under
- D. Households with high energy burdens

*Source: 45 CFR 98.46; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4 Revised: March 2024*

## **Part 24 Chapter 4: Client Application Process**

The State has one application for four programs- LIHEAP, CSBG, LIHWAP, and Weatherization. Therefore, an applicant may apply for all programs during the intake process. If the weatherization agency is different from the LIHEAP agency, the LIHEAP agency refers to the weatherization agency to complete the assessment for this program. Local agencies offer all programs administered by that agency, especially to the vulnerable populations of elderly, disabled, and families with children. Local agencies refer applicants to other local programs such as SNAP and TANF, if the applicant is not currently receiving these services.

**Rule 4.1 Client Application Process.** The Subgrantees/ Community Action Agencies (CAAs) accept applications throughout the year. When funding is available, eligible families shall be served on a first-come, first-serve basis by the date of application. When funding is not available, eligible families shall be added to the waitlist.

- A. As a general rule, only the applicant, spouse of the applicant, or authorized representative of a disabled or elderly applicant are the adults who can be present during the application. The Subgrantee reserves the right to require other adults to remain in waiting room, especially if they are causing disruption during the application process.
- B. If the applicant cannot read, the caseworker must read all forms/declarations to the applicant to ensure the applicant understands what is being signed.
- C. The signature of the applicant must be on all applicable documents. A spouse may sign if the head of household is absent. Caseworker should document the reason the head of household cannot come in for appointment. If the applicant cannot write, they may sign by making an “X” on the signature line. The name must be printed or typed under the “X” by the caseworker, and a witness should sign under the “X”.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

## **Rule 4.2 Before Initiating Application.**

- A. Applications are initiated through the Common Web Portal (CWP) for all first-time applicants. If an applicant was a previous household member in another case, but is now head of household, a new pre-application must be done. Pre-applications are web-based and may be submitted on behalf of Mississippi residents only. Applicants may apply for services through the CWP at: [www.access.ms.gov](http://www.access.ms.gov)
- B. Pre-applications are required for applicants requesting service for the first time or if the applicant is no longer in the household of another client.
- C. Applicants submitting pre-applications must receive notification of an appointment for services within fifteen (15) business days of submission of the application.

- 1) If the applicant is elderly, disabled, or a family with a child five (5) and under, the appointment date must be within thirty (30) calendar days. Non-elderly or non-disabled clients must be given an appointment date within forty-five (45) business days.
  - 2) For emergency situations, if the applicant's application status is life-threatening (LTE), the appointment date must be within 18 hours. If the applicant's application status is non-life threatening (NON-LTE), the appointment date must be within 48 hours. Verification of emergency must be provided, or the application will be treated as a "Normal" application. (see section 6.11 regarding explanations of LTE and NON-LTE cases)
- D. If an applicant does not have access to a computer to submit a pre-application, the subgrantee must complete the pre-application by phone or at the intake appointment. The subgrantee must provide the applicant with an intake appointment based on application status (LTE, NON-LTE, Normal).

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

**Rule 4.3 Initiating Application.**

- A. Subgrantees must receive the pre-application from Virtual ROMA and schedule the applicant an appointment. (Please view the Virtual ROMA policy manual on scheduling appointments)
- B. If an applicant does not complete a pre-application (regardless of reason), the subgrantee must complete the pre-application during the application process. A manual appointment must be made for the applicant by the subgrantee and the appointment should be documented in Virtual ROMA after the pre-application has been completed.
- C. Under no circumstance should an applicant be denied services because they have not completed a pre-application. The subgrantee must assist the applicant with completing a pre-application.
- D. Paper Applications are prohibited, unless in case of a computer system failure or natural/manmade disasters. The subgrantee's Executive Director or appointee must submit a request in writing to the Director of the Division of Community Services for approval to take paper applications. Once the emergency situation is over, the paper applications must be entered into Virtual ROMA within two (2) business days, unless additional time is requested and approved. The subgrantee's Executive Director must submit a letter to confirm all paper applications have been entered. Otherwise, any paper applications taken may result in questioned or disallowed cost.
- E. The caseworker must complete the application in the Virtual ROMA system. If the applicant submits the requested information, the caseworker must give the applicant a

Pending Notification of Services form (PNOS) which states the status of the application and amount of benefits the applicant may receive upon supervisory approval. This form must be generated through Virtual ROMA and signed and dated by both the applicant and caseworker. Subgrantees must provide the PNOS notice (written or email) to applicants regarding the status of their application within seventy-two (72) hours of the appointment date. In emergency cases, notification must occur within 18 hours (life threatening) or 48 hours (non-life threatening) of the appointment date.

- F. If the applicant does not have all the required documentation, the caseworker must complete as many screens as possible up to the allocation screen in Virtual ROMA. The caseworker will not allocate after this point. A Request for Additional Information (RFAI) form must be generated through Virtual ROMA and signed and dated by both the applicant and the case worker. A copy must be given to the applicant, and a follow-up appointment must be given to complete the application process if necessary. Applicants may submit their information electronically; therefore, the subgrantee must provide an email address to the applicant. If the applicant does not return the information timely, the application must be denied, and the denial notice and NOS form sent by mail or email by the case worker and uploaded to Virtual ROMA. Caseworker must explain the documentation needed and the 10-calendar day timeframe to return the information.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 4.4 After Submitting Application.**

- A. Once application is initiated, the client's application status must change to 'Waiting on Approval' within ten (10) business days. Then the application must be acted upon and changed to 'Approved' or 'Denied' within two (2) business days.
- B. If the supervisor sends a case back to the caseworker for Return for Correction (RFC), the caseworker will have two (2) business days to correct case and put back in "Waiting on Approval" status.
- C. Subgrantee's cancellation of applications approved in error, must occur within twenty-four (24) hours after application has been approved. The subgrantee must contact the vendor to notify them of non-approval status to prevent an inaccurate payment.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 4.5 Notices from Subgrantee to Applicant**

- A. Notification of an appointment for services must be generated through Virtual ROMA and either mailed, emailed, or given to applicant in the office within fifteen (15) business days of the submission of a pre-application. A copy of the notification of an appointment for services must be scanned into Virtual ROMA.

- 1) The notification must include the following:
  - i Name, address, phone number, and email address of Subgrantee office
  - ii Date and time of appointment
  - iii Eligibility information needed, as listed in Chapter 5.
- B. The Notification of Services form must be provided to the applicant either by letter or email within seventy-two (72) hours of the approval or denial of the application. This form must be scanned into Virtual ROMA and a copy placed in the applicant's file. In emergency cases, the form must be sent within 18 hours (life threatening) or 48 hours (non-life threatening).
- C. A copy of the fair hearing process must be given to all applicants at each appointment, regardless of the approval or denial status. The fair hearing process must be posted in the lobby so the process can be seen by the public.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 4.6 Non-Availability of Funds/ Waitlist**

- A. If the Subgrantee has run out of LIHEAP funds, the application must still be taken and denied. This must be done because of the federal reporting requirement, to count all applicants, as part of the LIHEAP Household Report. When denying the case, the case worker must select "Funds expended" as the denial code. This will add the applicant's name to an internal report in Virtual ROMA and this report will be known as the agency's Waiting list. As soon as funding is available, the applicants on the waiting list must be given an appointment before any other appointments are given. If denied, the applicant should be referred to other local organizations that may be able to assist. All referrals must be documented in Virtual ROMA.
- B. An applicant should not be added to a waiting list if LIHEAP funds are available from the agency.
- C. Under no circumstance should an applicant not be allowed to apply because LIHEAP funds are not available.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

## **Part 24 Chapter 5: Client Eligibility Requirements.**

Households that consume energy for residential purposes and meet the requirements of the program will be eligible for assistance. Energy bills may include electricity, natural gas, propane/butane, wood, kerosene, and coal. LIHEAP funds may also be used to purchase fans, coats, blankets, air conditioners, heaters, energy deposits, and other energy-related products to be distributed to eligible households. The maximum amount of financial assistance and the cost of the energy-related products awarded to eligible households may be up to \$1,500, unless a client is in need of heating and/or cooling equipment. When supplemental funding is available, subgrantees must be aware that applicants may or may not be eligible for supplemental payments from different grants at the same time. In this case, the subgrantee's Division Program Director will determine, based on the amount of funding available, which grant will be used to assist the client's needs.

LIHEAP has two (2) components: program assistance known as regular assistance and the Energy Crisis Intervention Program (ECIP) that provides emergency assistance. Subgrantees are required to refer high energy usage households to Weatherization.

### **Rule 5.1 Eligibility Requirements.**

An applicant must meet the following requirements to receive a LIHEAP benefit:

- A. Have an obligation to pay an energy bill directly to a utility company, in subsidized housing where the energy cost is billed separate from rent or can provide evidence from the landlord stating utility is an undesignated portion of the rent;
- B. Be a U.S. citizen or have legal permanent resident status;
- C. Have income at or below the 60% state median income guidelines; and
- D. Be eighteen (18) years of age or older or an emancipated minor (through court action) who is considered head of household.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

### **Rule 5.2 Residency.**

An applicant must be a resident of the State of Mississippi and reside in the LIHEAP service area at the time the energy costs were incurred. The applicant must apply for services in the county in which they live. Homeless households may apply for services if they are trying to establish utility services.

- A. An applicant must give a street address to include a house/route number and street name, city, state, and zip code.
- B. LIHEAP services cannot be provided to temporary residents defined as:
  - 1) Household traveling through the state;
  - 2) Household on vacation;

- 3) Household visiting someone; or
- 4) Residents of institutions, dormitories, fraternity or sorority houses, or boarding homes.
- C. A household with an address that straddles county lines may provide proof of Homestead Exemption, which verifies the county of residency. Other methods of verifying county residence for an applicant who is not eligible for Homestead Exemption, is Voter Registration I.D. or documentation of the county in which the applicant receives other social services benefits. The subgrantee can also verify by using the internet in determining what county the applicant lives.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: May 2022

#### **Rule 5.3 Immigration Status.**

- A. If the head of household is undocumented and is a single member of the household, the application must be denied.
- B. If the head of household is undocumented and has documented member(s) in their household, the application shall not be denied for the entire household. The application must be determined eligible by using the household size of the documented household members and the income for all household members eighteen (18) years of age and older.
- C. If an individual within the household is undocumented and does not disclose citizenship or establish satisfactory immigration status, ineligibility exists only for the individual, but not the entire household. This individual is considered a “non-applicant” and should not be questioned about his/her citizenship/alien status. However, this individual must disclose and verify income and other information needed to establish the eligibility of the household. The income of this individual must be included in determining the household’s total income; however, this individual will not be counted in determining the household size.
- D. Eligibility cannot be determined when a “non-applicant” fails to disclose income; therefore, the application should be denied for the entire household.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 5.4 Renters.**

The State of Mississippi treats homeowners and renters equitably under the LIHEAP program. Eligibility requirements are the same for a renter as with a homeowner.

- A. If the utility bill is included in the applicant’s rent, the applicant must provide either a copy of their lease agreement or the “Landlord Verification Form” completed by the landlord detailing the heating/cooling arrangement with the renter. The lease agreement/Landlord Verification Form must include the amount of the utility cost as

part of rent and the breakdown of the charges that make up the bill. All energy-related costs included in the bill will be the amount to be paid by LIHEAP to the energy vendor.

- B. If the lease agreement/verification form does not include an amount, the LIHEAP program will pay \$100 per intake until the amount of the benefit matrix has been met.
- C. If the landlord completes the “Landlord Verification Form”, the landlord must agree to decrease the amount of the rent in the amount of the LIHEAP payment for the month after the LIHEAP payment has been made. If proof of deduction is not provided, the landlord will be in violation of their agreement and will be reported to MDHS – Office of Inspector General to be investigated.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 5.5 Roomers/Boarders**

A roomer/boarder is an individual who is not a related household member and is paying an unrelated landlord to reside in their residence.

- A. The roomer/boarder must obtain a “Landlord Verification Form” or written verification from the landlord if the energy cost is separate from the charge for room & board.
- B. If multiple roomers/boarders are in a household and they are responsible for a utility bill in their name, the applicants can submit separate applications and the subgrantee can assist with each bill.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 5.6 Live-In Attendant**

- A. A live-in attendant should not be counted as a household member. The income of a live-in attendant will not count against an applicant applying for services when the live-in attendant is in the home solely for the applicant to be able to stay in their home.
- B. Documentation must be provided along with a signed and notarized affidavit.
- C. In cases where the caretaker is the head of household and the person requiring care moves in, then the person requiring care should not be counted as a household member. Documentation must be provided along with a signed and notarized affidavit.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: May 2022

#### **Rule 5.7 Employee Familial and/or Personal Interest Applicants**

Any employee, relative, or personal interest cases of employees or board members may apply for and receive assistance; however, there are policies and procedures for taking and processing these applications. No preferential treatment shall be granted to these applicants.

- A. An employee of a Subgrantee cannot complete the intake or be involved in the approval process of a relative. In this occurrence, the caseworker should immediately recuse oneself from any involvement with the case.
- B. The Program Director/Supervisor is responsible for delegating the processing of applications for employees, relatives of employees, or personal interest cases and for submitting the case to the case to the Executive Director for review and authorization of the approval or denial. The Executive Director is responsible for delegating the processing of Program Directors/Supervisors, Board Members, and/or their relatives requesting assistance. The Executive Director is responsible for approving the application of the Program Directors/Supervisors, Board Members, and their relatives.
- C. The relatives for whom the special procedures must be used include: employee's spouse, ex-spouse, parent(s), stepparent(s), grandparent(s), great and great-great grandparent(s), brother(s) and sister(s), stepbrother(s) and stepsister(s), half-brother(s) and half-sister(s), children, stepchildren, grandchildren, great and great-great grandchildren, aunt(s), uncles(s), nieces(s), nephew(s), first and second cousin(s), or these relatives of an employee's spouse who are related to this degree of marriage.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: March 2024

#### **Rule 5.8 Eligibility Documentation.**

Applicants must verify eligibility through the submission of documents. When possible, MDHS and/or the subgrantee will access other documentary evidence in available databases. However, proof of eligibility requirements is the applicant's responsibility. A document may serve to prove more than one requirement and should not be submitted more than once. The following is a list of acceptable proof for each requirement:

- A. Social Security Cards are required for all household members.
  - 1) If the applicant is applying for assistance for the first time and cannot provide their Social Security Card, the Social Security Number can be taken. To receive further assistance, the applicant must provide their Social Security Card or supporting documentation. The subgrantee should work with the applicant to obtain this documentation.
  - 2) The requirement to present a social security card is waived for foster children. The applicant must provide a social security number to apply for services. A letter or some documentation from Child Protective Services (CPS) is needed to verify the social security number.

- 3) For newborns (less than 8 weeks old) who do not have a Social Security Card, the application can be processed without adding the child, but any income for the child must be counted when determining household income.
- 4) **Effective January 1, 2019, subgrantees shall no longer keep copies of Social Security cards and Personal Identifiable Information (PII) documentation in clients' files. These documents must be scanned into the Virtual ROMA system only and given back to the client.**

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### B. Photo Identification Documentation

- 1) A photo I.D. is required for all household members eighteen (18) years of age and over. Acceptable documents include, but are not limited to:
  - i. Driver's license
  - ii. State-issued I.D.
  - iii. U.S. Passport
  - iv. U.S. Military I.D.
  - v. Employment I.D.
  - vi. College/School I.D.
  - vii. Tribal I.D.
  - viii. Alien: Photo I.D. plus Alien Registration/Permanent Resident Card
  - ix. Temporary Resident Card
  - x. Voter Registration I.D. with photo
- 2) An applicant shall receive services if they have an expired photo I.D. where the picture is clear. Subgrantee should work with the applicant through case management or referral to obtain a valid I.D.
- 3) For elderly/disabled homebound clients, the photo I.D. can be expired. Please do not take pictures and do not deny the client if the photo I.D. is not available. Caseworkers should update notes to include the visit and state that some form of I.D. was secured. This can be used as a substitute for the required document scan of the photo I.D.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### C. Energy Bill

- 1) Applicant must present the energy bill to be paid, or subgrantee may access vendor portals to obtain this bill. If accessing from portal, make sure full bill is uploading into Virtual ROMA.

- 2) The bill(s) must be in the name of the applicant (head of household) or spouse.
- 3) Propane clients must obtain a 12-month printout of their account from the company. Also, a quote (on company letterhead or printout) of the price of gas per gallon times the number of gallons (up to 100) plus any applicable fees must be obtained. Example: 100 gallons times \$3.00 per gallon = \$300.00 plus other fees (list them) \$15.00 = \$315.00. If the client cannot obtain this information, the agency must contact the propane company to obtain.
- 4) Pre-pay accounts – Caseworker should access the company's portal or website. A copy of the client's account page should pull up. It will state an average bill amount which is an average monthly amount. **The average bill amount should be allocated, plus any past due amount.** The total amount allocated must not exceed the benefit matrix amount for the client. If an energy company does not have a portal/website to access this information, the client must obtain a printout from the energy company to state this information. The printout must be scanned into VR2 and tagged to Invoice/Bill for energy type.
- 5) If the bill is in the name of a deceased, incarcerated, divorced, or estranged spouse, the subgrantee can pay the bill for the initial application. Subgrantee shall assist the applicant with getting the bill changed into his/her name before any subsequent bills can be paid. In the case of a deceased spouse, the surviving spouse can request the vendor to put "in care of" for subsequent bills. An "in care of" bill shall be paid if the head of household or spouse's name is listed on the bill.
- 6) If the bill is in the landlord's name and the applicant is responsible for paying the bill directly to a vendor, documentation is needed to verify the tenant's living status. This documentation can be a notarized statement from the landlord, a copy of the lease agreement stating the arrangement, or a Landlord Verification form can be completed by the landlord. The landlord cannot request services on behalf of the tenant/client.
- 7) The bill cannot be paid if it is in the name of a child (under 18), even if the child lives in the household. The applicant is responsible for paying that bill, and the subgrantee can subsequently assist the applicant with getting the bill changed into his/her name by advocating with the energy vendor.
- 8) Other miscellaneous charges on the bill that are not energy-related cannot be paid, such as appliance purchases, ~~or~~ tampering fees, returned check fees, and charge/write offs.
- 9) For households that heat with smaller propane tanks (less than 100 gallon tanks), the agency should approve for a minimum of 100 gallons.

- 10) If a household uses part of the residence for self-employment or work-at-home, a prorated bill for residential use must be provided. Only the amount of the residential portion can be paid from LIHEAP funds.

Source: *Miss. Code Ann § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 5.9 Authorization of Release of Information**

Applicant should sign the “Authorization of Release of Information Form” (Form ARF-001) annually to authorize the energy vendor(s) to release household energy usage and billing data to the subgrantee for purposes of reporting this data in the LIHEAP Performance Measures Report required by the Department of Health and Human Services. The subgrantee shall advise applicants that if they refuse to sign this form, the subgrantee will be unable to retrieve their utility bills from the vendor. LIHEAP benefits cannot be denied to the applicant for refusal to sign this form. However, subgrantees must list the applicant’s name on a report to be submitted to MDHS so their information is not included in the federal report.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 5.10 Affidavits**

Affidavits are written declarations made under oath before a notary public or other authorized officer. They are valid for thirty (30) days. Affidavits are to be obtained for the following reasons:

- A. Authorized Representative applying for services on behalf of an applicant: The representative must have an affidavit giving authority to act on behalf of the applicant. Original copies of documents required for eligibility must be presented. If the representative has a Power of Attorney, an affidavit is not required. The Power of Attorney must be scanned into Virtual ROMA.
- B. Separation: The State of Mississippi does not recognize legal separation. Applicant must obtain an affidavit which declares separation from the spouse.
- C. Zero income household: Applicant must obtain an affidavit when they declare zero income for the entire household.
- A. Unemployed: For each adult (18 years of age and older) that lives in the household, has no income and is not a student, an affidavit must be obtained confirming unemployment status for thirty (30) days.
- B. Guardianship: If the applicant reports they have guardianship over any minors (grandchildren, nieces, nephews, etc.) in their home, an affidavit MUST be completed AND the applicant must obtain official documentation from a verifiable agency/source (CPS, attorney offices, school records, etc.) to confirm residency status of the child.

- C. Other: This option shall be used if there are any circumstances where the subgrantee feels an affidavit is required.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

**Rule 5.11 Income Eligibility and Calculations.**

- A. Income is money received on a regular and recurring basis by any household member. Income may be earned or unearned.
- B. A household's total gross income shall be used to determine eligibility. The total gross income received for the thirty (30) days prior to application date must be verified.
- C. Countable Income is income (earned or unearned) that must be included when determining eligibility for LIHEAP. The following types of income shall be used:
  - 1) Salaries and wages, including overtime, tips, bonuses, commission, and 13<sup>th</sup> check;
  - 2) Self-employment income;
  - 3) Contract income;
  - 4) Unemployment insurance;
  - 5) Social Security benefits (including Medicare deduction); 6) SSI;
  - 6) SSDI;
  - 7) Retirement benefits;
  - 8) Alimony;
  - 9) VA benefits;
  - 10) Workers Compensation;
  - 11) Private Disability (Short/Long Term Disability);
  - 12) Money given to household; and
  - 13) Any income whereas a W2 or 1099 is not received or otherwise documented.
- D. Exempt income is income that should not be included when determining eligibility for LIHEAP. The following types of income shall not be considered:
  - 1) Loans/Grants;
  - 2) In-kind income;

- 3) Earnings from employment of a child under the age of 18, unless emancipated;
  - 4) Infrequent income- if an individual receives it only once during a calendar year from a single source and the individual did not receive that type of income in the month immediately before that month or in the month immediately following that month (Examples of this would also be repayment of personal loans, etc.);
  - 5) Reimbursement for business or medical expenses;
  - 6) Payments made by others on behalf of household, unless payments were directly received by household;
  - 7) Benefits received that must be excluded by federal law or incentives paid by TANF or Workforce Investment, earnings and allowances paid under Title IV-A, benefits received under Title VII, HUD, and educational grants;
  - 8) Child support;
  - 9) Payments made to household for the care of a foster child; and
  - 10) Refunds such as energy refunds, income tax refunds and EITC, insurance refunds, etc.
- E. Earned income is income that is received from wages or self-employment income and shall be used in determining eligibility. Computation of the monthly income shall be done by one (1) of the following methods, depending upon the frequency:
- 1) Regular Income- Frequency does not change from week to week, or month to month.
    - a. Weekly: The four most recent consecutive paycheck stubs covering the four-week period prior to application, or the signed/dated statement from the employer.
    - b. To calculate: Sum the weekly gross earnings; Divide by 4, then multiply by 4.3333 to determine the monthly amount.  
Multiply the monthly amount by 12 to get the annual income.
    - c. Example: WK1 through WK4:  $(\$412 + \$436 + \$485 + \$520)/4 * 4.3333 * 12$  Monthly:  $\$2,007.26 * 12 = \text{Annual income: } \$24,087.15$
  - 2) Semi-Monthly (Twice a month): The two most recent consecutive paycheck stubs covering the month prior to application. Individuals receive checks 24 times a year.
    - a. To calculate: Sum the gross amounts of two checks, multiply by 12 to get the annual income.

- b. Example: Check for first 2 weeks- \$1,500 and Check for second 2 weeks- \$1,700.  $(1,500+1,700) = 3,200$  monthly.  $\$3,200 * 12 =$  Annual income: \$38,400
- 3) Bi-Weekly (Paid every other week): The two most recent paycheck stubs covering a month prior to application. Individuals receive checks 26 times a year.
  - a. To calculate: Sum the gross amounts of two (2) checks and divide by 2 to get an average. Multiply by 2.1667 to get the monthly income. Multiply by 12 to get the annual income.
  - b. Example: Check for first 2 weeks- \$1,000 and Check for second 2 weeks- \$1,200.  $(1,000+1,200)/2 = 1,100$ . Next-  $1,000 * 2.1667 = 2,383.37$  month. Next-  $2,383.37 * 12 =$  Annual income: \$28,600.44
- 4) Monthly: The most recent paycheck stub.
  - a. To calculate: Multiply the gross amount by 12 to get annual income.
  - b. Example:  $\$900 * 12 =$  Annual income: \$10,800

F. Unearned Income - is all income that is not earned. Unearned income shall be used in determining eligibility. Some common examples are:

- 1) In-kind support and maintenance (food or shelter) given to an individual or received by an individual because someone else paid for it,
- 2) Private pensions and annuities,
- 3) Payments such as Social Security benefits, Railroad Retirement benefits, Department of Veterans Affairs benefits, civil service annuities, workers' compensation, unemployment insurance, retirement benefits, and payments based on need involving federal funds,
- 4) Life insurance proceeds and other death benefits, to the extent that the total amount is more than the expenses of the deceased person's last illness and burial, and other debts paid by the individual,
- 5) Gifts and inheritances,
- 6) Support (not child support) and alimony payments in cash,

- 7) Prizes, awards and winnings,
- 8) Dividends and interest,
- 9) Rents and royalties (except those defined as earned income),
- 10) Certain payments not considered wages for Social Security purposes, 11) In-kind payments to certain agricultural workers,
- 11) Jury fees, and/or
- 12) Money paid to individuals who are residents, but not employees of institutions.

- G. Inconsistent Income - frequency varies from week to week, or from month to month due to hours worked. It is considered to be received regularly if an individual can reasonably expect to receive it. Calculation of this income should follow the policy of regular income. Occupations that may fit this description are horticulturist, woodcutter, or substitute teacher.
- H. Seasonal Income – income that is regularly received for only part of the year. Calculation of this income should follow the policy of regular income.
- I. Self-Employment Income – If an applicant is self-employed, a copy of the past year's federal income tax return (to include Schedule C), purchase and sales receipt, or accounting books must be used to establish the source and amount of income.
  - 1) The amount to be used in determining eligibility will be the net income available after deduction of business expenses. Subgrantee should include the amount on the Net Profit or (Loss) line from the Schedule C (Form 1040) Profit or Loss from Business (sole proprietorship), divided by 12.
  - 2) If it is proven that a self-employed applicant's current situation has substantially changed in either size or type of operation from the previous year, the current income should be used. Example: A farmer farmed 40 acres in 2017, but because of ill health did not plant a crop in 2018. The income earned in 2017 should not be considered. The farmer should be considered to have zero income.
  - 3) If the applicant cannot provide the above items, they must provide a notarized statement of income.

#### J. Income of Minors

- 1) Earned Income – A minor's (under 18 years of age) income is excluded in the determination of income eligibility.

- 2) Unearned Income - A minor who receives unearned income such as Social Security or SSI must be included and is listed under the parent or legal guardian in the household.
- K. In a **zero-income household**, is one in which the applicant reports no income is being received by any household members. the subgrantee must confirm additional information from the applicant:
- 1) The applicant must verify how household bills and personal expenses are being paid for. If they are receiving money or in-kind assistance from someone, an affidavit must be obtained from the person providing the assistance. The statement must include the name of the applicant, their phone number, amount of money received, frequency, and signed by the person providing the assistance. Money given to the household must be counted as unearned income. If the person pays the bills directly to the vendor, this is not included as unearned income.
  - 2) Households may report zero income as a result of a recent layoff, medical issues, or other events that have occurred within the last 30 days. Documentation shall be submitted to verify the event, and an affidavit signed by the applicant to declare unemployment or zero-income status. Layoff documentation must be on the employer's letterhead and state the date of the layoff.
  - 3) Non-priority households that report zero income **may** be referred to the Community Services Block Grant (CSBG) program to be put into case management, if the client agrees and the subgrantee determines eligibility. Case management is **not** a requirement for the LIHEAP program.
  - 4) If a household has an open case with Social Security for disability determination, the applicant must show evidence of disability case pending, and present documentation from a medical physician stating the applicant is unable to work. The applicant may be referred to the local Ability to Work office to get an assessment if the applicant has been waiting on a disability determination from Social Security for more than one (1) year. The applicant should return the Residual Functional Capacity Assessment from the Ability to Work office to the subgrantee.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 5.12 Threatening Behavior**

- A. Any applicant who engages in the use of aggressive or disruptive language, threats, or behavior against a subgrantee agency, subgrantee staff, subgrantee contractor, or state/federal staff shall be prohibited from receiving services for one year from the date of

the incident, for the first offense. Any subsequent threats or disruptive behavior will permanently disqualify the client from receiving services.

- B. When a threat or occurrence of physical contact is made against a subgrantee agency, subgrantee staff, subgrantee contractor, or state/federal staff, that staff person must complete an incident report and submit it to the subgrantee's Executive Director. Any kind of physical contact or physical threats with firearms or weapons will disqualify an applicant or household from services permanently. During such an incident, the subgrantee's Executive Director must contact local authorities and file a police report. A copy of the report and detailed account of the incident must be kept in the client's file, scanned into Virtual ROMA, and a copy must be submitted to the Director of the Division of Community Services.

Source: *45 CFR 98.20; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

**Part 24** Chapter 6: Program Process and Procedures

**Rule 6.1 Appointments.**

- A. Applicants should be seen by appointment. Appointments must be given on a first-come, first-served basis, except in the case of emergencies (as listed in Section 6.10) when subgrantees must comply with the 18-48 hour rule, or when a non-availability of funds waitlist opens up.
- B. Applicants arriving within 15 minutes of appointment time shall be seen according to their scheduled appointment. Applicants who arrive later than 15 minutes for a scheduled appointment may have to wait to be seen depending on the time of next scheduled appointment; or be rescheduled for the next available appointment if they cannot be worked into schedule for that day. Subgrantee should make every effort to see the applicant that day if possible.
- C. If the subgrantee has a no-show or a cancellation after the 15-minute grace period, applicants waiting for their appointments shall be seen immediately. Subgrantee may then re-arrange schedule to accommodate other applicants.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

**Rule 6.2 Walk-ins.**

- A. Applicants should schedule an appointment for services. Walk-ins are discouraged unless in the case of emergencies that must be verified by the applicant. (Applicants must have documentation to verify emergency in accordance to Rule 6.10.)
- B. If there is a verifiable emergency and the applicant is unable to complete a preapplication, the subgrantee shall assist the applicant with submitting a preapplication and schedule an intake appointment within the 18–48 hour timeframe.
- C. An applicant shall not be denied an appointment because of inappropriate attire.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: March 2024

**Rule 6.3 Transfers.**

- A. There are two types of client transfers:
  - 1) Intra-agency transfers occur when a client's file is reassigned within an agency. The person with Virtual ROMA agency administration rights is able to make the reassignment internally without DCS intervention.

- 2) Inter-agency transfers occur when clients require services but the agency that last provided services does not provide the requested service. For instance, a client may seek weatherization services from an agency that only administers CSBG/LIHEAP. The requesting agency must contact the point of contact of the agency that has ownership to release the file. The agency that has ownership of the client's record must authorize release of the client to the requesting agency via "Concerns" in Virtual ROMA.
- B. Timely transfers are required to avoid any disruptions in client services. If there is an outstanding request for approval, it must be resolved before a transfer can be done. Transfers **must** occur with twenty-four (24) hours of the request. If this is an emergency, it must follow the 18/48 hour rule.
- C. No household members shall be approved as part of another household during a 30-day period. Emergency situations should be supported with appropriate documentation.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

**Rule 6.4 Virtual ROMA.** LIHEAP subgrantees shall be Virtual ROMA compliant. This compliance includes, but is not limited to:

- A. Every user of the Virtual ROMA system must be registered upon authorization by the subgrantee Executive Director.
- B. Users must agree to the terms and conditions of the use of Virtual ROMA by signing the 'Confidentiality Statement' and returning to DCS.
- C. Users are prohibited from sharing user IDs and passwords.
- D. Users are prohibited from scheduling client appointments outside of Virtual ROMA, except in the case of disasters. The subgrantee's Executive Director shall request in writing and receive approval from DCS in this case.
- E. Subgrantees must ensure that every application for service originates through Virtual ROMA. In the event Virtual ROMA is not available, such as natural disaster, system outage, etc., upon approval by DCS Director, paper applications may be taken. The paper applications shall be entered in Virtual ROMA within two (2) business days of system availability.
- F. Subgrantees generate the electronic GET/PUT files weekly to submit claim forms.
- G. Subgrantees reconcile the payment reports between the fiscal and program units prior to payment. The reconciliation process between outstanding applications in 'Approved' and 'Pending Payment' statuses must be done after the GET and PUT files have been created.

- H. Subgrantees must adhere to equipment and software specifications to operate Virtual ROMA effectively.
- I. Subgrantees must ensure that personnel with application approval rights thoroughly review applications prior to approval to minimize errors.
- J. Subgrantees must deactivate, within 24 hours, any user(s) who through termination, resignation, job reassignment, or other reasons user is no longer with agency.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

#### **Rule 6.5 Household Benefit.**

- A. Subgrantees should pay the amount of the bill. Past due amounts, transfer fees, late fees and reconnect fees may be paid. Non-energy related charges should not be paid using LIHEAP funds. If utility vendor will transfer old bill to new account, this is allowable.
- B. Propane households should receive benefits in the amount of 100 gallons plus any applicable fees, per request up to the benefit matrix amount. If a vendor has a minimum of over 100 gallons to receive services/assistance, an exception is allowed for the subgrantee to pay the vendor's minimum requirement. Proof from vendor must be uploaded to Virtual ROMA and a hard copy added to the client's file.
- C. Pre-pay account clients should receive benefits in the amount of the average monthly amount (as stated on printout/portal) plus any past due amount up to the benefit matrix amount.
- D. Subgrantees may use vendor portals, when possible, to verify the amount of the bill(s).
- E. In addition to the household benefit amount, additional benefits can be provided to the client. The additional benefits include: Blankets, coats, heating/cooling system repair or replacement, furnaces, heaters, hot water tanks, air conditioners, fans, and other energy related services may be provided depending on need and State Office approval.
- F. Emergency LIHEAP Assistance for Life Threatening Medical Issues: In the event an applicant is at risk of disconnection of a utility that is a necessity for any medical equipment or devices needed to sustain life, the applicant should be treated as a **Life-Threatening Crisis** case and should be interviewed same day and approved **within 18 hours** of their initial application. Supporting documents should be provided at the time of interview and scanned into Virtual ROMA and placed in the applicant's file.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: March 2024

### **Rule 6.6 Fees and Deposits.**

- A. Reconnect fees or late fees resulting from a client's inability to pay can be paid from LIHEAP funds. The Subgrantee should advocate with energy vendors to ask for waivers of these fees.
- B. As part of the client's consumer education/energy conservation sessions, the case worker should communicate the importance of making timely payments or requesting extensions with energy vendors to avoid such fees.
- C. If reconnect fees or late fees are incurred because of the subgrantee's negligence or failure to make timely payments, these fees cannot be paid from LIHEAP funds. They must be paid from non-federal funds.
- D. Deposits may be paid more than once, depending on the household situation, such as emergency or life-threatening situations, as described in section 6.10. If a household has requested more than four (4) deposits, Subgrantee should refer household for case management to stabilize the household.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

### **Rule 6.7 Criminal/Illegal Activities**

- A. LIHEAP funds may not be used to pay for any criminal acts punishable with fines, fees, penalties, and/or imprisonment. An application that is submitted for a bill which explicitly states that part of the bill is inclusive of an illegal activity such as tampering and other theft for services shall not be approved until the tampering fees/penalties are paid.
- B. The energy vendor may adjust the bill to remove the illegal fees and the Subgrantee can pay the portion that does not include such fees and penalties. Further, fees and penalties must be paid prior to any LIHEAP funds being obligated on behalf of the client's bill.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

### **Rule 6.8 Client Confidentiality.**

- A. MDHS and its subgrantees are responsible for protecting the confidentiality of client information. All client's personal information received must be processed within five (5) business days.
- B. Subgrantees must maintain client files under lock and key.

- C. Client appointments should be conducted in areas where the conversation cannot be overheard by others.
- D. Subgrantee staff should not discuss client confidential information with other staff unless to coordinate or proceed with client services.
- E. Even though the Virtual ROMA system has a screen for all users to agree to confidentiality before entering client data, each subgrantee staff member is required to sign a ‘Confidentiality Statement’ and submit to DCS prior to being granted access to the Virtual ROMA system.
- F. Client information should only be discussed with other service organizations/partners when referring households for additional services.
- G. The client must sign the ‘Authorization of Release of Information Form’ (Form ARF 001) in order for the subgrantee to refer the household for other services.

The only exception to the confidentiality requirement is if a client or household member discloses potential domestic abuse, child abuse/neglect, elderly abuse/neglect, or disabled abuse/neglect; the information must be reported to the proper authorities, regardless of the consent of the client.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

#### **Rule 6.9 LIHEAP Benefit Matrix.**

- A. The LIHEAP Act stipulates that households with the highest energy costs and needs receive the greatest benefit. LIHEAP benefits are paid based on household income, size of household, energy type, and main heating fuel source. LIHEAP benefits shall not exceed \$1500 per program year for a household. See Benefit Matrix Attachment.
- B. Subgrantees should be careful during the intake process to select the appropriate energy type when asking applicants about their main heating fuel. The main heating fuel is not what bill the applicant is seeking to be paid, but it is how the applicant primarily heats the home. The main heating fuel must not be changed unless the household moves. Also, if a mistake was made by the Subgrantee or client, the main heating fuel can be changed at the beginning of the next program year, once approval has been granted by DCS.
- C. A client cannot exceed their cap by energy type. For example, if, for a one-person household, the propane bill is \$900 and the overall cap is \$1200, the agency cannot pay in excess of the propane limit of \$800 \$650 even if client has not reached the overall cap of \$1200.
  - 1) Example: If a client has annual household income of \$14,500 and their household size is one (1), their maximum LIHEAP benefit for the program year of 2018 is

\$1,100. Depending on how they heat their home the benefit caps by energy type follows:

- i. Propane: \$600
  - ii. Electric: \$500 or \$1,100 (for total electric households)
  - iii. Natural Gas: \$500
  - iv. Wood: \$240
  - v. The benefit amounts are recalculated as income changes if client returns for additional assistance during the program year.
- D. The “Total Electric” column represents the yearly amount that a total electric household may receive. All other households may receive a total of the electric column and the main heating source column that they use.
- E. Propane households should receive benefits in the amount of 100 gallons, per request up to the benefit matrix amount.
- F. The cost for the replacement, repair, or purchase of heating or cooling equipment does not count against the benefit matrix amount for the program year.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

#### **Rule 6.10 Priority Population Procedures.**

- A. Elderly and disabled clients must be seen for regular appointments each time assistance is requested.
- B. Subgrantees can send appointment notices to elderly and/or disabled clients in December to be seen in January because new Social Security and SSI income letters will be received. Should further assistance be needed during the year, the client must submit a new application and provide the required documentation. Subgrantees should allocate the full amount of the bill including applicable fees (past due, transfer, etc).
- C. The process by which appointments are given shall be determined by the subgrantee (i.e. mornings, days of the week, case worker to be assigned to this population, etc). If a client is physically disabled and cannot come to the subgrantee, a caseworker can conduct a home visit to take the application, or the client can authorize someone to make an application on their behalf.
- D. The client should be advised at the time of appointment of the responsibility to report household changes within ten (10) days. Changes can be reported by mail, phone call, email, or office visit.
- E. All contact with the client must be documented in Virtual ROMA. Changes may include, but are not limited to:

- a. Increase or decrease in household members,
- b. Increase or decrease in household income, or
- c. Household moved.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

### **Rule 6.11 Crisis and Emergency Services.**

Mississippi offers a year-round crisis assistance component of LIHEAP, entitled the **Energy Crisis Intervention Program (ECIP)**, which provides assistance to low-income households who have encountered a crisis situation within the last 30 days.

- A. Life Threatening Crisis (LTE) – Eligible households with a life-threatening energy crisis must have the crisis relieved within **18 hours** of an approved application. Resolution of a life-threatening crisis may include, but is not limited to: arranging for an immediate supply of fuel, securing a payment arrangement with the energy vendor, pledging the amount of the bill to prevent shutoff, or to restore service, purchase of heating/cooling equipment, etc. The following are considered life threatening.
  - a. Disaster (fire, gas, leak, etc.)
  - b. Person(s) on life support or medical devices that require electricity
  - c. Domestic violence, and/or
  - d. Elderly, disabled, or child abuse/neglect
- B. Non-Life-Threatening Crisis (NON-LTE) – Eligible households with a non-life-threatening energy crisis must have the crisis relieved within **48 hours** of an approved application. Resolution of a non-life-threatening crisis may include, but is not limited to: arranging for an immediate supply of fuel, securing a payment arrangement with the energy vendor, pledging the amount of the bill to prevent shutoff, or to restore service, purchase of heating/cooling equipment, etc. The following are considered non-life threatening.
  - a. Unexpected expense such as death of an immediate family member, funeral expenses, high medical expenses, etc;
  - b. Income loss within the last thirty (30) days (of the date the subgrantee was contacted) due to layoff or termination of benefits;
  - c. Services are disconnected or threatened to be turned off;
  - d. Theft;
  - e. Displacement of a minor child (under the age of 18) due to the client's inability to pay utilities, rent, etc.; and/or

- f. Other documented emergencies within the last thirty (30) days, as deemed acceptable by the subgrantee.
- C. LIHEAP Assistance for Disaster Relief – Natural disaster (fire, hurricane, tornado, flood, etc.) or extreme inclement weather conditions determined by the National Weather Service and/or declared by the President or Governor. Allowable uses of LIHEAP funds for home energy-related needs resulting from a natural disaster or disasters include:
  - a. Costs to temporarily house or shelter individuals in which homes have been destroyed or damaged;
    - i. Hotels (up to 5 days),
    - ii. Apartments (1 month rent and deposit), or
    - iii. Other living situations that place people in settings to preserve health and safety and to move them away from the crisis situation;
  - b. Costs for transportation (such as cars, shuttles, buses, etc.) to move individuals away from the crisis area to shelters, when health and safety is endangered by loss of access to heating or cooling;
  - c. Utility reconnection costs (does not include water and sewage);
  - d. Repair or replacement cost for furnaces, air conditioners and heaters;
  - e. Insulation repair;
  - f. Coats and blankets, as tangible benefits to keep individuals warm;
  - g. Crisis payments for utilities and utility deposits;
  - h. Purchase and installation of fans, air conditioners and heaters;
  - i. Purchase and installation of generators;
  - j. Costs associated with mobile outreach, and
  - k. Other things needed (contact DCS for approval).

The costs related to utility cost such as utilities, deposits, reconnect fees, and late fees are counted against the annual matrix amount per household. Other costs shall not be counted against the annual matrix benefit amount per household.

#### D. Deceased Head of Household

- a. If the applicant dies before the application for services is approved, the application shall be approved if **all apply**:

- i. All eligibility information received is accurate and meets income guidelines;
    - ii. The bill is for an outstanding balance, not a deposit, and
    - iii. There are other household members.
  - b. This will allow the household to become stable until a new intake can be done to name a new head of household. The agency may assist the new head of household with changing the service into his/her name and paying any necessary deposits to do so.
  - c. If the application is for deposit for services, the application should be denied. If the household has another adult member, a new intake must be done to name a new head of household.
- E. Subgrantees shall, under no circumstances, tell a client that they must have a disconnect notice to apply for assistance. This may put a household in a crisis situation which could be avoided by assisting with regular LIHEAP assistance.
- F. Applicants who are ineligible for crisis benefits shall be referred to other organizations that may be able to assist, or the subgrantee may contact energy vendor(s) on the applicant's behalf to see if a payment arrangement or extension is available.
- G. Multiple emergency requests by a client may result in the subgrantee referring client to CSBG program for intensive case management.

## **Part 24 Chapter 7: Vendor Requirements**

### **Rule 7.1 Vendor Agreements.**

- A. Subgrantees must secure vendor agreements from energy vendors who receive energy payments on behalf of clients. New vendor agreements must be obtained if terms change or by MDHS requirement.
- B. Vendor Agreements and W-9 forms from each vendor must be on file at the subgrantee's main office and available for review upon request during each monitoring visit.
- C. Subgrantees must maintain original vendor agreements indefinitely.
- D. Vendor agreements are not needed for equipment purchases such as air conditioners, heaters, etc.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

### **Rule 7.2 Vendor Refunds.**

- A. Vendor payments refunded to a subgrantee may occur as a result of a household moving, closing an account, other household circumstances, or instances of error or fraud.
- B. Accurate accounting of vendor refunds requires subgrantees and energy vendors to coordinate carefully.
- C. Subgrantees must inform energy vendors to send the refund checks to the agency that submitted the payment on behalf of the household.
- D. If the refund is for a deposit, the vendor can utilize the funds to offset the final bill. However, if there is an overage, the funds must be returned to the subgrantee.
- E. The following information must be submitted with each refund check, even if the refund check is for more than one household:
  - 1) Household's name (name on the account)
  - 2) Address
  - 3) Account number
  - 4) Amount of household refund
  - 5) Year credit occurred
  - 6) Date of payment on account
  - 7) Reason for refund

F. Subgrantees should account for these refunds separately in their accounting system. It is very important that each refund be identified by the LIHEAP program year.

G. Effective as of the 2015 LIHEAP grant year, subgrantees must return all vendor refunds to the Department of Human Services- Division of Community Services. Subgrantees must submit one check for all refunds received for the current year LIHEAP grant (for program year January 1- December 31, 2018) by January 31, 2019. For grants that are extended (carried over), all refunds received from January 1- June 30, 2019) should be submitted in one check to be received by July 31, 2019. Subsequent years will follow this schedule. Subgrantees must submit the following information with each subgrantee refund check:

- 1) Vendor Name and Vendor check #
- 2) Household name for each refund
- 3) Address
- 4) Account number
- 5) Client ID number
- 6) Amount of household refund
- 7) Reason for refund
- 8) LIHEAP grant year
- 9) Date of benefit
- 10) Date refund received by Subgrantee

H. Subgrantee checks should be made payable to: Treasurer, State of Mississippi and mailed to:

Director, Division of Community Services  
200 South Lamar Street  
Jackson, Mississippi 39201

I. Current year vendor refunds will be awarded to subgrantees in their modifications. MDHS-DCS will return any prior year refunds to the Department of Health and Human Services, Office of Community Services.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

**Rule 7.3 Vendor Payments.** Subgrantees must make payments on client accounts to vendors within twenty (20) business days of application approval. Failure to comply will result in a DCS request for Program Integrity to conduct an additional monitoring visit which may result in questioned cost.

## **Part 24 Chapter 8: Program Compliance**

### **Rule 8.1 Reporting and Accountability.**

- A. LIHEAP Household Report information collection is conducted in accordance with the Low-Income Home Energy Assistance Program (LIHEAP) statute (Public Law 97-35, as amended), and 45 CFR 96.82. Information received from this collection provides data to the Administration and Congress in its oversight of grantees' performance in administering the LIHEAP program. The responses to this collection are required in order to obtain LIHEAP funding in accordance with Section 2605(c) (1) (G) of the LIHEAP statute.

The purposes of the LIHEAP Household Report are to report on the number of households assisted with current federal fiscal year funds and those LIHEAP funds obligated in the prior federal fiscal year, but not expended until the current federal fiscal year.

- B. Program Integrity Assessment is part of an effort by HHS to ensure that effective preventive controls, fraud detection, monitoring, and prosecution systems exist at all levels of the program's administration to prevent improper payments, fraud, waste or abuse. Subgrantees must specifically address how the plan will address key elements of an effective fraud prevention system.
- C. LIHEAP Performance Measures report is required by The Office of Community Services (OCS) as a part of the LIHEAP statute to report to Congress on program impacts annually, to develop performance goals, to ensure that benefits are targeted to those households with the greatest home energy need, and to assure that timely resources are available to households experiencing home energy crises.

OCS published a Federal Register notice on June 6, 2013, announcing their intent to seek authorization to require state LIHEAP grantees to report on several new outcome-based LIHEAP performance measures. OCS is now proposing to collect annual data that will establish four performance indicators of the impact of LIHEAP services on its recipients. The data collected will be synthesized to create the following performance measures:

- 1) Benefit Targeting Index for High Burden Households – measures the extent to which the highest benefits are provided to the LIHEAP recipient households with the highest energy burden (the percent of gross income spent on utility costs);
- 2) Energy Burden Reduction Index for High Burden Households – measures the extent to which LIHEAP benefits are adequate to deliver the same energy burden reduction to high burden recipient households as to low and moderate burden recipient households;

- 3) Prevention of Loss of Home Energy Services - the unduplicated count of households where LIHEAP prevented the loss of home energy services; and
  - 4) Restoration of Home Energy Services - the unduplicated count of households where LIHEAP restored home energy services to the client.
- D. Leveraging Report - The State of Mississippi shall participate in the LIHEAP Leveraging Incentive Program. Subgrantees are required to report annually on leveraged resources/benefits received to further assist low-income households with energy-related services. Examples of leveraged resources/benefits include but are not limited to: discounts, arrearage forgiveness, deposit waivers, weatherization material donations, reconnect fee waivers.
- E. Monthly Cost Sheets are required to be submitted monthly by Subgrantees to show expenditures by cost category and line items. These forms should be submitted to the Division of Budgets and Accounting, Office of Procurement Services.
- F. Closeouts - Please see the ‘MDHS Subgrant/ Agreement Manual’ found at [www.mdhs.ms.gov/subgrantee-manual/](http://www.mdhs.ms.gov/subgrantee-manual/) for closeout policy.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: May 2022

**Rule 8.2 Client Complaints/Concerns.** DCS receives client complaints and concerns from the MDHS Constituent Services unit, phone calls/emails from clients or other individuals. Subgrantees should follow these steps when responding to DCS:

- A. DCS will submit the client complaint/concern form in the DCS Client Tracker.
- B. The subgrantee must contact client and provide a response and/or resolution in the client tracker within one (1) to three (3) business days depending on the severity of the case.
- C. If additional time is required to completely resolve the issue, the subgrantee must notify note in the tracker that additional time is needed.
- D. If the concern is not handled within three days, an email will be sent to Executive Director to notify them of concern and to provide a response within twenty-four (24) hours.
- E. If a client makes a complaint at the subgrantee’s office, the subgrantee should attempt to resolve issues before giving the DCS number to the client.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

**Rule 8.3 Case Files.**

- A. Applications and supporting documentation for applicants must be kept in individual case files. Case files must be filed in alphabetical order according to last name. They should always be maintained under lock and key, and housed in the local county of residence of the client. Active case files and inactive case files should be maintained separately.
- B. Case files must not contain copies of client personal identity information (PII) such as social security cards, birth certificates, photo id, etc. These documents must be scanned into Virtual ROMA only and given back to the client.
- C. Please refer to the MDHS Subgrantee Agreement Manual for file retention requirements. However, as a general rule, case files must be maintained for three (3) years. If there is a documented case of waste, fraud, and abuse, audit findings, or a fair hearing was conducted, the file must be maintained for ten (10) years.
- D. The following documents must be in a case file and scanned into Virtual ROMA:
  - 1) Proof of income for all household members;
  - 2) Copy of bill(s) to be paid or portal printout from energy vendor;
  - 3) Intake Form (signed and dated);
  - 4) Authorization of Release of Information form (signed and dated);
  - 5) RFAI form (signed and dated, if applicable);
  - 6) Notification of Services form; and
  - 7) Notification of Pending Services form.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

**Rule 8.4 Waste, Fraud, and Abuse.** The Mississippi Department of Human Services has a zero tolerance for the commission or concealment of acts of waste, fraud and abuse. Allegations of such acts will be investigated and pursued to their logical conclusion, including legal action when warranted.

- A. Waste involves the taxpayers not receiving a reasonable value for money in connection with any government funded activities due to an inappropriate act or omission by players with control over or access to government resources.
- B. Fraud is a type of illegal act involving the obtaining of something of value through willful misrepresentation or a false representation of a material fact, whether by words or by conduct, by false or misleading allegations, or by concealment of that which should have been disclosed, which deceives another so that he acts, or fails to act to his detriment.
- C. Abuse involves behavior that is deficient or improper when compared with behavior that a prudent person would consider reasonable and necessary business practice given the

facts and circumstances. Abuse also includes misuse of authority or position for personal financial interests or those of an immediate or close family member or business associate.

D. Types of Waste and Abuse include, but are not limited to:

- 1) Employee/Board Member - Omitting client information, ghost clients, charging application fees, former employee having access to software, receiving kickback from vendor, misrepresenting household size or income, falsifying application, forging documents needed to complete intake, etc.
- 2) Client- Misrepresenting household size or income, falsifying application, forging documents needed to complete intake, etc.
- 3) Vendor/Contractor- Charging a higher amount than the lowest allowable, doctoring delivery tickets, providing financial incentive to staff to overlook unallowable charges, double charges, incorrect pricing, etc.

E. Reporting Related to Waste, Fraud, and Abuse

- 1) Employee (MDHS) - Any employee who has knowledge of waste, fraud or abuse, or has a good reason to suspect that such conduct has occurred, shall adhere to this policy. When suspected fraudulent activity, waste, or abuse is observed by, or made known to an employee, the employee shall immediately report the activity to their direct supervisor. If the employee believes that the supervisor is involved with the activity, they shall immediately report the activity to the Division of Community Services' Director. If the employee believes that the Division Director may be involved with the activity, the employee shall report the activity to the Office of Inspector General at 1-800-299-6905.
- 2) Employee/Board Member (Subgrantee) - Any employee who has knowledge of waste, fraud or abuse, or has a good reason to suspect that such conduct has occurred, shall adhere to the procedure in this policy. When suspected fraudulent activity, waste, or abuse is observed by, or made known to, an employee, the employee shall immediately report the activity to his/her direct supervisor. If the employee believes that the supervisor is involved with the activity, s/he shall immediately report the activity to the Executive Director. If the employee believes that the Executive Director may be involved with the activity, the employee shall report the activity to the Board of Directors. If it is believed that the Board is involved, it shall be reported to the Office of Inspector General at 1-800-299-6905.
- 3) Client or General Public - DCS cannot compel citizens and clients to report suspected instances of waste, fraud and abuse. DCS, however, strongly encourages citizens and clients to report such. Once management at the

subgrantee level or at the state level has been informed of suspected waste, fraud or abuse, management shall provide the client with the established procedures for filing a report. The Office of Inspector General may be contacted at 1-800-2996905.

- 4) Vendor - Any citizens, customer, vendor or agency that has knowledge of waste, fraud or abuse, or has a good reason to suspect that such conduct has occurred should report the occurrence to the Office of Inspector General at 1-800-299-6905 and may result in an investigation being conducted.
- 5) A confidential report may be submitted through the Virtual Roma website found on <https://virtualroma.mdhs.ms.gov>. If the reporting party does not have access to this system, reporting may be completed at the following contact information:

Call toll free number: 1-800-299-6905

Fax number: 601- 359- 5047

Address: Office of Inspector General  
200 South Lamar Street  
Jackson, MS 39201

- 6) Providing specific occurrence details of suspected waste, fraud, and abuse will expedite investigative efforts. There is no requirement to submit identifying information from those who wish to report suspected waste, fraud, and abuse.
- 7) Tips will be investigated in the order that they have been received with no preference given to those who provided identifying information.

F. Penalties for Substantiated Waste, Fraud, and Abuse- Once an investigation has been completed and reviewed by MDHS Office of Inspector General, penalties may be enforced as follows:

- 1) Employee/Board Member - Employees of MDHS or Subgrantee/Board Member who have been found guilty of waste, fraud and abuse are subject to prosecution and/or recoupment of any benefits provided, following due process as defined in subgrantee regulations and must be terminated or removed from the board. If the Employee/Board Member applies for assistance, they must serve a one (1) year disqualification period from the date of the offense. If other household members exist in the home, the Employee/Board Member may apply for services and the household size of the eligible household members, excluding the head of household, may be used to determine eligibility.
- 2) Client - If it is the client's first offense, they will be ineligible for services for an entire year from the date of the decision and benefits recouped. If it is the client's second offense, they will be disqualified permanently from the program and is subject to

prosecution and/or recoupment of any benefits provided, following due process as defined in agency regulations.

- 3) Vendors and Contractors - Vendors/Contractors suspected of fraud and/or misrepresentation may be suspended from participation and may be subject to prosecution and/or recoupment of any benefits provided, following due process as defined in agency regulations.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: March 2024

**Rule 8.5 Whistleblower Protection.** According to Mississippi Code Section 25-9-173, et seq. an employer can not dismiss or otherwise adversely affect the compensation or employment status of an employee who testifies or provides information to an investigative body.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4* Revised: May 2022

#### **Rule 8.6 Monitoring and Audit**

The Mississippi Department of Human Services (MDHS) is required to monitor the activities of its subgrantees by following the Single Audit Act Amendments of 1996, the Office of Management and Budget (OMB) Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, and the OMB Circular A-133 Compliance Supplement. MDHS shall monitor each project, program, subgrant, function, or activity supported by a Federal award to assure compliance with applicable Federal regulations and that performance goals are achieved.

##### A. Monitoring

- 1) The Department of Health and Human Services (DHHS) requires States to conduct on-site monitoring of LIHEAP subgrantee's once every three (3) years. MDHS elects to conduct an annual monitoring visit to ensure compliance with applicable Federal and State regulations, policies, and procedures.
- 2) MDHS has established uniform monitoring policies designed to ensure that all subgrants under the jurisdiction of MDHS are administered in compliance with Federal requirements and with the terms of the subgrant agreements. Monitoring subgrants, for compliance with the applicable Federal regulations, State laws, Agency policies, and the terms of the subgrant agreements, is the responsibility of the MDHS Division of Monitoring. Please see the 'MDHS Subgrant/ Agreement Manual' found at [www.mdhs.ms.gov/subgrantee-manual/](http://www.mdhs.ms.gov/subgrantee-manual/) for the complete monitoring policy.
- 3) Subgrant monitoring procedures may include several of the various options available. These options include: reviewing reports submitted by the subgrantee; reviewing documentation supporting expenses reported under MDHS subgrants; reviewing the subgrantee's single audit or program-specific audit results and

evaluating audit findings and the subgrantee's corrective action plan; performing on-site reviews of fiscal and programmatic records and observing subgrantee operations; and/or, arranging for limited scope audits of specific compliance areas.

B. Single Audit

- 1) The Director of the Division of Monitoring reviews the subgrantee's audit finding(s), and forwards to the Division of Community Services and the Monitoring Supervisor.
- 2) The audit finding(s) is then placed on a spreadsheet, discussed during monitoring visits with the said subgrantee, and addressed on the monitoring report performed by the Division of Monitoring.
- 3) Please see the 'MDHS Subgrant/ Agreement Manual' found at <https://www.mdhs.ms.gov/administrative-codes/> for specific Single Audit requirements.

C. Federal Program Compliance Review

- 1) At any time the Department of Health and Human Services, Office of Community Services, Division of Energy Assistance may conduct a program compliance review of the State.
- 2) During this review, subgrantees are selected to be monitored on program compliance. Subgrantees must cooperate fully with federal reviewers and provide any requested documentation.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: May 2022

**Rule 8.7 Fair Hearing Process**

A. A fair hearing is available for any applicant or recipient upon written request. A fair hearing provides an opportunity for a more formal review by the subgrantee's Board of Directors concerning the point(s) of dissatisfaction. If the applicant or recipient is still dissatisfied from said Boards' decision, the decision may be appealed to the Division of Administrative Hearings.

B. Basis for a Fair Hearing

- 1) Applicant(s) or recipient(s) shall be provided a copy of the ‘Fair Hearing Process’ during each application or recertification. Upon denial of services, a copy of the ‘Fair Hearing Process’ will be mailed with the denial letter to the applicant. A copy of the process will also be clearly posted in all subgrantee office locations.
- 2) The basis for a fair hearing is listed below:
  - a.An applicant or recipient whose application or recertification concerning eligibility assistance was denied;
  - b.An applicant or recipient whose claims for assistance are not acted upon reasonable promptness; or
  - c.Any other adverse action that detrimentally effects the applicant or recipient by the subgrantee and/or agency
- 3) Some issues are not subject to fair hearings, in which includes but not limited to, a subgrantee failing to have enough funds for the county that the applicant resides in. In this case, said subgrantee should refer applicant(s) to other social service providers, or use non-federal funds if available. If a county runs out of funds before the end of the program year, said subgrantee must maintain a list of applicants who could not be served. These applicants must receive priority when scheduling appointments at the start of the new program year or if additional funds are awarded.

#### D. Appeal to the Subgrantee Level

- 1) After having exhausted all channels of resolution with the Executive Director of the Subgrantee, the applicant or recipient must submit a written request for a fair hearing to the subgrantee Board of Directors within thirty (30) calendar days that the adverse action occurred. The written request must include the following:
  - a. Name and address of applicant or recipient,
  - b. Name of subgrantee,
  - c. Date of denial notice or adverse action taken,
  - d. Reason for said action,
  - e. Justification stating why action should not be taken,
  - f. Statement requesting a fair hearing, and
  - g. Two (2) signed and dated copies of the request (original and one copy).
- 2) Upon receipt of the applicant or recipient’s request, the subgrantee Board of Directors must set the date of the fair hearing for the next scheduled board meeting. The fair hearing will be conducted at the discretion of the Board of Directors for the subgrantee. Said board shall render a written decision within five (5) business days of the fair hearing date.

## E. Appeal to MDHS

- 1) Written Appeal to MDHS for Fair Hearing: After having exhausted all channels for resolution at the subgrantee level, the applicant or recipient has thirty (30) calendar days from the date of the subgrantee Board of Directors' decision letter to submit a written request. The written request must include a copy of the original hearing request and the Board of Directors' decision letter. The request should be submitted to:

Mississippi Department of Human Services  
Director of Administrative Hearings  
Post Office Box 352  
Jackson, Mississippi 39205

- 2) Notice for the Fair Hearing: The recipient or applicant and subgrantee shall receive written notice of the hearing, in which will include a statement of the date and time the hearing is to be held. The hearing may be held telephonically unless a face-to-face hearing is requested. A fair hearing shall be scheduled within seven (7) calendar days the Director of Administrative Hearings receives a proper written request.
- 3) Evidence and/or Documents: All documents relating to any pending proceeding must be submitted to the Director of Administrative Hearings Division of MDHS at the address listed above.
- 4) Informal Disposition: Informal disposition may be made of any case by written stipulation, agreed settlement, consent order, or default.
- 5) Postponement/Continuance: The hearing officer may grant a postponement or a continuance of the fair hearing for good cause based upon a written, advanced request by either party.
- 6) Conduct of Fair Hearings: Subject to the hearing officer's ruling and recommended decision, opportunity must be given to all parties to respond, present evidence, argue all issues involved and call witnesses. A recording of each fair hearing should be made. If a party fails to appear, it may forfeit all rights.
- 7) Order of Hearing: The hearing officer calls the fair hearing to order; introduces himself/herself and gives a brief statement of the nature of the proceeding; states what documents the record contains; calls for opening statements by each party; questions witnesses at will, and adjourns the fair hearing after all evidence has been presented. During testimony, the applicant, recipient or subgrantee's representative(s) may question witnesses, cross-examine the other party's witnesses, and redirect if necessary.

- 8) Recommended Decisions and Final Decisions The hearing officer shall have the responsibility of preparing a statement summarizing the facts brought out in the fair hearing, indicating the policy governing the issue at hand, and making a recommended decision based on the evidence presented. The recommended decision shall be based only on evidence, testimony, and documents presented at the fair hearing. Following the fair hearing adjournment, the hearing officer will forward, both the record and recommended decision, to the MDHS Executive Director for adoption, modification, or reversal. The final decision of the MDHS Executive Director will be forwarded to the recipient or applicant along with the Executive Director of the subgrantee. The decision of the MDHS Executive Director shall be final and binding. The recipient or applicant has exhausted all administrative appeals after the decision from the MDHS Executive Director has been rendered.

#### F. Appeal to U.S. Department of Health and Human Services

- 1) If the final MDHS decision is not satisfactory, the applicant or recipient has ten (10) calendar days to submit a written request to U.S. Department of Health and Human Services. Said request should be sent to:

Secretary  
U.S. Department of Health and Human Services  
Office of Community Services  
370 L'Enfant Promenade, S.W., 5th Floor  
Washington, D.C. 20449

- 2) The written request must include a copy of the original hearing request, the Board of Directors' decision letter, and the final decision from MDHS. A decision and/or hearing will be issued and/or conducted based on the discretion of the U.S. Department of Health and Human Services.
- 3) Note: If at any point during the fair hearings process the original adverse action or denial decision is overturned, the proper actions will be taken by the subgrantee.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4*   Revised: March 2024

## APPENDIX

### Subgrantee List

AJFC Community Action Agency, Inc.	County	Phone Number
Zadier Thomas, Chief Executive Officer z.thomas@ajfcca.org 601-442-8681 ext. 200	Adams Claiborne Copiah Franklin Jefferson Lawrence Lincoln	601-442-8681
P.O. Box 3011 (39121) 8A Feltus St. Natchez, MS 39120		601-437-5419
Office Hours: 8:00 a.m. – 4:30 p.m.		601-894-4745
Bolivar County Community Action Agency Inc.		601-384-5587
Elnora Littleton, Executive Director <a href="mailto:capdir@bolivarcaa.org">capdir@bolivarcaa.org</a>		601-786-3711
810 E. Sunflower Road, Suite 120 Cleveland, MS 38732		601-587-4370
Office Hours: 8:00 a.m. – 4:30 p.m.		601-833-6349
Central Mississippi Inc.	County	Phone Number
Dr. Pamela Gary, Executive Director <a href="mailto:pgary@cmicsp.org">pgary@cmicsp.org</a>	Attala Carroll Grenada Holmes Leflore Montgomery Yalobusha	662-792-4033
108 South Front Street Winona, MS 38967		662-283-4781
Office Hours: 8:00 a.m. – 5:00 p.m.		662-226-7953
Coahoma Opportunities, Inc.		662-834-2437
Edward L. Seals, Executive Director <a href="mailto:eseals@coahomacaa.org">eseals@coahomacaa.org</a>		662-283-1988
P.O. Box 1445 115 Issaquena Avenue Clarksdale, MS 38614		662-283-4781
Office Hours: 8:00 a.m. – 5:00 p.m.		662-226-7953
Community Action of South Mississippi	County	Phone
Vanessa Gibson, Executive Director <a href="mailto:vgibson@casoms.org">vgibson@casoms.org</a>	George Harrison	601-947- 5989
P.O. Box 8723		228-284-6772

5343 Jefferson Street  
Moss Point, MS 39563

Office Hours: 8:30 a.m. – 4:30 p.m.

Jackson

228-769-3156

<b>Hinds County Human Resource Agency</b>	<b>County</b>	<b>Phone</b>
Kenn Cockrell, President & CEO  <a href="mailto:kennco@hchra.org">kennco@hchra.org</a>  P.O. Box 22657 (39211) 258 Maddox Road Jackson, MS 39212  Office Hours: 8:00 a.m. – 5:00 p.m.	Hinds	<b>Number</b>  601-923-3950
<b>LIFT, Inc.</b>	<b>County</b>	<b>Phone</b>
Dorothy Leasy, Executive Director <a href="mailto:dleasy@liftcaa.org">dleasy@liftcaa.org</a>  P.O. Box 2399, Tupelo, MS 38803 1879 North Coley Road., Tupelo MS 38801  Office Hours: 8:00 a.m. – 5:00 p.m.	Calhoun  Chickasaw  Itawamba  Lafayette  Lee  Monroe  Pontotoc  Union	<b>N662umber-</b> 412- 2222  662-447-2089  662-862-4894  662-238-6222  662-842-9511  662-369-4695  662-489-7329  662-534-8104
<b>Madison County Citizens Service Agency</b>	<b>County</b>	<b>Phone</b>
Dr. Mary Sims-Johnson, Executive Director  <a href="mailto:MSJohnson@mccsaweb.org">MSJohnson@mccsaweb.org</a>  P.O. Box 1358 1883 Hwy 43 South Suite M (Main Office) Canton, MS 39046  Office Hours: 8:00 a.m. – 5:00 p.m.	Madison	<b>N umber</b>  601-855-5710
<b>Mid-State Opportunity, Inc.</b>	<b>County</b>	<b>Phone Number</b>
Lynda Bradford, Executive Director  <a href="mailto:midstateopp@bellsouth.net">midstateopp@bellsouth.net</a>  204 North Church Street	DeSoto  Panola  Quitman	662-895-4153  662-487-3076  662-326-8131

Charleston, MS 38921	Tallahatchie	662-647-2463
Office Hours: 8:00 a.m. – 4:45 p.m.	Tate	662-562-7733
	Tunica	662-363-2751
Multi-County Community Service Agency	County	Phone Number
Ronald Collier, Executive Director <a href="mailto:recollier@multicountyrsa.org">recollier@multicountyrsa.org</a>	Clarke	601-776-3461
P.O. Box 905 (39302) 2906 St. Paul Street Meridian, MS 39302	Jasper	601-787-4844
Office Hours: 8:00 a.m. – 5:00 p.m.	Kemper	601-743-5752
	Lauderdale	601-483-4838
	Neshoba	601-656-7261
	Newton	601-683-2733
	Scott	601-469-3061
	Smith	601-782-9578
	Wayne	601-735-3470

Northeast MS Community Services	County	Phone Number
Steve Gaines, Executive Director <a href="mailto:sgaines@maxxsouth.net">sgaines@maxxsouth.net</a>	Alcorn	662-286-9263
P.O. Box 930 801 Hatchie Street Booneville, MS 38829	Benton	662-224-8912
Office Hours: 8:00 a.m. – 4:30 p.m.	Marshall	662-252-2713
Pearl River Valley Opportunity, Inc.	County	Phone Number
Thomas Morris, Executive Director <a href="mailto:tmorris@prvoinc.org">tmorris@prvoinc.org</a>	Prentiss	662-728-8141
P.O. Box 188 756 U.S. Highway 98 Columbia, MS 39429	Tippah	662-837-9812
Office Hours: 8:00 a.m. – 5:00 p.m.	Tishomingo	662-423-7013
Prairie Opportunity Inc.	County	Phone Number
Laura A. Marshall, Executive Director <a href="mailto:lamarshall@bellsouth.net">lamarshall@bellsouth.net</a> <a href="mailto:laurammarshall@prairieopportunity.org">laurammarshall@prairieopportunity.org</a>	Covington	601-765-4871
	Forrest	601-545-8110
	Jefferson Davis	601-792-5356
	Jones	601-428-3171
	Lamar	601-794-1093
	Marion	601-736-9564
	Pearl River	(601)Picayune-403-2203)
	Perry	601-964-8231
	Greene	601-394-2239
	Hancock	228-231-1314
	Stone	601-928-5540

P.O. Box 1526 501 Hwy. 12 West, Suite 110 Starkville, MS 39759	Noxubee Oktibbeha Winston	662-726-4861 662-323-3397 662-773-3465
Office Hours: 8:00 a.m. – 5:00 p.m.		
<b>South Central Community Action Agency</b>  Sheletta Buckley, Executive Director <a href="mailto:sbuckley@yoursccaa.com">sbuckley@yoursccaa.com</a>	<b>County</b>	<b>Phone Number</b>
P.O. Box 6590 (39282) 3891 I-55 South Frontage Road Jackson, MS 39212	Madison CSBG/WX	601-407-5473
Office Hours: 8:00 a.m. – 5:00 p.m.	Rankin LIHEAP CSBG/WX	601-825-1309
	Simpson LIHEAP/CSBG/WX	601-439-7208
	Walthall (WX only)	601-876-6363
<b>Southwest Mississippi Opportunity, Inc.</b>		
Keisha Butler, Executive Director <a href="mailto:kbutler@swmocaa.org">kbutler@swmocaa.org</a>	<b>County</b>	<b>Phone Number</b>
P.O. Box 1667 99649) 4116 Hwy. 51 South McComb, MS 39648	Amite	601-225-7878
Office Hours: 8:00 a.m. – 4:30 p.m.	Pike	601-684-5593
	Pike	601-249-3034
	Walthall	601-876-4511
	Wilkinson	601-888-4211
<b>Sunflower-Humphreys Counties Progress Inc.</b>		
Monica Hope, Chief Executive Officer <a href="mailto:mhope@shcpindianola.com">mhope@shcpindianola.com</a>	<b>County</b>	<b>Phone Number</b>
P.O. Box 908 414 Martin Luther King Drive Indianola, MS 38751	Humphreys	662-247-1961
Office Hours: 8:00 a.m. – 5:00 p.m.	Sunflower	662-887-1431
<b>Warren-Washington-Issaquena-Sharkey CAA</b>		
Jannis Williams, Executive Director <a href="mailto:jwilli@wwiscaa.org">jwilli@wwiscaa.org</a>	<b>County</b>	<b>Phone Number</b>
P.O. Box 1813 1538 Old Leland Road Greenville, MS 38701	Issaquena	662-873-2595
Office Hours: 8:00 a.m. – 5:00 p.m.	Sharkey	662-873-2595
	Warren	601-638-2474
	Washington	662-378-8663
	Yazoo	662-746-1517

**Authorization of Release of Information Form**

**Authorization of Release of Information Form**

By signing below, I, \_\_\_\_\_  
(Client name) acknowledge that additional information or documentation may be needed to determine my household's eligibility for assistance. This authorization gives permission and authorizes \_\_\_\_\_  
(Agency Name) to release or request information on my behalf to the agencies listed below:

- \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I understand any information obtained will be kept confidential and will only be used for the purposes of determining eligibility or referral services. This authorization will remain effective for one year from the date of my signature or if I withdraw my consent, whichever comes first.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ENERGY VENDOR (Electric/Gas/Water/Wood)**

This authorization gives permission to my electric company, \_\_\_\_\_ and/or gas company, \_\_\_\_\_ and/or wood vendor, \_\_\_\_\_ and/or water vendor, \_\_\_\_\_ to provide information about my account to the Mississippi Department of Human Services, Division of Community Services for the purposes of reporting data to the U.S. Department of Health and Human Services in the LIHEAP Performance Measures Report, and/or eligibility determination, program evaluation, and analysis, including before and after receiving LIHEAP, LIHWAP or Weatherization Services. Information to be provided may include, but not be limited to: my annual energy consumption, cost, billing information, payment history, disconnection, past-due amounts and life support status. This authorization will remain effective for one year from the date of my signature. I also understand that this authorization does not guarantee that my household will receive assistance.

Account Name:	Service Address:
Account Number:	SSN (last 4 digits):

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Phone Number

## **Request for Additional Information**

COMMUNITY SERVICES BLOCK GRANT (CSBG)  
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)  
LOW INCOME HOUSEHOLDS WATER ASSISTANCE PROGRAM (LIHWAP)  
WEATHERIZATION ASSISTANCE PROGRAM (WX)

### REQUEST FOR ADDITIONAL INFORMATION

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date Completed: \_\_\_\_\_  
*(Last four digits)*

Date Returned to Agency: \_\_\_\_\_

**Program:**     CSBG     LIHEAP     LIHWAP     Weatherization

Your application for assistance is pending until the following information is missing:

\_\_\_\_\_ Proof of home energy bill. You may submit a bill from your energy vendor (light bill, gas bill, wood bill, etc.) which shows your name and/or account number OR a statement from your landlord showing that utilities are included in your rent OR a notarized wood vendor verification (Form LI-16) if your primary source of heat is wood.

\_\_\_\_\_ Proof of income

- \_\_\_\_\_ a. Pay stubs or a statement from your employer for last four weeks of employment. The amount you earned BEFORE deductions (gross income) must be shown.
- \_\_\_\_\_ b. Supplemental Security Income (SSI) award letter.
- \_\_\_\_\_ c. Temporary Assistance for Needy Families (TANF) award letter. (excluding LIHWAP)
- \_\_\_\_\_ d. Social Security award letter
- \_\_\_\_\_ e. Veteran's Benefits award letter.
- \_\_\_\_\_ f. Unemployment income determination letter.
- \_\_\_\_\_ g. Most recent Federal Income tax return with schedule C(self-employed persons only).
- \_\_\_\_\_ h. Unemployment registration printout/verification.
- \_\_\_\_\_ i. Letter from employer stating layoff or termination.

\_\_\_\_\_ Social Security Cards for \_\_\_\_\_

\_\_\_\_\_ Affidavit

- \_\_\_\_\_ a. Separated Persons
- \_\_\_\_\_ b. Zero Income

\_\_\_\_\_ Other \_\_\_\_\_

If the requested information is not received within ten (10) days from this date, your application will be denied.

Please return to:

**Phone**  
**Fax**

\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Case Worker's Signature

Revised: 05/11/2021

## **Vender Agreement Form**

### **Mississippi Department of Human Services (MDHS) Division of Community Services (DCS)**

#### **Vendor Agreement Low-Income Home Energy Assistance Program**

The Low-Income Home Energy Assistance Program (LIHEAP) provides assistance to eligible low-income households to pay home energy costs. Payments for assistance will be made by \_\_\_\_\_ on behalf of eligible households

LIHEAP Agency \_\_\_\_\_  
to the LIHEAP Energy Vendor who provides the source of electricity or gas services. Checks or ACH deposit will be issued to the LIHEAP Energy Vendor with a list of eligible households attached to it.

This vendor agreement is between:

LIHEAP Agency:	Address, Phone Number and Email Address:
LIHEAP Energy Vendor Legal Name:	Address, Phone Number and Email Address:
Tax ID Number/EIN Number:	

Services provided and billed by LIHEAP Energy Vendor (Mark an "X"):

Electricity Fees  Natural Gas Fees   
Propane Fees  Other Fees (please list) \_\_\_\_\_

Counties served by your company: \_\_\_\_\_

By signing this agreement and accepting payments on behalf of eligible households, the LIHEAP Energy Vendor assures:

- The account number is assigned to each household eligible for electric or gas assistance;
- That eligible households will be charged in a normal business process, the difference between the actual cost of electricity or gas services and the amount of payment made through this program;
- That eligible households will not be treated adversely or differently because of such assistance;
- That there will be no discrimination either in the cost of goods supplied or services provided, against the households on whose behalf payments are made;
- That the amount paid by LIHEAP agency will be credited to individual eligible household account indicated on the listing that accompanies the check or ACH deposit;
- Provide electricity or gas services to each eligible and approved residential household for which payment is provided under LIHEAP;
- Restore electricity or gas services upon payment for households that have been disconnected;
- To not refuse service or otherwise discriminate in the marketing and provision of service to any household because of race, religion, color, national origin, gender, familial status, source of income, level of income, disability, financial status or qualification for low-income services;

Revised  
July 1, 2022

- To not take any adverse action on a household account when an application for assistance is pending, until such time that eligibility for services is determined;
- To not interrupt services if a pledge was sent to LIHEAP Energy Vendor and the LIHEAP agency is meeting the obligations under this agreement;
- That it will cooperate with DCS by providing requested information to DCS regarding annual electricity or gas usage and cost for LIHEAP households, if applicable;
- To provide at no cost to the LIHEAP Agency, household, or MDHS-DCS, written information on a household's home electricity or gas costs, bill payment history or arrearage history for no more than the previous 12 monthly billing periods; and
- To report any instance of fraud, waste, and abuse concerning customer (household), LIHEAP agency, employee, or LIHEAP Energy Vendor, please contact the MDHS Division of Program Integrity at 1-800-299-6905. The report may result in an investigation being conducted and/or permanent disqualification from participating in the LIHEAP.

The LIHEAP Energy Vendor agrees to handle payments in the following manner:

- Payments must be applied ONLY to electricity or gas accounts of the individuals listed, except if: (a) the account is in the name of the spouse who lives at the same address; (b) the account is in the name of a deceased spouse; or (c) verification is obtained from vendor or landlord stating that applicant is responsible for affected utility bill;
- Payments must not be applied to account balances that have previously been written off or paid with other funds;
- Provide written reconciliation and confirmation on a regular basis to LIHEAP agency that benefits have been credited appropriately to households and their services have been restored on a timely basis or disconnection status has been removed if applicable;
- Payments must not be applied to business accounts;
- Payment must be applied only for home electricity or gas services. The following payments are prohibited: water, sewer, repairs, garbage collections, fraudulent services, meter tampering and returned check fees;
- **CASH REFUNDS TO THE HOUSEHOLD OR LIHEAP AGENCY ARE STRICTLY PROHIBITED;**
- Should a credit balance result on an account in which the account holder dies (and there are no other adults in household), or moves out of the LIHEAP Energy Vendor's service area, any amount exceeding the balance owed the LIHEAP Energy Vendor must be refunded to the LIHEAP Agency within 60 days;
- Refund any interest resulting from unused LIHEAP payment made on behalf of the household;
- All household accounts should be credited immediately, but no later than ten (10) days after receipt of check from LIHEAP agency. It is important that all branch offices of LIHEAP Energy Vendor are contacted to ensure that household accounts are credited in a timely manner;
- The LIHEAP Energy Vendor agrees to provide at least one contact person and phone number to the LIHEAP Agency who will ensure that all accounts are credited and answer questions concerning electricity or gas disconnections and payments;
- Refunds must be identified with the year credit occurred, name, address, and account number of the recipient;
- Reconnection fees shall be waived, unless prohibited by ordinance, company bylaws or policies, and a listing be provided to LIHEAP agency on a annual basis;
- Cooperate with any Federal, State, or local investigation, audit, or program review. The LIHEAP Energy Vendor will allow LIHEAP Agency representatives access to all books and records relating to LIHEAP households for the purpose of compliance verification with this Agreement; and;
- Understand that failure to cooperate with any Federal, State, or local investigation, audit, or program review may result in the immediate disqualification from participation in the LIHEAP.

Revised  
July 1, 2022

By signing this agreement and pledging payments of eligible households, the LIHEAP agency assures:

- To not provide pledges on behalf of households without having adequate funds to pay such pledge;
- Pledges will be made **only** on approved applications in the MDHS Virtual ROMA system;
- Payment will occur within twenty (20) business days after application has been approved; and
- Provide LIHEAP Energy Vendor with a list of names, telephone numbers and email addresses of LIHEAP Agency staff designated to approve pledges on behalf of the agency.

The parties acknowledge that this Agreement and the services provided by the LIHEAP Energy Vendor and the LIHEAP Agency are governed by and subject to the federal and state laws and regulations in accordance with the Low-Income Home Energy Assistance Program.

The Mississippi Department of Human Services may terminate this agreement by written notice for failure of either party to comply with the provisions stated herein or when it is deemed to be in the best interest of the State, household, or to comply with applicable laws and regulations.

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Signature of LIHEAP Agency Officer

---

Signature of LIHEAP Energy Vendor Officer

---

Printed Name & Title

---

Printed Name & Title

---

Date

---

Date

Revised  
July 1, 2022

## **Wood Vendor Verification Form**

Agency Name  
Agency Address  
City, State 12345



### **Wood Vendor Verification Form**

Name of Vendor: \_\_\_\_\_  
Vendor Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Phone Number of Vendor:**

**Vendor's Tax ID/SSN:** \_\_\_\_\_ **W-9 on file: Yes**  **No**

**Client Name:** \_\_\_\_\_  
**Client Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Last 4 Digit of Client's SSN:** \_\_\_\_\_ **Client Record ID:** \_\_\_\_\_

Date Purchased	Oct	Nov
Oct	Nov	Dec
Nov	Dec	Jan
Dec	Jan	Feb
Jan	Feb	Mar
Feb	Mar	Apr
Mar	Apr	May
Apr	May	June
May	June	Jul
Jun	Jul	Aug
Jul	Aug	Sep
Aug	Sep	
Sep		
	Cost of Cords (\$)	
Number of Cords Purchased (Qty)	Oct	

## ***Notification of Services Form***

COMMUNITY SERVICES BLOCK GRANT (CSBG)  
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)  
LOW INCOME HOUSEHOLD WATER ASSISTANCE PROGRAM (LIHWAP)

### **NOTIFICATION OF SERVICES**

Household ID: \_\_\_\_\_ Member ID: \_\_\_\_\_ Date: \_\_\_\_\_

Client Name: \_\_\_\_\_ Caseworker: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Grant:  CSBG  LIHEAP  LIHWAP

**( ) LIHEAP Approved**

You have been approved for payment in the amount of \$ \_\_\_\_\_  
with \_\_\_\_\_.

You have been approved for payment in the amount of \$ \_\_\_\_\_  
with \_\_\_\_\_.

**( ) CSBG Approved**

You have been approved for payment in the amount of \$ \_\_\_\_\_ for \_\_\_\_\_ (domain)  
assistance with your \_\_\_\_\_.

**( ) LIHWAP Approved**

You have been approved for payment in the amount of \$ \_\_\_\_\_  
with \_\_\_\_\_.

**( ) Denied**

Regretfully, your application can not be approved at this time. The denial of your application  
was based on the following reason(s):

- Your income exceeds the eligibility guidelines;
- You have reached the maximum LIHEAP benefit within your available Energy Type;
- Information obtained from you and /or other sources is insufficient to determine eligibility
- You did not return requested additional information within ten days;
- No agency funds available;
- Out of compliance with Case Management Service Plan. ***(CSBG Only)***
- Other explanation, if applicable. \_\_\_\_\_

\*\*If you were approved, payment may take up to six (6) weeks. If you have any questions, please feel free to contact your local office. You can appeal denial for assistance by completing and returning the attached Fair Hearing Request form within thirty (30) days of the date of a denial notice.

Revised: 05/11/2021

***Pending Notification of Services***

COMMUNITY SERVICES BLOCK GRANT (CSBG)  
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)  
LOW INCOME HOUSEHOLD WATER ASSISTANCE PROGRAM (LIHWAP)

**PENDING NOTIFICATION OF SERVICES**

Household ID: \_\_\_\_\_ Member ID: \_\_\_\_\_ Date: \_\_\_\_\_

Client Name: \_\_\_\_\_ Caseworker: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Grant:  CSBG  LIHEAP  LIHWAP

Based on the information provided, you may qualify for service. Your application for assistance has been submitted and is pending approval.

***Pending Approval (LIHEAP)***

You have a pending payment in the amount of \$ \_\_\_\_\_ for assistance with \_\_\_\_\_.

***Pending Approval (CSBG)***

You have a pending payment in the amount of \$ \_\_\_\_\_ for assistance with \_\_\_\_\_.

***Pending Approval (LIHWAP)***

You have a pending payment in the amount of \$ \_\_\_\_\_ for assistance with \_\_\_\_\_.

\_\_\_\_\_ Client's Signature

\_\_\_\_\_ Date

\_\_\_\_\_ Caseworker's Signature

\_\_\_\_\_ Date

\*\*If you are approved, payment may take up to six weeks to post as credit on your account. If you have any questions, please feel free to contact your local office. You may appeal denial for assistance by completing and returning the attached Fair Hearing Request form within thirty (30) days of the date of a denial notice.

Revised: 05/11/2021

**Landlord Verification Form**

**Mississippi Department of Human Services  
Division of Community Services  
Low-Income Home Energy Assistance Program (LIHEAP)  
Landlord Verification Form**

The **Low-Income Home Energy Assistance Program (LIHEAP)** provides assistance to eligible low-income households to pay energy costs. Payment will be made directly to the utility vendor on behalf of the household.

Applicant's Name: \_\_\_\_\_

Household Members: \_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Landlord/Manager Name: \_\_\_\_\_

Landlord/Manager's Address: \_\_\_\_\_  
\_\_\_\_\_

Is the energy cost (electric or gas) included in the rent?      Yes      No

If yes, how much is the monthly charge? \_\_\_\_\_

Are the services disconnected due to an overdue electric or gas bill?      Yes      No

Are you in danger of disconnection for an overdue electric or gas bill?      Yes      No

Is your electric or gas bill past due?      Yes      No

*If approved, the Landlord agrees to decrease the amount of rent from one month by the amount of the LIHEAP payment for the month. If the Landlord fails to decrease the amount, the Landlord will be referred to MDHS - Office of Inspector General Division for fraud, waste, and abuse.*

Landlord/Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

LIHEAP Agency Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Electric or Gas Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Applicant's Account Number: \_\_\_\_\_

## Affidavit

### Affidavit

To be completed and signed by the applicant and/or household member.

1. Date of Application \_\_\_\_\_
2. Applicant's Name \_\_\_\_\_
3. Name of Household Member \_\_\_\_\_
4. Relationship to Applicant       Self       Spouse       Authorized Representative  
                                   Other \_\_\_\_\_
5. Household Member Social Security Number \_\_\_\_\_
6. Household Member Birthdate \_\_\_\_\_

Please check one:     Authorized Representative applying for services on behalf of the applicant.  
                           Separation  
                           Zero-Income Household  
                           Unemployed  
                           Other \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, STATE THAT I \_\_\_\_\_  
FOR THE PERIOD OF \_\_\_\_\_ TO \_\_\_\_\_.

**I UNDERSTAND THAT I CAN BE PENALIZED BY FINES, IMPRISONMENT, AND/OR REIMBURSEMENT OF SERVICES FOR MAKING FALSE STATEMENTS.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature of Authorized Rep. \_\_\_\_\_

Date \_\_\_\_\_

Notary Signature \_\_\_\_\_

Date \_\_\_\_\_

Revised 05/08/2023

## Paper Intake Application (Fillable Form)

<p style="text-align: center;">MS Department of Human Services  <b>Division of Community Services</b>  <i>Paper Application Intake</i></p>										<p style="text-align: center;"><i>For Agency Use Only:</i></p> <p>Date Paper Application Approved: _____</p> <p>Date Allocation PAID: _____</p> <p>Date Paper Application Entered in VR: _____</p>		
<b>HOUSEHOLD</b>												
DATE				AGENCY								
SSN			LAST NAME				FIRST NAME				MI	
ADDRESS								HOME STATUS				
								<input type="radio"/> Own	<input type="radio"/> Rent	<input type="radio"/> Homeless		
								<input type="radio"/> Shelter	<input type="radio"/> Other			
CITY			STATE	ZIP CODE			PHONE NUMBER			EMAIL ADDRESS		
DWELLING TYPE				<input type="radio"/> Site Built <input type="radio"/> Mobile		NOTES						
<b>HOME ENERGY INFORMATION</b>												
Select Main Heating Fuel				Select Supplemental Energy Source				<input type="radio"/> Electric as supplemental heating fuel <input type="radio"/> Gas(Natural Gas) as supplemental heating fuel <input type="radio"/> Propane as supplemental heating fuel <input type="radio"/> Fuel Oil (Kerosene) as supplemental heating fuel <input type="radio"/> Other supplemental heating fuel (Wood)				
Energy Provider	Electricity Account #:	Natural Gas Provider:	Natural Gas Account #:	Propane Provider	Propane Account #:	Fuel Oil Provider:	Fuel Oil Account #:	Wood Provider:	Wood Account #:			

*DCS Revised: 08/2021*

MS Department of Human Services  
**Division of Community Services**  
*Paper Application Intake*

### **HOUSEHOLD INFORMATION WORKSHEET**

	Last Name	First Name	MI	SSN	Income Source 1		Income Source 2		Income Source 3		Total
<b>HH</b>											
1.											
2.											
3.											
4.											
5.											
6.											
7.											

### **HOUSEHOLD INFORMATION CONTINUED**

	Relationship to HH	Birth Date	Gender	Ethnicity	Education Status	Last Grade Completed	Marital Status	Type of Insurance	Elderly	Disabled	Veteran
<b>HH</b>											
1.											
2.											
3.											
4.											
5.											
6.											
7.											

\*Add extra pages as needed for additional members

*DCS Revised: 08/2021*

MS Department of Human Services  
**Division of Community Services**  
*Paper Application Intake*

<b>ROMA</b>	
Presenting Problem	
Previous Contact	
Social History	
Notes	

*DCS Revised: 08/2021*

MS Department of Human Services  
**Division of Community Services**  
*Paper Application Intake*

Problem (Area)		Initiation Date:		Target Date:	
Problem (Situation)			Condition:		
Goal:			Achieve:		
Outcome:					
Comments/Notes:					

<b>CASE MANAGEMENT SERVICE PLAN</b>				
Service Objective:	Responsibility:	Target Date:	Accomplished Date:	Notes:

*DCS Revised: 08/2021*

MS Department of Human Services  
**Division of Community Services**  
*Paper Application Intake*

<b>SERVICES</b>									
SERVICE	DOLLAR UNIT	TIME UNIT	GRANT	VENDOR NAME	ELEMENT CODE	GL CODE	CLIENT ACCOUNT #	DOLLAR AMOUNT	

Service Notes	
---------------	--

Applicant's Signature

Date

Worker's Signature

Date

*DCS Revised: 08/2021*

MS Department of Human Services  
**Division of Community Services**  
*Paper Application Intake*

LIHEAP Matrix	Propane	Electric	Natural Gas	Wood/Other	Total Electric
<b>Allowed</b>					
<b>Used</b>					
<b>Waiting on Approval</b>					
<b>Remaining</b>					

*DCS Revised: 08/2021*

**Federal Poverty Guidelines**

<b><u>FEDERAL POVERTY GUIDELINES EFFECTIVE</u></b>			
<b><u>Effective Dates</u></b>		<b><u>10/1/2023</u></b>	<b><u>10/1/2023</u></b>
<b><u>CSBG, LIHEAP,</u></b>		<b><u>CSBG</u></b>	<b><u>LIHEAP</u></b>
<b>Number in Household</b>	<b>100 % Category</b>	<b>125% Category</b>	<b>60% State Median Income</b>
<b>unit</b>	<b>Percent of Poverty</b>	<b>Percent of Poverty</b>	<b>Percent of Poverty</b>
1	\$14,580	\$18,225	\$23,493
2	\$19,720	\$24,650	\$30,722
3	\$24,860	\$31,075	\$37,951
4	\$30,000	\$37,500	\$45,180
5	\$35,140	\$43,925	\$52,408
6	\$40,280	\$50,350	\$59,637
7	\$45,420	\$56,775	\$60,993
8	\$50,560	\$63,200	\$62,348
9	\$55,700	\$69,625	\$63,703
10	\$60,840	\$76,050	\$65,059
11	\$65,980	\$82,475	\$66,414
12	\$71,120	\$88,900	\$67,770
13	\$76,260	\$95,325	\$69,125
14	\$81,400	\$101,750	\$70,480
15	\$86,540	\$108,175	\$71,836
16	\$91,680	\$114,600	\$73,191
17	\$96,820	\$121,025	\$74,547
18	\$101,960	\$127,450	\$75,902
19	\$107,100	\$133,875	\$77,257
20	\$112,240	\$140,300	\$78,613
For each additional family member add:		Contact MDHS/DCS@20 members for LIHEAP	
5140		6425	

**LIHEAP Benefit Matrix**

## **2024 LIHEAP BENEFIT MATRIX (Fuel Types)**

Household Data	HH Size / Income	Energy Types					
		Household Size of 1	Propane	Electric*	Natural Gas	Wood /Other Fuel	Maximum Benefit
	0 – 3645	800	700	700	400	1500	1500
	3646 – 7290	750	650	650	360	1400	1400
	7291 – 10935	700	600	600	320	1300	1300
	10936 – 14580	650	550	550	280	1200	1200
	14581 – 18225	600	500	500	240	1100	1100
	18226 - 23493	550	450	450	200	1000	1000
	<b>Over 23,493.49 for HH of 1</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of 2	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 4930	800	700	700	400	1500	1500
	4931 – 9860	750	650	650	360	1400	1400
	9861 – 14790	700	600	600	320	1300	1300
	14791– 19720	650	550	550	280	1200	1200
	19721 - 24650	600	500	500	240	1100	1100
	24651 - 30722	550	450	450	200	1000	1000
	<b>Over \$30,722.49 for HH of 2</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of 3	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 6215	800	700	700	400	1500	1500
	6216 - 12430	750	650	650	360	1400	1400
	12431 - 18645	700	600	600	320	1300	1300
	18646 - 24860	650	550	550	280	1200	1200
	24861 - 31075	600	500	500	240	1100	1100
	31076 - 37951	550	450	450	200	1000	1000
	<b>Over 37,951.49 for HH of 3</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of 4	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 7500	800	700	700	400	1500	1500
	7501 - 15000	750	650	650	360	1400	1400
	15001 - 22500	700	600	600	320	1300	1300
	22501 - 30000	650	550	550	280	1200	1200
	30001 - 37500	600	500	500	240	1100	1100
	37501 - 45180	550	450	450	200	1000	1000
	<b>Over 45,180.49 for HH of 4</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of 5	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 8785	800	700	700	400	1500	1500
	8786 - 17570	750	650	650	360	1400	1400
	17571 - 26355	700	600	600	320	1300	1300
	26356 - 35140	650	550	550	280	1200	1200
	35141 - 43925	600	500	500	240	1100	1100
	43926 - 52408	550	450	450	200	1000	1000
	<b>Over 52,408.49 for HH of 5</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of 6	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 10070	800	700	700	400	1500	1500
	10071 - 20140	750	650	650	360	1400	1400
	20141 - 30210	700	600	600	320	1300	1300
	30211 - 40280	650	550	550	280	1200	1200
	40281 - 50350	600	500	500	240	1100	1100
	50351 - 59637	550	450	450	200	1000	1000
	<b>Over 59,637.49 for HH of 6</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of 7	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 11355	800	700	700	400	1500	1500
	11356 - 22710	750	650	650	360	1400	1400
	22711 - 34065	700	600	600	320	1300	1300
	34066 - 45240	650	550	550	280	1200	1200
	45241 - 56775	600	500	500	240	1100	1100
	56776 - 60993	550	450	450	200	1000	1000
	<b>Over 60,993.49 for HH of 7</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of 8	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 12640	800	700	700	400	1500	1500
	12641 - 25280	750	650	650	360	1400	1400
	25281 - 37920	700	600	600	320	1300	1300
	37921 - 50650	650	550	550	280	1200	1200
	50651 - 62348	600	500	500	240	1100	1100
	<b>Over 62,348.49 for HH of 8</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of 9	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 13925	800	700	700	400	1500	1500
	13926 - 27850	750	650	650	360	1400	1400
	27851 - 41775	700	600	600	320	1300	1300
	41776 - 55700	650	550	550	280	1200	1200
	525701 - 63703	600	500	500	240	1100	1100
	<b>Over 63,703.49 for HH of 9</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types
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	<b>Household Size of 10</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
<b>Income is between</b>	<b>0 - 15210</b>	800	700	700	400	1500	1500
	<b>15211 - 30420</b>	750	650	650	360	1400	1400
	<b>30421 - 45630</b>	700	600	600	320	1300	1300
	<b>45631 - 60840</b>	650	550	550	280	1200	1200
	<b>60841 - 65059</b>	600	500	500	240	1100	1100
	<b>Over 65,059.49 for HH of 10</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		<b>Household Size of 11</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
<b>Income is between</b>	<b>0 - 16495</b>	800	700	700	400	1500	1500
	<b>16496 - 32990</b>	750	650	650	360	1400	1400
	<b>32991 - 49485</b>	700	600	600	320	1300	1300
	<b>49486 - 66414</b>	650	550	550	280	1200	1200
	<b>Over 66,414.49 for HH of 11</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		<b>Household Size of 12</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
<b>Income is between</b>	<b>0 - 17780</b>	800	700	700	400	1500	1500
	<b>17781 - 35560</b>	750	650	650	360	1400	1400
	<b>35561 - 53340</b>	700	600	600	320	1300	1300
	<b>53341 - 67770</b>	650	550	550	280	1200	1200
	<b>Over 67,770.49 for HH of 12</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		<b>Household Size of 13</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
<b>Income is between</b>	<b>0 - 19065</b>	800	700	700	400	1500	1500
	<b>19066 - 38130</b>	750	650	650	360	1400	1400

	38131 - 57195	700	600	600	320	1300	1300
	57196 - 69125	650	550	550	280	1200	1200
	<b>Over 69,125.49 or HH of 13</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of <b>14</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 20350	800	700	700	400	1500	1500
	20351 - 40700	750	650	650	360	1400	1400
	40701 - 61050	700	600	600	320	1300	1300
	61051 - 70480	650	550	550	280	1200	1200
	<b>Over 70,481.49 for HH of 14</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of <b>15</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 21635	800	700	700	400	1500	1500
	21636 - 43270	750	650	650	360	1400	1400
	43271 - 64905	700	600	600	320	1300	1300
	64906 - 71836	650	550	550	280	1200	1200
	<b>Over 71,836.49 for HH of 15</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
		Household Size of <b>16</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit
Income is between	0 - 22920	800	700	700	400	1500	1500
	22921 - 45840	750	650	650	360	1400	1400
	45841 - 68760	700	600	600	320	1300	1300
	68761 - 73191	650	550	550	280	1200	1200
	<b>Over 73,191.49 for HH of 16</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					

	<b>Household Size of 17</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
Income is between	0 - 24205	800	700	700	400	1500	1500
	24206 - 48410	750	650	650	360	1400	1400
	48411 - 72615	700	600	600	320	1300	1300
	72616 - 74547	650	550	550	280	1200	1200
	<b>Over 74,547.49 for HH of 17</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
	<b>Household Size of 18</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
Income is between	0 - 25490	800	700	700	400	1500	1500
	25491 - 50980	750	650	650	360	1400	1400
	50981 - 75902	700	600	600	320	1300	1300
	<b>Over 75,902.49 for HH of 18</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
	<b>Household Size of 19</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	0 - 26775	800	700	700	400	1500	1500
	26776 - 53550	750	650	650	360	1400	1400
	53551 - 77257	700	600	600	320	1300	1300
	<b>Over 77,257.49 for HH of 19</b>	0	0	0	0	0	0

Household Data	HH Size / Income	Energy Types					
	<b>Household Size of 20</b>	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
Income is between	0 - 28060	800	700	700	400	1500	1500
	28061 - 56120	750	650	650	360	1400	1400
	56121 - 78613	700	600	600	320	1300	1300
	<b>Over 78,613.49 for HH of 20</b>	0	0	0	0	0	0

\*The electric column represents the amount for households with main heating fuel other than electric.

\*\*The total electric column represents the amount that can be paid for households with electric as their main heating fuel.  
Note: The minimum amount that a household can receive is \$1 because the State of Mississippi pays the amount of the bill.