



# Iowa Department of Human Services

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May 1, 2015

## GENERAL LETTER NO. 4-J-18

ISSUED BY: Bureau of Financial, Health and Work Supports  
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 4, Chapter J, **PROMISE JOBS**, Title page, revised; Contents (page 2), revised; pages 8, 9, and 46 through 51, revised; and pages 52, 53, and 54, new.

### Summary

Chapter 4-J is revised to:

- ◆ Add policy that assistance paid during the appeal process is not subject to recoupment when:
  - A participant appeals:
    - Before the effective date of the intended action on the *Notice of Decision* establishing the beginning date of the limited benefit plan, or
    - Within 10 days from the date the participant receives the notice establishing the beginning date of the limited benefit plan. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period, and
  - The Department is affirmed in an appeal regarding imposition of a limited benefit plan.
  - A limited benefit plan with a new effective date applies.
- ◆ Add policy that a limited benefit plan with a new effective date applies when the final decision affirms the limited benefit plan and the appeal was filed:
  - Before the effective date of the intended action on the *Notice of Decision* establishing the beginning date of the limited benefit plan, or
  - Within 10 days from the date the participant receives the notice establishing the beginning date of the limited benefit plan. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period.
  - FIP assistance continued pending the outcome of the appeal.
- ◆ Clarify policies and procedures for stopping a limited benefit plan.

- ◆ Clarify procedures to follow when an appeal decision reverses the limited benefit plan.
- ◆ Update form names and numbers.
- ◆ Update links due to the Department's new website.

**Effective Date**

Immediately.

**Material Superseded**

This material replaces the following pages from Employees' Manual, Title 4, Chapter J:

<u>Page</u>	<u>Date</u>
Title page	October 22, 2004
Contents (page 2)	October 28, 2005
8, 9, 46	October 22, 2004
47-49	October 28, 2005
50	October 22, 2004
51	October 28, 2005

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.

Revised May 1, 2015

Employees' Manual  
Title 4  
Chapter J

# PROMISE JOBS



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### **Referring Hardship Exemption Families**

**Legal reference:** 441 IAC 41.30(3), 93.104(239B)

Families that are subject to the 60-month FIP limit can receive FIP beyond that limit only if they request and are determined eligible for a hardship exemption. The hardship determination is a two-step process:

- ◆ First, you are responsible for determining whether the family has a hardship condition that affects its ability to be self-supporting.
- ◆ Second, the “adults” in the family must work with PROMISE JOBS and complete a family investment agreement.

The family must meet the requirements of both steps before the hardship exemption request can be approved. When you have decided that the family has a hardship condition, the adults in the family must then work with PROMISE JOBS to develop and sign a six-month family investment agreement before the hardship exemption request can be approved.

To refer families who are requesting FIP beyond 60 months,

- ◆ Complete section 1 of form 470-3876, *Hardship Exemption Determination*, and provide a copy to PROMISE JOBS.
- ◆ If the FIP case is closed and a *Financial Support Application*, forms 470-0462 or 470-0462(S), has been received, pend the case on ABC.
- ◆ Enter the system referral code on ABC. See [14-B-Appendix](#), TD03 JOBS, for appropriate codes.
- ◆ Use the PJCase system Calendar to schedule an appointment for the applicant to meet with PROMISE JOBS to write and sign the family investment agreement. Schedule the appointment for the earliest time available with the applicant’s agreement. The appointment date offered must be within ten days. PROMISE JOBS will handle any rescheduling after the initial appointment is scheduled.
- ◆ Complete form 470-3897, *FIA Appointment*. Provide a copy to the applicant and forward a copy to PROMISE JOBS. If form 470-3897 must be mailed to the client, allow five mailing days, unless the client agrees to an earlier appointment.

- ◆ Provide a copy of form 470-0806, *Self-Assessment*, to the applicant with instructions to complete the form to the best of their ability and take it to the PROMISE JOBS appointment.
- ◆ Provide an overview of the PROMISE JOBS program by use of InfoShare, if the FIP case is closed and a *Financial Support Application* was required.

After the adults have signed the six-month family investment agreement and the family's hardship exemption is subsequently approved, the adults are mandatory PROMISE JOBS participants. They cannot be exempt from PROMISE JOBS. Adults with disabilities will have the disabilities addressed in their six-month family investment agreement.

When a parent in the family receives SSI, the affect of the 60-month FIP limit is as follows:

- ◆ When the only parent or both parents in the home receive SSI, the 60-month FIP limit does **not** apply. Therefore, either type family does not need a hardship exemption to qualify for FIP beyond 60 months.
- ◆ However, the 60-month limit **does** apply when both parents are in the home but only one parent receives SSI. As a result, the family can receive FIP beyond the 60-month limit only if it requests and is granted a hardship exemption.

To be granted the hardship exemption, both parents must work with PROMISE JOBS and complete the six-month family investment agreement. After the hardship exemption request is approved, both the SSI parent and the non-SSI parent are mandatory PROMISE JOBS referrals.

**Note:** Families that are approved for a hardship exemption must meet all other FIP requirements. Therefore, in addition to the adults, other members of the family may be required to participate in PROMISE JOBS and sign the six-month family investment agreement, e.g., a minor parent who is a child on the adult's FIP case, or a 16- to 18-year-old who is not in school.

See [4-C, Hardship Exemption](#), for a definition of "adult" and other pertinent information.

5. Mr. B and his children are ineligible for FIP for the months of March through August, as Mr. B chose a **subsequent** limited benefit plan. Mr. B reapplies for FIP on May 11. The worker denies the application due to the limited benefit plan.

Mr. B applies again on October 17. The IM worker refers Mr. B to PROMISE JOBS to begin the family investment agreement process. Mr. B. signs the family investment agreement on October 27 and agrees to complete 20 hours of job search to get FIP again.

On November 2, PROMISE JOBS notifies IM that Mr. B completed his job search. The IM worker approves FIP effective October 27, the date the family investment agreement was signed.

6. Same as Example 5, except Mr. B signs his family investment agreement on October 20. The IM worker approves FIP effective October 24, which is seven days from the application date.

### **Stopping a Limited Benefit Plan**

**Legal reference:** 441 IAC 41.24(239B)

#### **Policy:**

A limited benefit plan must be stopped when:

- ◆ The client reconsiders the limited benefit plan as described at [Reconsidering a Limited Benefit Plan](#).
- ◆ The limited benefit plan was imposed in error.
- ◆ The client was exempt and referred to PROMISE JOBS in error.
- ◆ A child leaves the household of the person who chose the limited benefit plan or turns 18 and is no longer part of that person's FIP household.
- ◆ The person who chose the limited benefit plan leaves the home.
- ◆ The client files an appeal:
  - Before the effective date of the intended action on the *Notice of Decision* establishing the beginning date of the limited benefit plan, or
  - Within 10 days from the date the participant receives the notice establishing the beginning date of the limited benefit plan. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period.

A limited benefit plan is considered temporarily stopped pending issuance of a final appeal decision. The limited benefit plan will be considered imposed in error if the final decision reverses the decision to impose the limited benefit plan.

When a limited benefit plan was imposed in error, it is not considered a valid limited benefit plan.

**Procedure:**

Stopping a limited benefit plan is the responsibility of either the income maintenance worker or the PROMISE JOBS worker, depending upon the situation.

The PROMISE JOBS worker is responsible for stopping the limited benefit plan when:

- ◆ The client reconsiders and signs the family investment agreement, or
- ◆ PROMISE JOBS discovers they have imposed the limited benefit plan in error.

See [Reconsidering a Limited Benefit Plan](#) for information on actions required of the IM worker when PROMISE JOBS stops a limited benefit plan because the client reconsiders.

The IM worker is responsible for stopping the limited benefit plan in the following situations, and for taking the corresponding action.

<b>Situation:</b>	<b>IM worker action:</b>
<p>An appeal is filed:</p> <ul style="list-style-type: none"> <li>◆ Before the effective date of the intended action on the <i>Notice of Decision</i> establishing the beginning date of the limited benefit plan, or</li> <li>◆ Within 10 days from the date the participant receives the notice establishing the beginning date of the limited benefit plan. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period.</li> </ul>	<p>Stop the limited benefit plan and issue a <i>Notice of Decision</i> by entering an “A” in PJCase. Reinstate FIP in ABC. See <a href="#">Appealing a Limited Benefit Plan</a>.</p> <p>If the final appeal decision affirms the limited benefit plan, use PJCase to reactivate the limited benefit plan with a new effective date.</p> <p>If the final decision reverses the limited benefit plan, use PJCase to change the limited benefit plan stop reason from “A” to “C.”</p>

<b>Situation:</b>	<b>IM worker action:</b>
<p>A child in a limited benefit plan chosen by a parent leaves the household. Or, a child leaves the household of a needy specified relative who chose a limited benefit plan effective October 1, 2005, or earlier.</p> <p>Variations:</p> <ul style="list-style-type: none"> <li>◆ A minor parent and child leave the adult parent’s or needy specified relative’s home and become eligible on another case.</li> <li>◆ A minor parent turns 18 (or completes high school if between the ages of 18 and 19) and applies for a separate case.</li> <li>◆ A minor parent and child are canceled effective month one of the adult’s limited benefit plan, and the minor parent applies for a separate FIP case as a minor parent living in the home of a self-supporting parent.</li> </ul>	<p>Stop the limited benefit plan for that child by entering a “B” in PCase. (The limited benefit plan remains in place for the parent or needy specified relative who chose it and any members of the eligible group who remain with that parent or needy specified relative.) See <a href="#">To Whom the Limited Benefit Plan Is Applied</a>.</p> <p>Stop the limited benefit plan for the minor parent and the minor parent’s child by entering a “B” in PCase. See <a href="#">Minor Parents Living With FIP Parent</a>.</p> <p>Stop the limited benefit plan for the minor parent and the minor parent’s child by entering a “B” in PCase. (The minor parent is no longer considered a child, so the adult parent’s or needy specified relative’s limited benefit plan no longer applies.) See <a href="#">Minor Parents Living With FIP Parent</a>.</p> <p>Stop the limited benefit plan for the minor parent and the minor parent’s or relative’s child by entering a “B” in PCase. See <a href="#">Minor Parents Living With FIP Parent</a>.</p>
<p>The person was referred to PROMISE JOBS in error for one of the following reasons:</p> <ul style="list-style-type: none"> <li>◆ Exempt due to alien status.</li> <li>◆ Exempt due to the receipt of SSI or school attendance at the time the <i>Notice of Decision</i> was issued imposing the limited benefit plan and the person timely reported and verified the receipt of SSI or change in school attendance.</li> </ul>	<p>See <a href="#">Who Is Exempt From JOBS Participation</a>.</p> <p>Stop the limited benefit plan and issue a <i>Notice of Decision</i> by entering reason “C” in PCase. Redetermine eligibility.</p> <p>Stop the limited benefit plan and issue a <i>Notice of Decision</i> by entering reason “C” in PCase. Redetermine eligibility.</p>

<b>Situation:</b>	<b>IM worker action:</b>
<ul style="list-style-type: none"> <li>◆ Exempt due to the receipt of SSI or school attendance at the time the <i>Notice of Decision</i> was issued imposing the limited benefit plan <b>but</b> the person had not reported or had not verified the receipt of SSI or change in school attendance.</li> </ul>	<p>Stop the limited benefit plan and issue a <i>Notice of Decision</i> by entering reason “C” in PJCase. Redetermine eligibility. If the receipt of SSI or change in school attendance is not reported and verified until after the effective date of the limited benefit plan, do not issue corrective benefits.</p>
<p>The parent in a two-parent household who chose the limited benefit plan leaves the household, and the other parent did not choose the limited benefit plan.</p>	<p>Stop the limited benefit plan for the remaining parent and any children living with the parent and issue a <i>Notice of Decision</i> by entering reason “D” in PJCase. See <a href="#">Two-Parent Households</a>.</p> <p>When the parent who chose the limited benefit plan leaves before the effective date of the limited benefit plan, reinstate FIP for the remaining household members, if otherwise eligible.</p> <p>When the parent who chose the limited benefit plan leaves on or after the effective date of the limited benefit plan, the remaining household members must reapply to receive FIP.</p> <p>The limited benefit plan remains on the parent who chose it and any children living with that parent. If the parent choosing the limited benefit plan rejoins the household and the limited benefit plan is still in effect, restart the limited benefit plan for rest of the household using PJCase.</p>
<p>The limited benefit plan must be stopped but no other stop reason applies, such as:</p> <ul style="list-style-type: none"> <li>◆ The person who chose the limited benefit plan became exempt due to the receipt of SSI after the <i>Notice of Decision</i> imposing it was issued and remains exempt.</li> </ul>	<p>For a <u>first</u> limited benefit plan or a <u>subsequent</u> limited benefit plan that is beyond the six-month period of ineligibility, stop the limited benefit plan by entering reason “W” in PJCase. Redetermine eligibility. Do not issue corrective benefits.</p> <p>Continue a <u>subsequent</u> limited benefit plan when the six-month period is in effect.</p>

<b>Situation:</b>	<b>IM worker action:</b>
<ul style="list-style-type: none"> <li>◆ A needy specified relative who chose a limited benefit plan effective October 1, 2005, or earlier applies for the needs of the children only.</li> </ul>	<p>For a <u>first</u> limited benefit plan, or a <u>subsequent</u> limited benefit plan that is beyond the six-month period of ineligibility, stop the limited benefit plan by entering reason “W” in PJCase. Determine eligibility for the children only.</p> <p>Consider the limited benefit plan as temporarily stopped. Reactivate it if the relative is needy and reapplies for the specified relative’s own needs.</p> <p>Do not stop the limited benefit plan for the children with reasons “B,” “D,” or “I” unless they no longer live with the relative as ETS will not properly count the relative’s use of the 60-month limit.</p> <p>Continue a <u>subsequent</u> limited benefit plan when the six-month period is in effect.</p> <p>See <a href="#">Needy Specified Relative Chooses a Limited Benefit Plan Effective October 1, 2005, or Earlier</a> for more information.</p>
<ul style="list-style-type: none"> <li>◆ A person is incorrectly included in the LBP.</li> </ul>	<p>Stop the limited benefit plan for the person by entering reason “I” in PJCase. The limited benefit plan remains active for the person who chose it and other members of the eligible group who live with the person and who are subject to the limited benefit plan. Redetermine eligibility. Issue corrective benefits.</p>
<ul style="list-style-type: none"> <li>◆ Household appeals FIP cancellation after being added to the limited benefit plan of a person who entered the home after the plan is in effect for the person who chose it. In this situation, the limited benefit plan must remain active for the person who chose it and stopped for the recently canceled persons.</li> </ul>	<p>Stop the limited benefit plan for the recently canceled persons by entering an “I” in PJCase. The limited benefit plan remains active for the person who chose it. Reinstate FIP pending the appeal if otherwise eligible.</p>

## **PROMISE JOBS APPEAL PROCEDURES**

**Legal reference:** 441 IAC 7, 93.140(239B)

Each FIP applicant and participant has the right to a hearing about services being received or services that have been requested and denied, reduced, canceled, or inadequately provided. Clients also have the right to appeal any acts of discrimination on the basis of race, creed, color, sex, national origin, religion, age, physical or mental disability or political belief.

A PROMISE JOBS participant has the right to appeal the content of the family investment agreement if the disagreement between the participant and the PROMISE JOBS worker cannot be worked out through the informal resolution process.

When the appeal involves actions that affect PROMISE JOBS only, the PROMISE JOBS worker is responsible for preparing the appeal summary and attending the hearing. When the appeal involves a limited benefit plan, both IM and PROMISE JOBS workers have joint responsibility to prepare the appeal summary. Whenever possible, both should be at the appeal hearing in person or by phone.

### **Appealing a Limited Benefit Plan**

**Legal reference:** 441 IAC 7, 93.140(239B)

A person has the right to appeal the establishment of a limited benefit plan at the time of the issuance of the *Notice of Decision* to establish the limited benefit plan. A person can appeal the establishment of a particular limited benefit plan **only once**.

If another appeal is filed after the limited benefit plan appeal, a hearing may be granted only if the appeal involves worker error, such as an incorrect grant computation or an error in determining the eligible group.

### **When an Appeal of a Limited Benefit Plan Is Filed**

**Legal reference:** 441 IAC 7.9(17A), 93.15(4)

**Policy:**

FIP and PROMISE JOBS assistance may continue if an appeal of a limited benefit plan is filed:

- ◆ Before the effective date of the intended action on the *Notice of Decision* establishing the beginning date of the limited benefit plan, or
- ◆ Within 10 days from the date the participant receives the notice establishing the beginning date of the limited benefit plan. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period.

**Procedure:**

The IM worker is responsible for continuing FIP assistance if an appeal of a limited benefit plan is filed before the effective date of the intended action or within 10 days from the date the notice is received. The date the notice is received is considered to be five days after the date on the notice.

Assume the client wants FIP assistance to continue pending the appeal unless the client has stated in writing that they do not want FIP assistance to continue.

If FIP assistance is to continue pending the appeal, stop the limited benefit plan in PJCase and reinstate FIP. The system issues a *Notice of Decision* telling the participant the limited benefit plan has been delayed because of the appeal.

If FIP assistance is continued pending an appeal of a limited benefit plan, PROMISE JOBS assistance may also continue pending the appeal. The PROMISE JOBS worker is responsible for continuing PROMISE JOBS assistance pending an appeal of a limited benefit plan.

Do not stop the limited benefit plan or continue assistance pending the outcome of the appeal if:

- ◆ The client stated in writing that they do not want assistance to continue.
- ◆ The notice under appeal denied assistance.
- ◆ The appeal is filed after the effective date of the intended action establishing the beginning date of the limited benefit plan or more than 10 days from the date the notice is received. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period.

See [Stopping a Limited Benefit Plan](#) in this chapter for more information and [14-O, Stopping an LBP](#), for PJCcase system instructions.

### **When the Final Appeal Decision Affirms the Limited Benefit Plan**

#### **Policy:**

A limited benefit plan with a new effective date applies when the final decision affirms the limited benefit plan and:

- ◆ The appeal was filed:
  - Before the effective date of the intended action on the *Notice of Decision* establishing the beginning date of the limited benefit plan, or
  - Within 10 days from the date the participant receives the notice establishing the beginning date of the limited benefit plan. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period.
- ◆ FIP assistance continued pending the outcome of the appeal.

FIP and PROMISE JOBS assistance issued pending the appeal is **not** subject to recoupment when a new limited benefit plan effective date applies.

#### **Procedure:**

Use the PJCcase system to reactivate a limited benefit plan when the final decision affirms the limited benefit plan and the limited benefit plan was stopped pending the appeal.

Reactivate the limited benefit plan with a **new** effective date when:

- ◆ The appeal was filed:
  - Before the effective date of the intended action on the *Notice of Decision* establishing the beginning date of the limited benefit plan, or
  - Within 10 days from the date the participant receives the notice establishing the beginning date of the limited benefit plan. The date on which the notice is received is considered to be five days after the date on the notice, unless the participant shows that the participant did not receive the notice within the five-day period.
- ◆ FIP assistance continued pending the outcome of the appeal.

Do not recoup FIP assistance when a limited benefit plan with a new effective date applies.

### **When the Final Appeal Decision Reverses the Limited Benefit Plan**

**Legal reference:** 441 IAC 7, 41.24(8)“g”

**Policy:**

If the final appeal decision reverses the decision to impose the limited benefit plan, the limited benefit plan is considered imposed in error and not considered a limited benefit plan.

**Procedure:**

Use the PJCase system to show that the limited benefit plan is considered to be in error (stop reason “C”). This action keeps the system from considering the limited benefit plan as a “valid” limited benefit plan if another limited benefit plan is imposed at a later date.

- ◆ Change the limited benefit plan stop reason from A (timely appeal) to C (in error) if the limited benefit plan was stopped and assistance continued pending the outcome of the appeal.
- ◆ Stop the limited benefit plan with reason C (in error) if the limited benefit plan was not stopped and assistance did not continue pending the outcome of the appeal.

If the final appeal decision reverses the decision to impose the limited benefit plan and assistance was not issued while the appeal was pending, determine eligibility for corrective benefits.