

Final Proposed Filing - Coversheet

Instructions:

In accordance with Title 3 Chapter 25 of the Vermont Statutes Annotated and the “Rule on Rulemaking” adopted by the Office of the Secretary of State, this filing will be considered complete upon filing and acceptance of these forms with the Office of the Secretary of State, and the Legislative Committee on Administrative Rules.

All forms shall be submitted at the Office of the Secretary of State, no later than 3:30 pm on the last scheduled day of the work week.

The data provided in text areas of these forms will be used to generate a notice of rulemaking in the portal of “Proposed Rule Postings” online, and the newspapers of record if the rule is marked for publication. Publication of notices will be charged back to the promulgating agency.

PLEASE REMOVE ANY COVERSHEET OR FORM NOT REQUIRED WITH THE CURRENT FILING BEFORE DELIVERY!

Certification Statement: As the adopting Authority of this rule (see 3 V.S.A. § 801 (b) (11) for a definition), I approve the contents of this filing entitled:

General Assistance Emergency Housing Assistance Rules

/s/ Kristin L. McClure

, on 12/19/24

(signature)

(date)

Printed Name and Title:

Kristin McClure, Interim Deputy Secretary
Agency of Human Services

RECEIVED BY: _____

- Coversheet
- Adopting Page
- Economic Impact Analysis
- Environmental Impact Analysis
- Strategy for Maximizing Public Input
- Scientific Information Statement (if applicable)
- Incorporated by Reference Statement (if applicable)
- Clean text of the rule (Amended text without annotation)
- Annotated text (Clearly marking changes from previous rule)
- ICAR Minutes
- Copy of Comments
- Responsiveness Summary

1. TITLE OF RULE FILING:

General Assistance Emergency Housing Assistance Rules

2. PROPOSED NUMBER ASSIGNED BY THE SECRETARY OF STATE

24P042

3. ADOPTING AGENCY:

Agency of Human Services

4. PRIMARY CONTACT PERSON:

(A PERSON WHO IS ABLE TO ANSWER QUESTIONS ABOUT THE CONTENT OF THE RULE).

Name: Heidi Moreau

Agency: Agency of Human Services, Department for
Children and Families

Mailing Address: 280 State Drive, NOB 1 North, Waterbury,
VT 05671

Telephone: 802-595-9639 Fax:

E-Mail: heidi.moreau@vermont.gov

Web URL *(WHERE THE RULE WILL BE POSTED)*:

<https://dcf.vermont.gov/esd/laws-rules/proposed>

5. SECONDARY CONTACT PERSON:

(A SPECIFIC PERSON FROM WHOM COPIES OF FILINGS MAY BE REQUESTED OR WHO MAY ANSWER QUESTIONS ABOUT FORMS SUBMITTED FOR FILING IF DIFFERENT FROM THE PRIMARY CONTACT PERSON).

Name: Amanda Beliveau

Agency: Agency of Human Services, Department for
Children and Families

Mailing Address: 280 State Drive, HC 1 South, Waterbury,
VT 05671

Telephone: 802-241-0641 Fax:

E-Mail: amanda.beliveau@vermont.gov

6. RECORDS EXEMPTION INCLUDED WITHIN RULE:

(DOES THE RULE CONTAIN ANY PROVISION DESIGNATING INFORMATION AS CONFIDENTIAL; LIMITING ITS PUBLIC RELEASE; OR OTHERWISE, EXEMPTING IT FROM INSPECTION AND COPYING?) No

IF YES, CITE THE STATUTORY AUTHORITY FOR THE EXEMPTION:

PLEASE SUMMARIZE THE REASON FOR THE EXEMPTION:

7. LEGAL AUTHORITY / ENABLING LEGISLATION:

(THE SPECIFIC STATUTORY OR LEGAL CITATION FROM SESSION LAW INDICATING WHO THE ADOPTING ENTITY IS AND THUS WHO THE SIGNATORY SHOULD BE. THIS SHOULD BE A SPECIFIC CITATION NOT A CHAPTER CITATION).

3 V.S.A. § 801(b) (11); 33 V.S.A. § 105(b) (2)

8. EXPLANATION OF HOW THE RULE IS WITHIN THE AUTHORITY OF THE AGENCY:

33 V.S.A. 105(b) (2) states that the Commissioner of the Department for Children and Families (DCF) has the authority to "fix standards and issue regulations necessary to administer" the laws assigned to DCF. Under 33 V.S.A. § 104(b) (1), DCF is responsible for administering the General Assistance program. Emergency housing assistance is provided through the General Assistance program.

9. THE FILING HAS CHANGED SINCE THE FILING OF THE PROPOSED RULE.

10. THE AGENCY HAS INCLUDED WITH THIS FILING A LETTER EXPLAINING IN DETAIL WHAT CHANGES WERE MADE, CITING CHAPTER AND SECTION WHERE APPLICABLE.

11. SUBSTANTIAL ARGUMENTS AND CONSIDERATIONS WERE RAISED FOR OR AGAINST THE ORIGINAL PROPOSAL.

12. THE AGENCY HAS INCLUDED COPIES OF ALL WRITTEN SUBMISSIONS AND SYNOPSES OF ORAL COMMENTS RECEIVED.

13. THE AGENCY HAS INCLUDED A LETTER EXPLAINING IN DETAIL THE REASONS FOR THE AGENCY'S DECISION TO REJECT OR ADOPT THEM.

14. CONCISE SUMMARY (150 WORDS OR LESS):

The proposed rule contains five amendments to the General Assistance program rules: (1) language regarding notices to terminate tenancy was added to the definition of constructive eviction in rule 2622; (2) language was added to rule 2650 authorizing DCF to withhold payments to hotels/motels in violation of lodging licensing rules; (3) the catastrophic and vulnerable populations eligibility categories in rules 2652.2 and 2652.3 have been replaced with the new eligibility criteria set forth in sec. E.321 of Act 113 of 2024; (4) the rule updates the basic needs standard chart in rule 2652.4 to align with the current Reach Up

basic needs dollar amounts; and (5) the methodology for calculating the 30% income contribution in rule 2652.4 was changed from using the least expensive daily motel rate to either the current daily rate at the motel in which the temporary housing applicant is staying or if the applicant is not currently housed in a motel, the average daily rate.

15. EXPLANATION OF WHY THE RULE IS NECESSARY:

This rule is necessary to: (1) maintain the methodology for calculating the 30% income contribution and maintain DCF's authority to withhold payments to hotels/motels in violation of lodging licensing rules, both of which were initially established via emergency rule in July 2023 and October 2023, respectively; and (2) update the eligibility criteria for emergency housing assistance in accordance with Act 113 of 2024.

16. EXPLANATION OF HOW THE RULE IS NOT ARBITRARY:

The rule is not arbitrary because it updates the existing rule to conform to the new emergency housing eligibility criteria in Act 113 of 2024. Other changes were based on input from community organizations, other departments within the Agency of Human Services, and program staff seeking to improve administrative efficiency and access to the program.

17. LIST OF PEOPLE, ENTERPRISES AND GOVERNMENT ENTITIES AFFECTED BY THIS RULE:

Households applying for General Assistance emergency housing assistance; the Department for Children and Families; motels/hotels serving General Assistance clients; and shelters and organizations serving unhoused populations.

18. BRIEF SUMMARY OF ECONOMIC IMPACT (150 WORDS OR LESS):

The Department estimates that the total cost of providing emergency housing assistance in hotel and motel rooms for fiscal year 2025, based on the criteria in the rule, is approximately \$45,146,513. This includes: (1) an approximated cost for hotel and motel rooms of \$39,439,879; (2) \$5,206,634 in administrative expenses; and (3) \$500,000 in security expenses. An additional \$10,000,000 is appropriated to the Department for grants to housing organizations to

increase shelter capacity and permanent supportive housing. Economic impacts on other parties include: (1) 80 days of emergency housing assistance for eligible households during the months of July 1 through November 30 and April 1 through June 30. About 500 additional households will be eligible for assistance when the 80-day limit and 1,100 room cap are lifted from the months of December through March; and (2) Motel and hotels will be paid for each room occupied by an emergency housing assistance household.

19. A HEARING WAS HELD.

20. HEARING INFORMATION

(THE FIRST HEARING SHALL BE NO SOONER THAN 30 DAYS FOLLOWING THE POSTING OF NOTICES ONLINE).

IF THIS FORM IS INSUFFICIENT TO LIST THE INFORMATION FOR EACH HEARING, PLEASE ATTACH A SEPARATE SHEET TO COMPLETE THE HEARING INFORMATION.

Date: 10/25/2024

Time: 10:00 AM

Street Address: St. Leo's Hall, 109 South Main Street,
Waterbury, VT

Zip Code: 05671

URL for Virtual: https://teams.microsoft.com/l/meetup-join/19%3ameeting_MjNhOTdjNDYtNTkxMy00YWQ4LTg0MDQtYTQxNzkzZWY4YWNm%40thread.v2/0?context=%7b%22Tid%22%3a%2220b4933b-baad-433c-9c02-70edcc7559c6%22%2c%22Oid%22%3a%22a7972903-b22b-48ab-91f0-1282d59b4a10%22%7d

Date:

Time: AM

Street Address:

Zip Code:

URL for Virtual:

Date:

Time: AM

Street Address:

Zip Code:

URL for Virtual:

Date:

Time: AM

Street Address:

Zip Code:

URL for Virtual:

21. DEADLINE FOR COMMENT (NO EARLIER THAN 7 DAYS FOLLOWING LAST HEARING):

11/1/2024

KEYWORDS (PLEASE PROVIDE AT LEAST 3 KEYWORDS OR PHRASES TO AID IN THE SEARCHABILITY OF THE RULE NOTICE ONLINE).

General Assistance

GA

Motel Voucher

Emergency Housing

280 State Drive - Center Building
Waterbury, VT 05671-1000



OFFICE OF THE SECRETARY
TEL: (802) 241-0440
FAX: (802) 241-0450

JENNEY SAMUELSON
SECRETARY

KRISTIN MCCLURE
DEPUTY SECRETARY

STATE OF VERMONT
AGENCY OF HUMAN SERVICES

MEMORANDUM

TO: Sarah Copeland Hanzas, Secretary of State

FROM: Jenney Samuelson, Secretary, Agency of Human Services

DATE: November 21, 2024

SUBJECT: Signatory Authority for Purposes of Authorizing Administrative Rules

I hereby designate Kristin McClure, Deputy Secretary, Agency of Human Services as signatory to fulfill the duties of the Secretary of the Agency of Human Services as the adopting authority for administrative rules as required by Vermont's Administrative Procedures Act, 3. V.S.A § 801 et seq.

CC: KristinMcClure@vermont.gov

Adopting Page

Instructions:

This form must accompany each filing made during the rulemaking process:

Note: To satisfy the requirement for an annotated text, an agency must submit the entire rule in annotated form with proposed and final proposed filings. Filing an annotated paragraph or page of a larger rule is not sufficient. Annotation must clearly show the changes to the rule.

When possible, the agency shall file the annotated text, using the appropriate page or pages from the Code of Vermont Rules as a basis for the annotated version. New rules need not be accompanied by an annotated text.

1. **TITLE OF RULE FILING:**

General Assistance Emergency Housing Assistance Rules

2. **ADOPTING AGENCY:**

Agency of Human Services

3. **TYPE OF FILING** (*PLEASE CHOOSE THE TYPE OF FILING FROM THE DROPDOWN MENU BASED ON THE DEFINITIONS PROVIDED BELOW*):

- **AMENDMENT** - Any change to an already existing rule, even if it is a complete rewrite of the rule, it is considered an amendment if the rule is replaced with other text.
- **NEW RULE** - A rule that did not previously exist even under a different name.
- **REPEAL** - The removal of a rule in its entirety, without replacing it with other text.

This filing is **AN AMENDMENT OF AN EXISTING RULE** .

4. **LAST ADOPTED** (*PLEASE PROVIDE THE SOS LOG#, TITLE AND EFFECTIVE DATE OF THE LAST ADOPTION FOR THE EXISTING RULE*):

SOS Log # 15-010, General/Emergency Assistance
Temporary Housing Rules, March 28, 2015





INTERAGENCY COMMITTEE ON ADMINISTRATIVE RULES (ICAR) MINUTES

Meeting Date/Location: August 12, 2024, virtually via Microsoft Teams

Members Present: Chair Sean Brown, Diane Sherman, Jared Adler, Jennifer Mojo, John Kessler, Michael Obuchowski, Natalie Weill, and Nicole Dubuque

Members Absent:

Minutes By: Melissa Mazza-Paquette

- 2:00 p.m. meeting called to order, welcome and introductions.
- Approval of minutes from the July 8, 2024 meeting.
- No additions/deletions to agenda. Agenda approved as drafted, noting that proposed rules #2-5 and proposed rules #8-11 will be taken up together when presented.
- No public comments made.
- Presentation of Proposed Rules on pages 2-13 to follow.
 1. General Assistance Emergency Housing Assistance Rules, Department for Children and Families, page 2
 2. Health Benefits Eligibility and Enrollment Rule, Eligibility Standards (Part 2), Agency of Human Services, page 3
 3. Health Benefits Eligibility and Enrollment Rule, Nonfinancial Eligibility Requirements (Part 3), Agency of Human Services, page 4
 4. Health Benefits Eligibility and Enrollment Rule, Eligibility-and-Enrollment Procedures (Part 7), Agency of Human Services, page 5
 5. Administrative Rules for Notaries Public, Secretary of State, Office of Professional Regulation, page 6
 6. Licensing and Operating Rules for Therapeutic Community Residences, Department of Disabilities, Aging and Independent Living, page 7
 7. Administrative Rules for Peer Support Provider Certification and Peer Recovery Support Specialist Certification, Secretary of State, Office of Professional Regulation, page 8
 8. Dental Services, Agency of Human Services, page 9
 9. Dental Services for Beneficiaries Under Age 21, and Pregnant and Postpartum Women, Agency of Human Services, page 10
 10. Orthodontic Treatment, Agency of Human Services, page 11
 11. Medical and Surgical Services of a Dentist, Agency of Human Services, page 12
 12. Chiropractic Services, Agency of Human Services, page 13
- Next scheduled meeting is September 9, 2024, at 2:00 p.m.
- 3:26 p.m. meeting adjourned.

Proposed Rule: General Assistance Emergency Housing Assistance Rules, Department for Children and Families

Presented By: Heidi Moreau

Motion made to accept the rule by Sean Brown, seconded by Jen Mojo, and passed unanimously except for Natalie Weill who abstained, with the following recommendations:

1. Proposed Filing – Coversheet, #12: Include more summary details to align with the economic impact statement, including impacts on other entities.
 - a. Note: this statement is not published in newspapers, however it is published in the portal.
2. Economic Impact Analysis:
 - a. #3
 - i. Include the data on the number of people if available.
 - ii. Regarding the last sentence, explain if the rule was incorporated in some way; identify how the rule change is identified is tied to the additional amount.
 - b. #6: Explain the positive impacts.
3. Proposed Rule, Benefit Issuance: Clarify the compliance distinction for the Vermont Department of Health and the Licensed Lodging Establishment Rule and the Vermont Fire and Building Safety Code.

DRAFT

Economic Impact Analysis

Instructions:

In completing the economic impact analysis, an agency analyzes and evaluates the anticipated costs and benefits to be expected from adoption of the rule; estimates the costs and benefits for each category of people enterprises and government entities affected by the rule; compares alternatives to adopting the rule; and explains their analysis concluding that rulemaking is the most appropriate method of achieving the regulatory purpose. If no impacts are anticipated, please specify “No impact anticipated” in the field.

Rules affecting or regulating schools or school districts must include cost implications to local school districts and taxpayers in the impact statement, a clear statement of associated costs, and consideration of alternatives to the rule to reduce or ameliorate costs to local school districts while still achieving the objectives of the rule (see 3 V.S.A. § 832b for details).

Rules affecting small businesses (excluding impacts incidental to the purchase and payment of goods and services by the State or an agency thereof), must include ways that a business can reduce the cost or burden of compliance or an explanation of why the agency determines that such evaluation isn’t appropriate, and an evaluation of creative, innovative or flexible methods of compliance that would not significantly impair the effectiveness of the rule or increase the risk to the health, safety, or welfare of the public or those affected by the rule.

1. TITLE OF RULE FILING:

General Assistance Emergency Housing Assistance Rules

2. ADOPTING AGENCY:

Agency of Human Services

3. CATEGORY OF AFFECTED PARTIES:

LIST CATEGORIES OF PEOPLE, ENTERPRISES, AND GOVERNMENTAL ENTITIES POTENTIALLY AFFECTED BY THE ADOPTION OF THIS RULE AND THE ESTIMATED COSTS AND BENEFITS ANTICIPATED:

Households applying for General Assistance temporary housing assistance: As of December 4, 2024, 1099 households were receiving emergency housing assistance. This figure includes 348 households that had previously exhausted their 80-day housing limit.

Households with income eligible for emergency housing assistance: While the Department is unable to quantify

the economic impact to these households, the Department anticipates a positive economic impact. The methodology for calculating income contribution based on the average or current daily motel rate will reduce the number of days a household must self-pay for housing before receiving temporary housing assistance.

Department for Children and Families: The Department estimates that the total cost of providing emergency housing assistance for fiscal year 2025 is approximately \$45,146,513. This includes: (1) an approximated cost for hotel and motel rooms of \$10,880,000 from July 1 to September 15, \$4,249,390 from September 15 to November 30, \$15,891,993 from December 1 to March 31, and \$8,418,496 from April 1 to June 30; (2) \$5,206,634 in administrative expenses; and (3) \$500,000 in security expenses.

Motels/hotels serving General Assistance clients: Act 113 caps the daily rate paid to motels/hotels housing General Assistance clients at \$80 a day per room. Act 113 authorized the Department to contract with motels/hotels at a rate not to exceed \$80 per room and include provisions to address access to services or related needs.

Shelters and organizations serving unhoused populations: Under the proposed rule, households must be housed in community-based shelter, if shelter space is available. Act 113 appropriated \$10,000,000 to expand shelter bed capacity and permanent supportive housing.

4. IMPACT ON SCHOOLS:

INDICATE ANY IMPACT THAT THE RULE WILL HAVE ON PUBLIC EDUCATION, PUBLIC SCHOOLS, LOCAL SCHOOL DISTRICTS AND/OR TAXPAYERS CLEARLY STATING ANY ASSOCIATED COSTS:

No impact.

5. ALTERNATIVES: *CONSIDERATION OF ALTERNATIVES TO THE RULE TO REDUCE OR AMELIORATE COSTS TO LOCAL SCHOOL DISTRICTS WHILE STILL ACHIEVING THE OBJECTIVE OF THE RULE.*

Not applicable.

6. IMPACT ON SMALL BUSINESSES:

INDICATE ANY IMPACT THAT THE RULE WILL HAVE ON SMALL BUSINESSES (EXCLUDING IMPACTS INCIDENTAL TO THE PURCHASE AND PAYMENT OF GOODS AND SERVICES BY THE STATE OR AN AGENCY THEREOF):

While the Department is unable to quantify the impact on hotels or motels that are small businesses, the Department anticipates a positive economic impact resulting from payments to hotels and motels providing housing to emergency housing assistance recipients. As of August 21, 2024, the Department was utilizing 1,437 hotel and motel rooms.

7. SMALL BUSINESS COMPLIANCE: *EXPLAIN WAYS A BUSINESS CAN REDUCE THE COST/BURDEN OF COMPLIANCE OR AN EXPLANATION OF WHY THE AGENCY DETERMINES THAT SUCH EVALUATION ISN'T APPROPRIATE.*

The Department has determined that there will be no cost to small businesses associated with the proposed rule.

8. COMPARISON:

COMPARE THE IMPACT OF THE RULE WITH THE ECONOMIC IMPACT OF OTHER ALTERNATIVES TO THE RULE, INCLUDING NO RULE ON THE SUBJECT OR A RULE HAVING SEPARATE REQUIREMENTS FOR SMALL BUSINESS:

The rule allows the Department to establish eligibility criteria to implement Act 113. Having no rule would potentially result in inconsistent application of the Act.

9. SUFFICIENCY: *DESCRIBE HOW THE ANALYSIS WAS CONDUCTED, IDENTIFYING RELEVANT INTERNAL AND/OR EXTERNAL SOURCES OF INFORMATION USED.*

The Department used knowledge of the system, data, as well as its experiences implementing the current General Assistance program to inform this economic impact analysis. The Department's process was sufficient because of the depth and breadth of the process and analysis.

Environmental Impact Analysis

Instructions:

In completing the environmental impact analysis, an agency analyzes and evaluates the anticipated environmental impacts (positive or negative) to be expected from adoption of the rule; compares alternatives to adopting the rule; explains the sufficiency of the environmental impact analysis. If no impacts are anticipated, please specify “No impact anticipated” in the field.

Examples of Environmental Impacts include but are not limited to:

- Impacts on the emission of greenhouse gases
- Impacts on the discharge of pollutants to water
- Impacts on the arability of land
- Impacts on the climate
- Impacts on the flow of water
- Impacts on recreation
- Or other environmental impacts

1. **TITLE OF RULE FILING:**

General Assistance Emergency Housing Assistance Rules

2. **ADOPTING AGENCY:**

Agency of Human Services

3. **GREENHOUSE GAS:** *EXPLAIN HOW THE RULE IMPACTS THE EMISSION OF GREENHOUSE GASES (E.G. TRANSPORTATION OF PEOPLE OR GOODS; BUILDING INFRASTRUCTURE; LAND USE AND DEVELOPMENT, WASTE GENERATION, ETC.):*
No impact.

4. **WATER:** *EXPLAIN HOW THE RULE IMPACTS WATER (E.G. DISCHARGE / ELIMINATION OF POLLUTION INTO VERMONT WATERS, THE FLOW OF WATER IN THE STATE, WATER QUALITY ETC.):*
No impact.

5. **LAND:** *EXPLAIN HOW THE RULE IMPACTS LAND (E.G. IMPACTS ON FORESTRY, AGRICULTURE ETC.):*
No impact.

6. **RECREATION:** *EXPLAIN HOW THE RULE IMPACTS RECREATION IN THE STATE:*
No impact.

7. **CLIMATE:** *EXPLAIN HOW THE RULE IMPACTS THE CLIMATE IN THE STATE:*

No impact.

8. **OTHER:** *EXPLAIN HOW THE RULE IMPACT OTHER ASPECTS OF VERMONT'S ENVIRONMENT:*

None.

9. **SUFFICIENCY:** *DESCRIBE HOW THE ANALYSIS WAS CONDUCTED, IDENTIFYING RELEVANT INTERNAL AND/OR EXTERNAL SOURCES OF INFORMATION USED.*

The proposed rule relates to providing emergency housing assistance and has no impact on any of the above areas. Therefore, this analysis sufficiently captures that there will be no environmental impact.

Public Input Maximization Plan

Instructions:

Agencies are encouraged to hold hearings as part of their strategy to maximize the involvement of the public in the development of rules. Please complete the form below by describing the agency's strategy for maximizing public input (what it did do, or will do to maximize the involvement of the public).

This form must accompany each filing made during the rulemaking process:

1. **TITLE OF RULE FILING:**

General Assistance Emergency Housing Assistance Rules

2. **ADOPTING AGENCY:**

Agency of Human Services

3. **PLEASE DESCRIBE THE AGENCY'S STRATEGY TO MAXIMIZE PUBLIC INVOLVEMENT IN THE DEVELOPMENT OF THE PROPOSED RULE, LISTING THE STEPS THAT HAVE BEEN OR WILL BE TAKEN TO COMPLY WITH THAT STRATEGY:**

The Department published the proposed rule on its website and notified community organizations and subscribers of the Department's electronic rules notifications. The Department held a public hearing, and notified current recipients of General Assistance emergency housing assistance of the proposed changes.

4. **BEYOND GENERAL ADVERTISEMENTS, PLEASE LIST THE PEOPLE AND ORGANIZATIONS THAT HAVE BEEN OR WILL BE INVOLVED IN THE DEVELOPMENT OF THE PROPOSED RULE:**

General Assistance program staff, Department for Children and Families general counsel and policy advisors. The Department received feedback from the Vermont Department of Health, motel owners, members of Vermont Interfaith Action, and community organizations including Vermont Legal Aid, End Homelessness Vermont, and the Vermont Center for Independent Living.

Comments on Bulletin 24-14, draft rule

Rule References: 2650; 2652.2; 2652.3; 2652.4

Submitted by: Paul Dragon, Executive Director of the Champlain Valley Office of Economic Opportunity, on behalf of the Vermont Community Action Partnership
October 24, 2024

My name is Paul Dragon, and I am the Executive Director of the Champlain Valley office of Economic Opportunity. I am here representing the Vermont Community Action Partnership, a group of five Community Action Agencies serving close to 50,000 Vermonters each year. We want to thank you for this opportunity and for your work to draft this rule.

The Vermont Community Action Agencies believe that every person in Vermont can and must have shelter every day and every night, as well as a path to a place they can call their own. We believe the General Assistance Emergency Housing Assistance Rules should begin with this premise. We have concerns about several aspects of the draft rule, especially considering the current crisis we are in. We also have suggestions about how to better address some of the issues facing our state regarding people who are experiencing unsheltered homelessness.

The Current Crisis

First, as you are aware, our staff and our communities, over the past few years, have witnessed an unprecedented increase in homelessness - including unsheltered homelessness - which has culminated today in a health and social crisis. Older Vermonters, children with disabilities, adults with chronic health conditions and people with severe and persistent mental health conditions are homeless and unsheltered in numbers we have never witnessed and can no longer adequately and safely serve and support.

The Opportunity We Have Right Now with These Rules

The State of Vermont - our government and our people - can make the choice to shelter and support every person in Vermont. We know that shelter provides people with a stable foundation to access services that improve the safety and well-being of individuals and communities. Right now, with these Rules, we can begin to make policy choices to create systems and structures that all people can count on in times of crisis.

Specifically, we request the following:

1. Eliminate the room cap
2. No maximum allotment
3. Every person and family who wants or needs shelter must have access to a safe, private space every day and every night, year-round.

Align the GA Emergency Housing rule with Fair Housing laws – specifically allowing and creating a clear and simple process for Reasonable Accommodation (**Please refer to our written testimony for our four suggestions regarding GA Housing and Fair Housing Rules**)

Fair Housing laws. Under Vermont (9 V.S.A. § 4500) and Federal (42 U.S.C. 3601 et seq.), a person with a disability has the right to request a Reasonable Accommodation including a request for a change to a policy or practice that allows a person equal access to housing and services. The General Assistance rules as written do not include a provision for individuals with disabilities to be provided with information about their rights to

request Reasonable Accommodations under Fair Housing law, nor is there a defined process for people to request such accommodations.

Examples of reasonable Accommodation requests include extension of their stay at a hotel/motel; assistance moving belongings, and access to storage space for medical equipment/belongings. Denying a Reasonable Accommodation request could be viewed as discriminatory under Vermont and federal fair housing law. The 80-day limit as defined in the GA rules doesn't allow for extensions, but not providing information about Reasonable Accommodation rights or accepting requests from people with disabilities could be a violation of state and federal fair housing law.

Regarding Reasonable Accommodation and Fair Housing, we request that the Rules include:

1. Include information about the right of a person with a disability to request Reasonable Accommodation with any notice that the person receives about their situation. This would be consistent with including the household's appeal rights in a notice of denial of services (2652.2p "Appeal Rights").
 - a. We do NOT support an 80-day limit and absolutely believe this should be removed. However, if the 80-day limit is not removed, any notice related to the limit must include information about the right to request Reasonable Accommodation. This information should be provided to all people, and it should be clear who has the right, so the person can determine if it applies to them.
2. In section 2652.2o, under "Rights of People with Disabilities," the rules include a statement of rights and that a person can request a hearing or file a complaint if they feel their rights have been violated. This information should be clearly stated on the DCF website and in materials provided to the applicant/participant.
3. Add "Reasonable Accommodation" to the list of definitions in section 2603.
4. Add a basic anti-discrimination statement that lists the federal and state protected classes.

Income Test

We also request that the income test be raised to 200% of the poverty level, so that people are not required to pay 30% of their income until they reach this threshold. The proposal to tether this test to those people just above the Reach Up threshold makes little sense because Reach Up participants make well below 100% of the poverty level and asking people in extreme poverty to divest what few resources, they have in order to qualify for crisis services will just perpetuate the cycle of poverty and the need for shelter and housing.

These requests are not an endorsement of the hotel program, but rather they reflect the recognition that we as a State have not yet developed a plan for affordable permanent housing nor an adequate shelter system for all who need it. If we don't make this long-term and sustained effort through the GA Emergency Housing program, we will continue to see the economic and public health costs to our communities and our state. Sheltering people is not only a moral imperative, but also the most affordable choice at the moment. We at VCAP are ready to work with the State of Vermont on a longer-term plan; however, we must address the crisis we are in right now.

Thank you for considering these comments, and we look forward to seeing them incorporated into the General Assistance Emergency Housing final rule.

From: [Autumn Moen](#)
To: [Moreau, Heidi](#)
Subject: Public Comment on General Assistance Emergency Housing Assistance Rules
Date: Thursday, October 31, 2024 3:42:02 PM

You don't often get email from amoen@hungerfreevt.org. [Learn why this is important](#)

EXTERNAL SENDER: Do not open attachments or click on links unless you recognize and trust the sender.

Good afternoon Heidi,

Please find Hunger Free Vermont's comment on the GA Housing Program rules below.

"The State of Vermont can make policy choices that ensure food security for everyone who lives here. Hunger Free Vermont is expressing concern over the grocery allowance for individuals and families who participate in the GA Housing Program. The current grocery allowance was based on the Reach Up Basic Needs Budget which is based on pre-pandemic grocery prices and has not been updated to reflect inflation. Food prices rose 25% between 2019 and 2023, and the GA Program grocery allowance does not account for this sharp increase.

We believe that everyone deserves access to the food they want and need every day. Food access is a basic human right, and the GA Program benefits allowance rules should reflect this. We recommend that the rules be changed to allow for a more dignified grocery budget for individuals and families participating in the program. For example, the state could use the most recent JFO Basic Needs Budget (2022) which states that an individual living in Vermont needs \$403 per month to meet their nutritional needs. Current rules allow an individual only \$28 for 14 days or \$56 per month. For a family of four with one wage earner, JFO states they would need \$1,263 per month as compared to the current GA Program allotment of \$150. This is completely inadequate for meeting basic human needs. This discrepancy in the grocery allowance only places further strain on community partners to meet the basic needs of individuals and families in the GA Program. The best way to address this is to raise the grocery allowance in the GA Program Rules because we know that food security is a policy choice."

Thank you for ensuring that this comment is reflected on the record. We appreciate the time.

Best,
Autumn

--

Autumn Moen | Legislative Policy Lead

pronouns | she/her

Hunger Free Vermont | 38 Eastwood Drive | Suite # 100 | South Burlington, VT | 05403

802.341.5715 | DIRECT LINE

802.865.0255 | HFVT MAIN LINE

WEBSITE | FACEBOOK | INSTAGRAM | TWITTER

From: [Carrie Stahler](#)
To: [Moreau, Heidi](#)
Subject: Comment from Vermont Foodbank regarding proposed rules for General Assistance
Date: Friday, November 1, 2024 7:42:28 AM

You don't often get email from cstahler@vtfoodbank.org. [Learn why this is important](#)

EXTERNAL SENDER: Do not open attachments or click on links unless you recognize and trust the sender.
Hi Heidi,

Vermont Foodbank supports an increased daily grocery allowance for individuals and families utilizing GA housing listed in Bulletin No. 23-26, section 2651 Groceries and Personal Needs) Groceries and personal needs are defined to include food and essential items; this section has not been updated since 1998 and because of the lack of responsiveness to current costs and household budgets, this section is out of alignment with the current costs of food and personal items. Vermont Foodbank asks that this section be updated to reflect current costs and use a budget that is regularly updated for inflation and real food costs, where possible.

Due to the nature of the General Assistance program and the use of hotels for housing, individuals and families participating in this program need to be able to access adequate food that can be prepared and stored in an environment with limited kitchen and food storage facilities. Vulnerable people who qualify for GA housing often have special dietary needs, as well. Because the amount of financial support allowed for grocery foods is based on the Reach Up Basic Needs Budget, which uses 2019 prices and is not adjusted for inflation, this amount does not reflect the current reality of food costs in every community across the state and does not take into consideration the dietary needs of neighbors accessing the GA program. According to the [USDA ERS](#) food prices rose 25% between 2019 and 2023. Vermont Foodbank's network of partner food shelves and meal sites see the impact of the underfunding of this food allowance, as more people are visiting their locations for food help, and these partners are also often unable to meet special dietary or food preparation and storage needs. The most efficient and effective way to address this issue is to adequately fund a daily grocery allowance for all individuals and families participating in the GA Housing program.

Vermont Foodbank requests the daily allowance for grocery foods be increased and based on a more realistic household budget, like the JFO Basic Needs Budget, which is adjusted regularly for food cost, inflation, and the reality of Vermont household expenses. Any amount of money to support grocery and personal needs must allow individuals to access foods to support special dietary needs to meet their basic health requirements. Additionally, the amount provided must consider the reality of needing to prepare food in an environment that often does not include adequate kitchen and food storage facilities.

In the DCF GA Program chart below, all levels are inadequate for any individual to meet their basic food needs for a day. The JFO Basic Needs Budget from 2022 indicates that a single person needs \$403 in food budget each month. That is an average of about \$13.25 per day for food alone. For a family of four, this amount is \$1263 per month or about \$41 per day (or roughly \$10.38/day per person). However, this data likely assumes that households have access to kitchen facilities to prepare their own meals, store leftovers, or purchase some foods in bulk to store and prepare later. Using a daily allowance of \$13.25 per day may allow individuals to purchase what is considered "convenience" food in grocery stores but in reality means foods which meet their needs, can be reheated in a microwave, and stored outside of a refrigerator.

2651 Groceries and Personal Needs (07/01/1998, 98-21)

Groceries and personal needs include food and essential items for household and personal care, such as soap, toothpaste and such items as are normally purchased at a grocery outlet. General Assistance payment levels are based on current Reach Up basic need standards reduced by a percentage necessary to avoid exceeding current

GA funding. The following payment standard shall be used by District Directors and Town Service Officers to determine the amount of aid to be given for groceries and personal needs (see also rule 2654 - Room and Board-Restaurant Meals). Grocery and personal need allowances shall be issued, as needed from one to seven days. For applicant households exempt from the employment requirements allowances may be issued for up to 28 days as needed. Do not issue an allowance for any period covered by a previous issuance except when a condition exists as defined in rule 2620 (b) and (c).

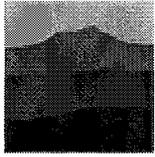
Groceries and Personal Needs Allowance

Groceries and personal needs allowance in dollars														
No. in family	1 day	2 days	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days	11 days	12 days	13 days	14 days
1	4.00	4.00	6.00	8.00	10.00	12.00	14.00	16.00	18.00	20.00	22.00	24.00	26.00	28.00
2	6.50	6.50	10.00	13.50	16.50	20.00	23.50	26.50	30.00	33.50	36.50	40.00	43.50	47.00
3	9.50	9.50	14.00	18.50	23.50	28.00	32.50	37.50	42.00	46.50	51.50	56.00	60.50	65.00
4	9.50	10.50	16.00	21.50	26.50	32.00	37.50	42.50	48.00	53.50	58.50	64.00	69.50	75.00
5	9.50	13.50	20.00	26.50	33.50	40.00	46.50	53.50	60.00	66.50	73.50	80.00	86.50	93.00
6	10.50	14.50	22.00	29.50	36.50	44.00	51.50	58.50	66.00	73.50	80.50	88.00	95.50	103.00
7	12.00	17.50	26.00	34.50	43.50	52.00	60.50	69.50	78.00	86.50	95.50	104.00	112.50	121.00
8	13.50	20.00	30.00	40.00	50.00	60.00	70.00	80.00	90.00	100.00	110.00	120.00	130.00	140.00
9	13.50	21.50	32.00	42.50	53.50	64.00	74.50	85.50	96.00	106.50	117.50	128.00	138.50	149.00
10	13.50	24.00	36.00	48.00	60.00	72.00	84.00	96.00	108.00	120.00	132.00	144.00	156.00	168.00
For each addl person	1.50	2.50	4.00	5.50	6.50	8.00	9.50	10.50	12.00	13.50	14.50	16.00	17.50	19.00

Thank you,
Carrie

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**VERMONT
LEGAL
AID**

Elder Law Project

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TO: Heidi Moreau, Esq. Policy Advisor, Vermont Department for Children and Families

FROM: Michael Benvenuto, Project Director, Elder Law Project;
Leah Burdick, Staff Attorney, Elder Law Project

SUBJECT: VLA Comments on 24-P042 General Assistance Emergency Housing Rules

DATE: November 1, 2024

Vermont Legal Aid has a long history of advocacy throughout Vermont on behalf of low-income individuals, individuals with disabilities, and individuals aged 60 and older, including on the issue of emergency housing assistance as part of the General Assistance (GA) program. We represent individuals experiencing homelessness as part of these programs and have testified about legislative changes to these programs and the applicability of rules on many occasions. We continue to reiterate our serious concerns about the Department's administration of the General Assistance Emergency Housing Program as modified by Act 113 Budget Act and as implemented by these proposed rules. We have three major concerns with the proposed rules—the resource exhaustion requirement, the lack of grant notices, and the lack of clear process for requesting a shelter exemption with a reasonable accommodation.

Resource exhaustion is counterproductive to the goals of the GA Program and the intent of the Legislature.

The proposed rules require an applicant to exhaust all their available resources before they are granted assistance. The rules also require an income contribution. Both requirements are not in Act 113. Requiring resource exhaustion in combination with an income contribution makes transitioning out of the program practically impossible—a household cannot get back on its feet and into new housing if it has zero resources for a security deposit and first month's rent. We also believe this is contrary to the intent of the Legislature, which tasked the General Assistance Emergency Housing Task Force, also created through Act 113, with examining and providing recommendations on “a process to enable participating households to place a percentage of the household's gross income into savings, which shall be returned to the household for permanent housing expenses when the household exits the General Assistance Emergency Housing.”

Implementing a requirement that households exhaust all available resources to qualify for emergency housing runs counter to this provision and the goal of permanent housing for all Vermonters. **Requiring resource exhaustion traps program participants in a vicious cycle of unsheltered poverty.** Participants cannot save money while they are in the program. They will have no available resources left at the end of their 80-day grant. Verification of this eligibility criterion is also a significant burden on households in crisis and on ESD workers. We urge the Department to remove the resource exhaustion rule and implement a realistic mechanism for participants to save some of their income towards permanent housing while in the GA program.

Our specific recommendations to revise in the rule:

- The Department should not require exhaustion of resources on application.
- If the Department believes requiring exhaustion of resources is lawful under Act 113, a reasonable resource limit should be set instead.
- Participants in the program should be allowed to save income each month in order to have the possibility of transitioning out of the program. Therefore, “saved” resources should be excluded.
- Act 113 does not require or authorize the 30% income contribution for participation in the program. The Department should repeal that requirement from the rule and allow income to be saved as an excluded resource instead.

Lack of approval notices for participants leads to unnecessary confusion.

The proposed rule does not require the Department to issue an approval notice when a person is awarded a motel voucher. Applicants, participants, hotels, and advocates struggle to understand how the different cycles of approval, reauthorizations, and terminations relate to each other. At Legal Aid, we frequently talk with people who are thoroughly confused about what they were approved for. **For this reason, we urge the Department to issue written notices of approval in all cases, not only denials.** The Department has the capacity to generate approval notices because it can do so upon request and the Department sends notice of the authorization to the Motel. For an approved application, the individual needs to understand the income contribution requirements, how their household was determined, which category they were found eligible for, the obligations to continue to seek housing and other program rules, their right to continue to receive emergency housing up to the 80-day limit, and when that 80-day limit will expire. We ask the Department to provide notices of award to participants by mail or email, or in hand, without the applicant or participant needing to ask for it. Even if people lose their approval notice, it will be easier for Department staff answering calls to find and review with participants and advocates who call. Requiring a written grant notice will provide a clear record of the grant and make the program more accessible for people with disabilities.

Our specific recommendations to revise in the rule:

- The Department should provide notice to participants upon approval in all cases.

- The approval notice should specify the basis for their eligibility, including category.
- The notice should advise the individual of the number of days they are authorized for and the number of remaining days under the 80 day cap.
- All notices should advise individuals of their right to appeal, including the right to request continuing benefits, include information about requesting reasonable accommodation under AHS policy, and information about how to request an appeal and contact information for Vermont Legal Aid (800-889-2047).

Rule 2652.g.1.ii. - Alternative Housing Placements—Including Community Shelters--Must Be Appropriate and Accessible to Participants with Disabilities

Act 113 and the proposed rule at 2652.k.2 requires the Department to terminate a household’s authorization for emergency housing assistance on the end date of the current authorization period if an alternative housing placement—including a community shelter—is available. The proposed rules also allow a Period of Ineligibility for GA Housing if a person refuses an alternative housing placement, including a shelter space. However, shelters and alternative housing placements may not be appropriate, especially for people with disabilities. Participants risk losing their motel room without the adequate time needed to determine whether the congregate shelter or facility is appropriate for their needs. Previous emergency rules for the Emergency Housing Transition Benefit (EH-100) allowed a participant time to notify the Department that an alternative housing placement poses a previously unidentified health or safety risk, and thus refuse the alternative placement without risking their eligibility for their current shelter. The proposed rule offers no clarity on the timeline of the reasonable accommodation process for a shelter exemption, where a shelter with an available space may not be able to accommodate their disability.

The proposed rule should be revised to incorporate a requirement that the placement is “appropriate” to the needs of the individual. The proposed “Provisional Housing” rule at 2652.j. grants up to four days of housing while the person provides verification of eligibility. This rule should be revised to allow provisional housing when a person must verify that a congregate shelter or institutional setting is appropriate for their needs and whether such placement may accommodate their disabilities under the Reasonable Accommodation Rule 2652.h.1.i. Allowing provisional housing in these circumstances would give participants and facilities adequate time to determine appropriateness of placement and whether the available shelter or facility may accommodate their disability, without losing their shelter.

Our specific recommendations to revise in the rule:

- Incorporate the word “appropriate” to the language describing alternative housing placements.
- Allow participants adequate time to request a shelter exemption without losing their current motel room.

- When a shelter exemption is requested, the Department should facilitate the expediency of the request. The burden should not be placed on the person with the disability to physically take their shelter exemption form to the shelter.
- When the placement is available at the end of a person's authorization period, grant provisional housing of up to four nights when a person requests a shelter exemption to allow sufficient time for the shelter to respond to the accommodation request.

Thank you for your consideration of these comments.



End Homelessness Vermont

www.endhomelessnessvt.org

410 227 3173

To Vermont Department of Children and Families, Agency of Human Services,

Comments on 24-P042 General Assistance Emergency Housing Rules

General Comments:

End Homelessness Vermont was significantly impacted by systemic barriers over the last 5 months. It left our clients without the opportunity for stronger support throughout this process. It took time that could have been used for case management and like many providers, made it hard to do our jobs. We are very concerned that the rules continue to add more hurdles, rather than more support and assistance. Especially as it impacts people living with disabilities at the intersection of homelessness.

The rules need to uphold and follow the obligation to accommodate and assist individuals with disabilities. They also need to ensure that they follow AHS policies on non discrimination and trauma informed practices. People with disabilities are not adequately protected under these rules.

We work primarily with individuals with disabilities, medical conditions and in complex situations as well as supporting others at the point of an emergency. These rules do not adequately meet the intent or direction of the American With Disabilities Act. It is important to clearly define that people can not be discriminated against on the basis of their disabilities, so where rules are not attainable due to their disability, the department is required to use a reasonable accommodation. There are several examples of this throughout our comments.

Act 113 is clear that its primary purpose is to “ensure” that households that meet eligibility requirements receive shelter in the allowed number of days. Additional and archaic requirements that are not present in the requirements under Act 113 are a misuse of the rulemaking process.

Additionally people are protected from coerced or forced placement in treatment settings. as a result of the Olmstead Decision

that that unjustified segregation of persons with disabilities constitutes discrimination in violation of title II of the Americans with Disabilities Act. The Court held that public entities must provide community-based services to persons with disabilities when (1) such services are appropriate; (2) the affected persons do not oppose community-based treatment; and (3) community-based services can be reasonably accommodated, taking into account the resources available to the public entity and the needs of others who are receiving disability services from the entity.

The Supreme Court explained that its holding "reflects two evident judgments." First, "institutional placement of persons who can handle and benefit from community settings perpetuates unwarranted assumptions that persons so isolated are incapable of or unworthy of participating in community life." Second, "confinement in an institution severely diminishes the everyday life activities of individuals, including family relations, social contacts, work options, economic independence, educational advancement, and cultural enrichment."

Definitions:

- In the definition of "Alternative Housing Placement". First these placements are not permanent, they are very temporary:

" residential treatment beds for physical health,, substance use, or mental health; and recovery homes"

It has been a long standing problem that this counted as housing placement. With all above, except Recovery Homes, it is extremely temporary most often and also often sudden placement. When you count that as housing, it has many impacts on placement for emergency shelter, loss of belongings and more.

It is critical to note that the American With Disabilities Act and Vermont Law prevents people from being forced into treatment and the Olmstead decision clarifies this. Giving individuals only the choice of living outside or going into Long Term Treatment or a Mental Health Facility would be coercion or forcing someone to be placed. Also, this is temporary and not "housing", it is not an alternative housing placement, it is treatment. In fact the ADA specifies that

people can turn down housing options a particular number of times, if the placement is not best for them. Additionally Vermont Law does not allow people to be forced into facilities due to mental health or substance use disorder treatment and recovery beds (which are meant to be entirely voluntary) and again to force a choice between shelter and a facility would not be voluntary. It is important to protect the rights of aging Vermonters and Vermonters with disabilities.

- *“Future GA applications will be evaluated in relation to whether the applicant has taken reasonable steps to access these resources. If not, the application will be denied because no effort was made to access resources that could have been currently available to meet the emergency need.”*
This part of rule 2603(c) is exceptionally subjective and does not take into account disabilities unless ssi or ssdi is present. Also, there is a lot of data that I am happy to share that “work search” and “job” requirements for benefits have mostly negative outcomes. Act 113 does not allow for this additional requirement. It is important not to impose guidelines that do not exist in the Act now signed into law.
- DCF should adopt the 20 year interpretation by the Human Services Board of “constructive eviction”. There has been a 20 year precedent and it should be implemented into the rules. It understands that people in poverty are often in informal living situations and are taken advantage of in ways that they do not have the power to protect themselves from. Additionally, as the Human Services Board has repeatedly ruled since 2003, the Department applies incorrectly narrow definitions of tenancy and eviction to this criterion of catastrophic eligibility. 20 years of precedent is a lot of precedent for the department to ignore. The legislature clearly wanted to keep this definition and we suggest that the rule adopt the HSB definition. We are happy to provide more information about this in detail.
- We are concerned about the definition of Economic Unit: There is a lot of data indicating that intertwined finances causes+s people in domestic violence situations to stay because they can not get out of those relationships. We strongly recommend that the department adopt a definition of household that is families who consider themselves family and choose to live in the same unit. Both because that better meets the time and most importantly, it removes risk caused by intertwining finances and/or getting married.
- We have had clients who were denied because in an application they mused about wanting to move to Colorado, but, who had lived in Vermont for 20 years. It would be helpful if the residency language changed slightly to say:

“physically present in Vermont with the intent to make Vermont your home. People currently living in Vermont will still be considered “living in Vermont”, regardless of their hopes for the future”

- Act 113 does not allow for a resource test. The addition of this requirement essentially adds an eligibility criteria. My first and most primary concern with this rule is that it adds an eligibility requirement that was not present in Act 113. Act 113 laid out very specifically what makes someone eligible under the law, how long they are eligible for and what would be their obligation. Nowhere in Act 113 does it say that people have to have exhausted all of their resources. I don't believe that this rule is in line with either the intent of Act 113 or the law itself.

Resource tests in housing are almost non-existent or extremely high because housing programs are aware that this is counterintuitive to the ability for folks to exit homelessness successfully and perpetuates a cycle of poverty. This is well researched. The data tells us that people who keep their savings and resources have more success as they enter permanent housing. This rule increases reliance on state benefits and ultimately costs the state more money as people have to begin at square one before they can even attempt to get housed when with their resources they may have had a good chance to get out of homelessness more quickly.

Also, requiring people to pay penalties for accessing savings such as an IRA due to being required to use their IRA, means that you are removing security from them as they age, ultimately again increasing the reliance on state and federal benefits. This requirement is counter-intuitive to fiscally sound policy and good policy for reducing poverty and reducing our reliance on the GA Hotel/Motel program.

No where in Act 113 is one of the eligibility requirements for people to have no savings and no resources and the goal of this portion of Act 113 was to make clear eligibility guidelines. It is clear that if you meet any one of these requirements you are eligible for emergency housing.

It does not say anywhere in the law “unless this person has savings that may help them in their future”.

In fact, the law lays out several requirements of the individuals in the program and this is not one. If the legislature intended for this requirement to exist, I believe that it would be in the law. I will add that not allowing

people in abject poverty to save money is one of the most significant barriers to ever exiting crisis.

D. Application and Interview::

It is critical here that it is laid out in plain language that the application can be done by the **“household or an authorized representative of the household”** End Homelessness Vermont works with people in emergency situations, people with disabilities, medical conditions and complex situations. Additionally there are individuals experiencing complex traumas. Their right to be represented by someone that they feel safe with should be explicitly laid out and respected.

E. Verification:

Act 113 does not allow for added barriers, hurdles or verification processes or eligibility requirements. In fact it asks the department to remove or reduce barriers to accessing the Emergency Housing benefits.

1. The department has a responsibility to clearly lay out what counts as verification for each eligibility category. In fact the language of Act 113 allows people to “attest” to their eligibility, which is explicitly in line with the department’s requirements to reduce barriers.

Oftentimes, it is extremely invasive to call family members or employers and can risk the individuals relationships and employment. We know of times where this verification has lost an individual their job. Individuals should have alternative ways that they can verify laid out clearly in front of them in plain language so that they have the choice to keep their privacy and dignity intact.

2. Give permission or be denied with the word “will” result. This means that people have to agree to give up privacy in order to remain sheltered. The choice to instead be forced outside is a false choice. I would encourage the department to come up with language that says that the department will work with the client to find verification alternatives if the ones suggested are not available or preferred. This is an opportunity to improve the dignity of the systems that govern this benefit.
3. It is important to identify here that verification can be given by the household or an authorized representative of the household.

NOTE: The document uploader often does not work. It is 2024 and there should be a way to email verification to the department.

F. Action on Application:

- Written notice of decisions on applications should be completed each time both when there is a denial or an approval and uploaded into the CATN notes, as well as offered to the applicant each time. This will limit confusion on what was approved and for how long. Additionally, act 113 makes it clear that this should just be a re authorization.
- The failure of the department to require notice when someone is granted this benefit is problematic for several reasons.
All other benefits include a grant letter that clearly outlines the benefit, the timeline and any additional requirements. By not providing a benefit letter, it is not clear to the household what “tasks” have been assigned to them, when their benefit ends, how many of their 80 days that they have left. People in the GA Hotel/Motel program are asked to complete a number of tasks and jump a number of hurdles. The majority of the people in the program are living with disabilities and now are in crisis. Many do not know that they have the right to ask for it in writing and the rule leave the obligation on them. If they don't follow these requirements or lose track of their days, then they will lose their shelter or not expect the shelter to end when it does, leaving them in more crisis. It should be standard to notify people in writing what the benefit is and should be.
- Again, this should say “household or authorized representative of the household” It is important to make clear in each rule that the applicant has the option of utilizing an authorized representative, requesting an interpreter and that their disability needs will be met.

G. Eligibility:

- ii: Alternative housing placement as defined in these emergency rules, has the risk of effectively forcing people into treatment or long term care both of which are either prohibited by Vermont law or the American With Disabilities Act. And particularly the Olmstead Decision. “Alternative Housing Placement” needs to be re-defined and clarifies that short term hospital or treatment stays do not count as a housing placement and that entrance into these placements is entirely voluntary and choosing not to go will not eliminate your access to emergency housing: *“residential treatment beds for physical health, long-term care, substance use, or mental health; nursing home beds; and recovery homes”* It is important to follow the ADA, Olmstead Decision, AHS's commitment to accommodate and assist and not to discriminate be adequately adhered to. In general a move to better respect the autonomy and dignity of people with

disabilities. Giving them false choices is still a form of coercion that should be prevented in these rules.

- We strongly encourage income contributions to be calculated once a month and using the HUD standard, which would be a more dignified calculation. It is well researched and tested. It is also far less confusing.
- Act 113 does not require applicants to prove that they have:
“have exhausted all available resources.” and in fact that would generally erode the ability to find permanent housing because it will prevent any savings from being accumulated that households will need to get housed

H. The Shelter exemption form is incredibly critical to people who have extreme trauma, significant disabilities. Stability is very important for people experiencing homelessness to be able to take necessary steps to find housing. It would be hard if each time a shelter option came up, they had to prove again that they are not a good fit for shelter. This is part of a reasonable accommodation and for many this is true for any traditional shelter option. It would be good if that form is included in the rules to make it clear that people with these conditions have this option.

Authorization Periods:

Act 113 does not allow for periods of ineligibility. That can not be a barrier to shelter. Act 81 also did not allow for such and alternative rules were used for these families. This was a largely successful shift because it allowed programs like ours to work to find the right fit for a household. Periods of ineligibility are cruel and inhumane and often put people at extreme risk for their health and safety.

- POI's given as a result of not checking in are very often due to a lack of transportation, a complicated situation and the household not knowing that there was a rule that would leave them without shelter for 30 days. This is not a violent or dangerous act and it puts people at extreme risk for their health and safety.
- We have several concerns about giving households POI's for “breaking rules”, we find that the majority of time this is due to a person's mental illness, trauma or disability. When our clients are exited, almost always it is due to their disability, even if it presents as breaking a rule. Often it is very hard to get that period reversed because it is technically breaking a rule. But, it amounts to being penalized for something often beyond their control. But, in an area, disability, that is not well understood and so often

dismissed as not relevant as “beyond their control” . Repeat POI’s can be avoided by working carefully on placement to supporting a household to find a placement in which they can be more successful. Additionally the “rules” can often be abusive or invasive. POI’s being given for this reason gives an enormous amount of possibility for extremely vulnerable people to be prevented from being able to address health conditions and other concerns in their shelter setting. It also does not give the opportunity for an individual to be wrapped in support to ultimately have a more successful outcome.

J. Provisional Housing:

- Some types of verification take more than 4 days to obtain. We strongly suggest language that allows 4 days or length of time that is appropriate to obtain necessary verification. For example: A Disability Variance Form. A person may be able to show that they made an appointment to see a doctor in those 4 days, but, it may not be a possibility to see a doctor in those 4 days. Also, to say “may” creates too subjective of a rule. Shall, would mean that each person has time to gather necessary documentation.

K. Housing Search Requirements.

- At the entry point of emergency housing or after a long period of being outside, people will not have been able to begin or maintain significant housing searches. This rule should clarify that households at the entry point of emergency housing or after a period of living outside, will have time to begin the housing search requirements.
- A. We are concerned about this language:
“Activities shall include at least one of the following: completing the coordinated entry assessment, engaging with a state agency or state-contracted service provider to secure an alternative housing placement, addressing barriers to permanent housing (for example, obtaining identification documents, social security cards, or birth certificates for all household members), or applying for permanent housing voucher”.

We are concerned for two reasons.

- “engaging with a state agency or state-contracted service provider to secure an alternative housing placement” They should be able to engage with a case manager who is helping them with housing placement, even if they are not a state contracted provider. This could be due to language barriers, disability or preference. As long as that case manager is working on housing placement that should be an option. 23% of our clients at EHVT have been housed and we are not a state contracted provider. However, for our clients, some who have huge barriers to permanent housing, we are able to provide supports that leads to permanent housing. Also, for a variety of reasons sometimes, a provider or a client are uncomfortable working with one another and there has to be alternatives in these cases.
- There is no listed option for people with disabilities to be working with alternative supports to remove barriers/and or secure housing . That should be a listed

option. Often traditional housing supports or case management are not successful or appropriate for these households. But alternate supports are.

- There should be an option for self attestation that they have completed one of the housing search requirements. Oftentimes proving such is a burden or not possible, especially for people living with disabilities.

3. i: Verification does not list any options for people who are working on barriers and it does not list verbal verification from the case manager as an option.

N. Room Cap:

This is definitely a challenging and dangerous part of Act 113 that the department is responsible for implementing. We are empathetic to the challenges posed here. We agree with Vermont Legal Aid that this could be interpreted and implemented as an average. See VLA comments for further details.

O. Prioritization:

Act 113 absolutely does not allow for prioritization. We are especially concerned that disability is not a prioritized category. We believe that not including people with disabilities is discriminatory and negates the often significant risk of their lives. It does not allow for any prioritization of these categories. If the legislature wanted to create prioritization, then they would have put that into the language. There is nothing in the law that states anything at all about allowing the department to prioritize certain vulnerable categories above other vulnerable categories. All categories under this law are considered vulnerable. This is not a legal application of the law. Additionally, there is a serious risk that the department would turn an eligible applicant away for an available room due to this misapplication of the law and that individual may have an extremely catastrophic outcome that the department would then be responsible for, because Act 113 clearly lays out eligibility requirements with no prioritization.

The law clearly states:

“To the extent emergency housing is available and within the funds appropriated, the Commissioner for Children and Families shall ensure that General Assistance Emergency Housing is provided in fiscal year 2025 to households that attest to lack of a fixed, regular, and adequate nighttime residence and have a member who:

(1) is 65 years of age or older;

(2) has a disability that can be documented by:

(A) receipt of Supplemental Security Income or Social Security Disability Insurance; or

(B) a form developed by the Department as a means of documenting a qualifying disability or health condition that requires:

(i) the applicant's name, date of birth, and the last four digits of the applicant's

Social Security number or other identifying number;

(ii) a description of the applicant's disability or health condition;

(iii) a description of the risk posed to the applicant's health, safety, or welfare if

temporary emergency housing is not authorized pursuant to this section; and

(iv) a certification of a healthcare provider, as defined in 18 V.S.A. § 9481, that

includes the provider's credentials, credential number, address, and phone number;

(3) is a child 19 years of age or under;

(4) is pregnant;

(5) has experienced the death of a spouse, domestic partner, or minor child that caused the household to lose its housing;

(6) has experienced a natural disaster, such as a flood, fire, or hurricane;

(7) is under a court-ordered eviction or constructive eviction due to circumstances over which the household has no control; or

(8) is experiencing domestic violence, dating violence, sexual assault, stalking, human trafficking, hate violence, or other dangerous or life-threatening conditions that relate to violence against the individual or a household member that caused the household to lose its housing.

2652.3 We encourage the department to adopt HUD calculations for income contributions. They are set to a good and well researched standard that is clear and well defined. We also encourage the department to instead of paying that to hotels, develop a program that saves that contribution toward expenses when an individual finds housing.

Act 113 lays out eligibility criteria and states that **"If there is inadequate community-based shelter space available within the Agency of Human Services district in which the household presents itself, the household shall be provided emergency housing in a hotel or motel within the district, if available, until adequate community-based shelter space becomes available in the district."**

We believe that this poses a serious risk and liability to the state if someone is denied access when there is an available room and they are eligible under the law.

We do not believe that this rule meets the statutory criteria of Act 113.

Appeals Process

End Homelessness Vermont represents people in fair hearings and in our experience, discovery is often significantly delayed. In addition, we believe that it is important to house people until the fair hearing and decisions are made. Households made to live outside during an appeals process can not recover that benefit and are inherently unable to have a fair hearing. It is impossible to adequately prepare for a hearing, gather documentation, keep your phone charged and more while living outside. Also, it is well documented that this significantly impacts thought process when a household is in crisis and has to think about day to day survival.

As advocates, we really need the hearing packet as soon as possible. Even if the participant requested an appeal two or three days earlier, it often takes another three or four days from when we request the packet to receive it. We then often receive the packet less than 24 hours prior to the hearing. We hope that by improving the notice practice for all participants – both award notices and termination notices – it will be easier and faster for the Department to prepare the record for appeal.

The expedited appeal process should include at minimum: 1) an internal review that occurs same day or next day similar to the old process for district director review; 2) that internal review is based on a prepared “packet” of documents including the application and notice of decision, verification documents, and notes, so that the information reviewed internally is available as the record on appeal; 3) the packet is transmitted to the HSB and the appellant’s representative, if they have one, at the same time as it is sent for internal review; 4) the HSB schedules an expedited appeal before the hearing officer; 5) the Department notifies the HSB about the results of the internal review; 6) the HO holds a hearing and makes a recommended decision; 7) the Department puts that HO recommended decision into effect if favorable; and 8) the decision is sent to the HSB by the HO and approved by the HSB as the resolution of the appeal.”



Vermont Kin As Parents

1205 North Avenue, Ste #13, Burlington, Vermont 05408

Strengthening families raising the children of relatives.



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Comments on 24-P042 General Assistance Emergency Housing

General Comment:

We are concerned about the implications of some of these rules, both on biological parents and children who have Family Services involvement or an open CHINS case, as well as the state's responsibility to ensure shelter for any child in DCF custody, including cases where the child is with their biological parent. We are also aware of kinship care cases within the hotel/motel program.

We urge the department to ensure shelter for all families with an open CHINS case. We worry that policies resulting in the removal of children or termination of parental rights due to unsheltered status contradict departmental directives to prioritize children's safety and family unity. No family should face the loss of their children because state policy has left them unsheltered, particularly when the state has official custody, as in any open CHINS case.

Definitions:

1. Alternative Housing Placement

- The designated placements are not permanent solutions; they are temporary:
"Residential treatment beds for physical health, substance use, or mental health; and recovery homes."
- We are concerned that this definition may separate families, forcing children into foster care because the family unit does not suit such environments. The ADA prohibits mandatory placements into facilities.

2. Resource Test

- This test hinders efforts to place families, especially those with children, in stable settings. At VKAP, we prioritize children's welfare, and data indicates that resource tests reduce success rates. We

802-871-5104 or info@vermontkinasparents.org or on the web: vermontkinasparents.org

Thank you for your kind contribution our EIN - 54-2184914

find this particularly concerning for families engaged with Family Services.

3. Definition of Economic Unit

- Family Services often require that a victim of abuse separate from the perpetrator. Evidence shows that intertwined finances can trap victims in abusive situations. We recommend redefining "household" to refer to individuals who voluntarily share housing and identify as a household. This would protect families, particularly women, who wish to leave abusive partners without complicating their situations.
-

Verification:

1. Verification Notification

- We suggest providing applicants with a letter detailing necessary verification, along with a provisional housing period of 10 days to obtain these documents.

2. Support for Verification

- We recommend that the department assist clients in locating alternative verification methods when they lack standard documentation. Often, applicants are denied simply because they are unaware of specific requirements. Additionally, the department should notify applicants in writing regarding needed verification and allow them time, while housed, to obtain it.
-

Action on Application:

1. Benefits Letter

- Benefits letters should be provided at each renewal. Written verification is standard for other awards, benefits, and programs; the same should apply here.

2. Eligibility Representation

- Clarify that eligibility determination may be based on input from the "household or an authorized representative of the household."

3. Denial Letter Resources

- Denial letters should include a list of resources available to support applicants through the fair hearing process. For families with open CHINS cases, additional advocacy, support, and assistance resources should be provided to help them navigate this process.
-

Authorization Periods:

1. Check-In Requirements

- We highly recommend removing periods of ineligibility for families who miss check-ins. This policy has severe negative effects on families with children.
-

Housing Search Requirements:

1. Housing Search Activities

- We are concerned with the following language:
"Activities shall include at least one of the following: completing the coordinated entry assessment, engaging with a state agency or state-contracted service provider to secure an alternative housing placement, addressing barriers to permanent housing (e.g., obtaining identification documents, social security cards, or birth certificates for all household members), or applying for a permanent housing voucher."
- We recommend adding language to support case management with advocacy for families with open CHINS cases.

2. Verification for Barrier Reduction Efforts

- The verification process does not provide options for individuals addressing barriers. We suggest including verbal verification from the case manager as an acceptable form of verification.
-

Prioritization:

- The budget language does not permit prioritization of any categories; all categories are considered equally vulnerable by legislative standards.
- The law states:
"To the extent emergency housing is available and within the funds appropriated, the Commissioner for Children and Families shall ensure that General Assistance Emergency Housing is provided in fiscal year 2025 to households that attest to a lack of a fixed, regular, and adequate nighttime residence and have a member who:"

There is no legal language supporting the prioritization of categories in this context.

From: Sarah Launderville <slaunderville@vcil.org>

Sent: Friday, November 1, 2024 3:13 PM

To: Winters, Chris <Chris.Winters@vermont.gov>

Subject: VCIL comments rules

EXTERNAL SENDER: Do not open attachments or click on links unless you recognize and trust the sender.

Emergency Housing Assistance
Comments on 24-P042 General Assistance
Emergency Housing

Rules

VCIL respectfully submits these comments which we've written from a place of experiencing working with people with disabilities trying to access General Assistance Emergency Housing.

Public comment period and thoughtful rulemaking is really important and it would be helpful if the Agency Of Human Services and Department Of Children And Families, made an effort to seek feedback from people living with disabilities, both prior to rulemaking and throughout the rulemaking process. It would be good for DCF to build in opportunities that are a bit less formal, but give people a chance to share their experiences and have opportunity to make needed changes within this system.

By extension having a set of rules that focus on a way for people in need to access supports and understand its appropriate and welcomed when they are in need of that support. The rules tend to read from an approach of keeping people out of this system and from an approach of who might

lie and cheat a system rather than thinking of participants who are struggling, who've lost everything. It's important to ensure that bias against people who are experiencing homelessness and people who are in protected legal categories are not baked into the language of the rules and that means taking time and thoughtful practice to create strong rules.

To begin that might change the purpose of the rules from something like:

The purpose of the General Assistance emergency housing assistance is to provide eligible households with temporary emergency housing subject to available appropriations, in community-based shelter or hotel or motel when an alternative housing placement is unavailable.

To something like:

The purpose of the General Assistance emergency housing assistance is to provide eligible households with temporary emergency housing.

We know that the rules will address eligibility, and that the budget will dictate

the availability. It shifts a purpose solely to supporting eligible households with temporary emergency housing.

We'd like to focus on a bias that creates discrimination for people "alternative housing placement". VCIL testified to the Vermont State Legislature and submits comments here that we don't agree with the definition of what an alternative housing placement should be. Nursing homes, recovery homes, treatment beds, long-term care facilities, substance and mental health facilities are not housing. They are places for treatment and have a housing component but they are not permanent, community-based housing options. Furthermore, these are generally services for people with disabilities.

The issue with being in the mindset of seeing these as housing especially when it comes to nursing homes and mental health facilities is the long history of individuals with disabilities being forced into these settings and getting stuck there when they

could live in the community if only there were housing options.

When we talk about this, we hear from leaders' comments like well at least the person has a roof over their head. These comments are biased and ableist. In addition to the attitudinal barrier around this, it is discriminatory if a person is forced into these situations with no options.

The concern comes from the parts of the rules that states:

Housing Search Requirements

1. *All households applying for and receiving emergency housing assistance must engage in their own search for and **accept any, available alternative housing placement.***

Eligibility

1. *iv. provide information to the Department about the household's efforts to secure an alternative housing placement pursuant to subsection (j) below*

Our concern is if the only alternative housing placement is a nursing home or a

mental health facility and the individual refuses that option they will lose the benefit of emergency housing assistance.

In 1999, The United States Supreme Court stated in the Olmstead Decision

that that unjustified segregation of persons with disabilities constitutes discrimination in violation of title II of the Americans with Disabilities Act. The Court held that public entities must provide community-based services to persons with disabilities when (1) such services are appropriate; (2) the affected persons do not oppose community-based treatment; and (3) community-based services can be reasonably accommodated, taking into account the resources available to the public entity and the needs of others who are receiving disability services from the entity.

The Supreme Court explained that its holding "reflects two evident judgments." First, "institutional placement of persons who can handle and benefit from community settings perpetuates unwarranted assumptions that persons so isolated are incapable of or

unworthy of participating in community life."
Second, "confinement in an institution severely diminishes the everyday life activities of individuals, including family relations, social contacts, work options, economic independence, educational advancement, and cultural enrichment."

Application and Interview

It is important to clarify here that the application process can be done by a household or an authorized representative of that household. There is no mention here of interpreters, reasonable accommodations or authorized representatives. Many people who reach out to us require or prefer assistance through an authorized representative. This should be entirely up to the household applying as it would be in any other setting.

Additionally, It would be helpful to speak with people who have gone through the application and interview process and evaluate this process. There could be simplified processes that could be helpful not only to applicants, but people working at the state as well. Believe this should be a

part of the work of the Housing Task Force that has been set up.

Resource Test

The Vermont legislature did not create a resource test. This essentially creates an additional eligibility requirement. It is counter intuitive to helping people out of this process. It increases reliance on other state grants and funds and ensures a longer period of people being unhoused and less success in housing. Most housing programs have effectively no resource test and there should not be one here either. It is costing a lot of money, it adds administrative burden and it deeply impacts people on a fixed income, which several people living with disabilities are.

Verification

The experience of homelessness is very stressful and traumatic and these rules appear to remove the step of assisting people in working through barriers and challenges, but rather expecting them to do it on their own. Many people who reach out to VCIL need support through this process.

The process then becomes punitive for people with disabilities and people in stressful situations. In the rules we suggest identifying how the department can assist households in obtaining such verification. Or where they can access support that can accommodate them, such as, Vermont Center For Independent Living, End Homelessness Vermont, Disability Rights Vermont.

It is also important to identify here that the process can be with a household or authorized representative of that household.

Action on Application

In order to support applicants, we believe a step is missing in the action section. Step one indicates:

The department will determine a household's eligibility for emergency housing assistance once a completed, signed application with the necessary verification is submitted and an interview has been completed.

Having a step that indicates the state will

follow up for information or support an individual gathering that information could save a lot of effort.

Written notice of approved decisions on applications should be completed each time and uploaded into the households case file, as well as offered to the applicant each time. This will offer clarity to the household as well as to any ESD worker who looks at the file. Often the notes in the case do not match what the household believes that they were told.

In this section, it should once again clarify: "Households or authorized representative of the household"

Type of Emergency Housing Assistance

It's important to help people with disabilities understand how to request a reasonable accommodation and it is critical that the current form used for shelter exemption continue to be available and noted here as a way for a household to prove that they will not be able to be in a shelter setting. This information should be

“shelter is unable to provide the accommodation”

- We’d like DCF to start collecting the high level, non-identifying information on what types of reasonable accommodations are not being met by the shelters.

Authorized Periods

#4 Households that are existed by a community-based shelter or hotel or motel for violating the rules of the establishment shall not be authorized for additional emergency housing assistance for 30 days from the date the household is existed.

VCIL believes this model of punishment should be reviewed, examined and revised and until such time removed. There is so much power given to the hotel/motel and throughout the appeals process individuals are often left sleeping outside and trying to manage the appeal from a tent, cold or the extreme heat. The appeals process is also extremely unbalanced for households to be able to have adequate support through the process . There needs to be a way for an

individual to defend themselves and figure out a better fit and that should be identified in the rules.

One example that comes to mind are hotel managers who are discriminating against people who are trans and they come up with other reasons to kick the person out. Leaving it up to hotels allows the hotels to manipulate and threaten people in ways that make it impossible for them to speak up when they are being discriminated against or in harms way People need to be able to share the experiences that they are having and be provided with supports.

Provisional Housing

If verification of eligibility criteria cannot be obtained on the day of application, assistance may be authorized for no more than four days on a conditional basis pending verification. No more than four days of conditional assistance may be authorized within the 30-day period following the date of application

Individuals living with disabilities, medical conditions and complex situations and living

in poverty are often taken advantage of manipulates, illegally evicted and more. This means that accessing verification can be a complicated process. There should be a process that allows more time in a situation where verification can not be obtained in 4 days. One example that I can think of is when someone needs to fill out a disability variance form and can not get a doctors appointment that rapidly. That does not change that they have a disability and need access to emergency housing.

Housing Search Requirements

We are concerned about this language:
Activities shall include at least one of the following: completing the coordinated entry assessment, engaging with a state agency or state-contracted service provider to secure an alternative housing placement, addressing barriers to permanent housing (for example, obtaining identification documents, social security cards, or birth certificates for all household members), or applying for permanent housing voucher

We have two suggestions:

- Households should be able to engage with a case manager who is helping them even if they are not a state contracted provider. We can think of several examples, including End Homelessness Vermont, who can help support people with housing, but are not housing providers. Individuals are often more successful when there is choice and autonomy in their service support.
- There is no listed option for people with disabilities to be working with alternative supports to remove barriers/and or secure housing. That should be a listed option. Often traditional housing supports are not successful for these households.

Prioritization:

The law does not allow for prioritization. There is nothing in the law that states anything at all about allowing the department to prioritize certain vulnerable categories above other vulnerable categories. All categories under this law are considered vulnerable. While disability is

prioritized, VCIL does not support creating categories that are not allowed in the budget language.

Reasonable Accommodations:

There is no Vermont law that can supersede the American With Disabilities Act and therefor, the department always can provider reasonable accommodations. It is our understanding that the Department has been denying access to reasonable accommodations to stay sheltered on the basis that they "can not" due to the law. In fact, a reasonable accommodation can always be given and no state law can interfere with that. So, that alone can not be the premise by which a reasonable accommodation is denied.

Respectfully submitted,
Sarah Launderville
Executive Director
Vermont Center for Independent Living

General Comment:

This comment period was noticed one time, but, it would be beneficial for the department to get input from community partners prior to the rules being drafted and for a genuine effort to seek community partner input to be made throughout the process, beyond just public comment. We are also concerned that a commitment to following the American With Disabilities Act is not clearly defined.

Definitions:

1. In the definition of "Alternative Housing Placement".

The below placements are not permanent, they are very temporary:

" residential treatment beds for physical health,, substance use, or mental health; and recovery homes"

With all above, except Recovery Homes, it very temporary and often sudden placement. When you count that as housing, it has many impacts on placement for emergency shelter, loss of belongings and more. Additionally, the American With Disabilities Act protects people from being forced into treatment facilities, and it would count as force if there is a consequence for not going to one such as loss of access to emergency housing.

E. Verification:

1. We suggest that a letter be given to inform applicant what verification is needed to qualify and be automatically given 10 days provisional housing to gather such verification.
2. We would suggest that the department support the client in looking for verification alternatives, when they do not present with the right or perfect verification. Often times people are denied just because they do not know what they need. We also suggest that the department be required to notify the client in writing of the verification needed in order to be approved and be given the opportunity while housed to acquire that verification.

F. Action on Application:

1. Written notice of decisions on applications should be completed each time and uploaded including when an application is approved. There should be a benefits letter. Currently households are not always given the best information or reasonably can't recall it without written notice and this would make the practice of informing a better practice.

4. This should say "household or authorized representative of the household" is the primary source of eligibility.

G. Eligibility:

1. ii: Alternative housing placement as defined in these emergency rules, needs to be re-defined and clarified that short term hospital or treatment stays do not count as a housing placement and that entrance into these placements is entirely voluntary and won't remove your access to emergency housing:

We strongly encourage income contributions to be calculated once a month and using the HUD standard, which would be a more dignified calculation.

H. The Shelter exemption form is very important. There are people that we work with who can not succeed in a shelter setting. Providers must have the ability to use this form so that households are not repetitively placed in a setting that is not appropriate for their needs. As shelter providers we ask that motel vouchers not be terminated before the household has the opportunity to meet with, be approved for, or have a shelter exemption form filled out. This often can not happen in the same day. The process needs to fit with our shelter processes or households who don't qualify for our shelter end up outside when this was not a real option for them in fact.

Authorization Periods:

1. We highly recommend that the department remove periods of ineligibility from an individual not checking in. The punishment has dangerous and adverse effects. We especially ask that these be removed for winter periods.
2. We have concerns about giving households POI's for "breaking rules", often this is due to a disability and there is no adequate mechanism to address this. Instead, we believe that these households could be referred to End Homelessness Vermont to go through their complex needs program and work with area providers to address the concerns and provide them with additional support.

J. Provisional Housing:

1. Some types of verification take more than 4 days to obtain. We suggest that these periods be appropriate for the verification needed. A arbitrary time limit will not give someone time in some circumstances to acquire the correct verification. We suggest that this be at least 10 days.

K. Housing Search Requirements.

1. At the entry point of emergency housing or after a long period of being outside, people will not have been able to begin or maintain significant housing searches. This rule should clarify that households at the entry point of emergency housing or after a period of living outside, will have time to begin the housing search requirements.
2. A. We are concerned about this language: *“Activities shall include at least one of the following: completing the coordinated entry assessment, engaging with a state agency or state-contracted service provider to secure an alternative housing placement, addressing barriers to permanent housing (for example, obtaining identification documents, social security cards, or birth certificates for all household members), or applying for permanent housing voucher”.*

We suggest that there be language that allows for non categorical case management and reasonable accommodations for people with disabilities. Often their barriers are not the same and they require alternative forms of housing case management. This is a successful model and should be allowed.

3. i: Verification does not list any options for people who are working on barriers and it does not list verbal verification from the case manager as an option.

O. Prioritization:

The language in the budget does not allow for prioritization of any of the categories. The legislature made these categories on even footing and they are all vulnerable categories.

The law clearly states:

“To the extent emergency housing is available and within the funds appropriated, the Commissioner for Children and Families shall ensure that General Assistance Emergency Housing is provided in fiscal year 2025 to households that attest to lack of a fixed, regular, and adequate nighttime residence and have a member who:

There is no language on prioritization in this law.

2652.3 We encourage the department to adopt HUD calculations for income contributions. They are set to a good and well researched standard that is clear and well defined. We also encourage the department to instead of paying that to hotels, develop a program that saves that contribution toward expenses when an individual finds housing.



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Agency of Human Services

To: Legislative Committee on Administrative Rulemaking (LCAR); Secretary of State
From: Department for Children and Families
Re: 24P042 — General Assistance Emergency Housing Assistance Rules
Date: December 5, 2024

The Department for Children (DCF) filed the proposed General Assistance Emergency Housing Assistance rules with the Secretary of State on September 16, 2024. A public hearing was held on October 25, 2024. DCF accepted public comments through November 1, 2024.

In response to comments, DCF has made the following changes to the proposed rule:

- Proposed rule 2652.2(d) and (p) – deleted the reference to “authorized representative” in subsection (d) and added a new subsection (p) outlining the rights and responsibilities of an authorized representative.

Summary of Comments and DCF's Response

Comments were submitted by Champlain Valley Office of Economic Opportunity, Hunger Free Vermont, Vermont Foodbank, Vermont Legal Aid, End Homelessness Vermont, Vermont Kin as Parents, Vermont Center for Independent Living, and Good Samaritan Haven.

Copies of written comments are attached. Below is a summary of the comments and DCF's responses.

Comment: The 1100 hotel/motel room cap should be eliminated.

Response: DCF does not have the authority to eliminate the room cap. Section E.321(b)(1) of Act 113 states: “The utilization of hotel and motel rooms pursuant to this subdivision shall be capped at 1,100 rooms per night between September 15, 2024 through November 30, 2024 and between April 1, 2025 through June 30, 2025.”

Comment: The 80-day housing limit should be eliminated.

Response: DCF does not have the authority to eliminate the housing limit. Section E.321(b)(2) of Act 113 states: “The maximum number of days that an eligible household receives emergency housing in a hotel or motel under this section, per 12-month period, shall not exceed 80 days.”

Comment: Every person and family who wants or needs shelter must have access to a safe, private space every day and every night, year-round.

Response: The legislature did not appropriate funds to DCF to offer nightly, year-round shelter space to all households who want or need shelter. Act 113 appropriated a limited amount of funds to DCF to provide short-term housing to certain categories of households.

Comment: The rules should include more detailed information about the rights of people with disabilities and reasonable accommodations.

Response: DCF believes the rules contain sufficient information about the rights of people with disabilities and reasonable accommodations. It is not necessary to reiterate disability-specific information that is found in other laws and policies in the emergency housing rules. Additional information can be found in DCF’s nondiscrimination policy: <https://outside.vermont.gov/dept/DCF/Shared%20Documents/About/Nondiscrimination-Policy.pdf>

Comment: The threshold for the 30% income contribution should be 200% of the federal poverty level.

Response: The amount of funds appropriated for emergency housing assistance was based on budgetary calculations that included the present 30% income contribution. Limiting the income contribution to households with income equal to or greater than 200% of the federal poverty level would expand eligibility and increase the cost of providing emergency housing assistance. Significant changes to policy require a further conversation with the legislature. In the last legislative session, the legislature created the General Assistance Emergency Housing Task Force. The Task Force is charged with making recommendations related to household eligibility and program policy and has been working for the last six months to come up with recommendations. Additional changes will likely come from the Task Force report and subsequent legislative action.

Comment: DCF should increase the grocery allowance.

Response: The amount of funds appropriated to the General Assistance program are insufficient to support increasing the grocery allowance.

Comment: The resource test and 30% income contribution should be eliminated.

Response: The amount of funds appropriated for emergency housing assistance was based on budgetary calculations that included the present 30% income contribution and resource test. Eliminating the resource test and income contribution. Significant changes to policy require a further conversation with the legislature. In the last legislative session,

the legislature created the General Assistance Emergency Housing Task Force. The Task Force is charged with making recommendations related to household eligibility and program policy and has been working for the last six months to come up with recommendations. Additional changes will likely come from the Task Force report and subsequent legislative action.

Comment: DCF should issue written notices of approval.

Response: DCF manually issues written notices of approval upon request. The eligibility determination system DCF currently utilizes for General Assistance does not permit automatic printing of written notices of approval.

Comment: The rule should include language that alternative housing placements must be “appropriate.”

Response: The rule adopts the definition of alternative housing placement set forth in section E.321(b)(4)(B) of Act 113.

Comment: The rule should permit provisional housing in a motel room while an individual’s request for a exemption from a shelter placement is pending.

Response: If DCF were to house a household in a motel room after receiving a request to be exempt from a shelter placement, the shelter would offer the available space to the next eligible household. Households would lose their shelter placement if they are provisionally housed in a motel room while the shelter exemption decision is pending.

Comment: DCF should facilitate arranging reasonable accommodations with shelters.

Response: DCF believes the household is best situated to convey its needs for a reasonable accommodation to a shelter.

Comment: The definition of “alternative housing placement” should not include residential treatment beds for physical health, substance use, or mental health; or recovery homes. Short term hospital or treatment stays should not count as a housing placement and the rule should state that entrance into these placements is entirely voluntary and refusal to accept such placement will not render household ineligible for emergency housing.

Response: The rule adopts the definition of alternative housing placement set forth in section E.321(b)(4)(B) of Act 113 along with the requirement in subsection (b)(4)(A) that a household with “access to an alternative housing placement, the Department shall deny the application or terminate the authorization at the end of the current authorization period.”

Comment: DCF should issue notice of required verification and support households in obtaining verification.

- Response:** The limitations of DCF’s eligibility determination system prevent DCF from issuing automatic notices of required verification for the General Assistance program. DCF assists applicants in obtaining verification as needed.
- Comment:** The rules should allow for 10 days of provisional housing while verification is pending.
- Response:** In DCF's experience, four days of provisional housing has been a sufficient amount of time for applicants to obtain and return required verification. DCF is concerned that increasing the length of provisional housing could lead to further delays in approving applications, and due to the limited number of motel rooms, result in eligible households being denied access to a room.
- Comment:** The rules should state that provisional housing shall be authorized for the length of time that is appropriate to obtain necessary verification.
- Response:** In DCF's experience, four days of provisional housing has been a sufficient amount of time for applicants to obtain and return required verification. DCF is concerned that increasing the length of provisional housing could lead to further delays in approving applications, and due to the limited number of motel rooms, result in eligible households being denied access to a room.
- Comment:** The income contribution should be calculated once per month in accordance with the HUD standard.
- Response:** The amount of funds appropriated for emergency housing assistance was based on budgetary calculations that included the present 30% income contribution. Limiting the income contribution to households with income equal to or greater than 200% of the federal poverty level would expand eligibility and increase the cost of providing emergency housing assistance. Significant changes to policy require a further conversation with the legislature. In the last legislative session, the legislature created the General Assistance Emergency Housing Task Force. The Task Force is charged with making recommendations related to household eligibility and program policy and has been working for the last six months to come up with recommendations. Additional changes will likely come from the Task Force report and subsequent legislative action.
- Comment:** “Authorized representative” should be added to subsections (e), (d), and (f) of rule 2652.2.
- Response:** DCF added a new subsection (p) that clarifies the rights and responsibilities of authorized representatives.
- Comment:** The rule should eliminate the period of ineligibility for not checking in and breaking rules.
- Response:** The rule utilizes “misconduct,” not breaking the rules, as the standard for imposing a period of ineligibility. The period of ineligibility reduces the churn associated with

households not checking in to a housing placement. The rule permits DCF to consider good cause reasons for not checking in in determining whether to impose a period of ineligibility.

Comment: Rules should clarify that first-time applicants are not expected to have engaged in housing search prior to application.

Response: DCF believes the rule adequately addresses this concern. Rule 2652.2(k)(1)(i) states: “The Department and household shall work together to develop a schedule of activities addressing the household’s need for emergency housing assistance. Completion of the activities is a requirement for continued receipt of assistance. These activities shall be documented in the household’s case record.”

Comment: Working with a non-state contracted service provider should be included as an allowable housing search activity.

Response: DCF believes it is in the household’s best interest to be engaged with contracted service providers who are held to reportable outcomes.

Comment: Reasonable accommodations to housing search activities should be allowed.

Response: Rule 2652.2(o) addresses DCF’s obligation to make reasonable accommodations and modifications to policies, practices, or procedures when necessary.

Comment: Verification of housing search efforts should include acceptable verification for households working on barriers and verbal verification from a case manager. Self-attestation of housing search efforts should be allowed.

Response: Rule 2652.2(k)(3)(i) includes examples of acceptable forms of verification: Verification may be provided in the form of documentation of meetings with housing case managers, applications for housing, or documentation of other housing search activities. The list is non-exhaustive and other forms of verification may be acceptable. DCF believes that third-party verification ensures households are engaged in housing search efforts.

Comment: Prioritization should be eliminated.

Responses: With the limitations on motel utilization imposed by Act 113, DCF acted within its authority to establish a mechanism to manage the 1100 room cap.

Comment: Definition of “constructive eviction” should include informal living situations.

Response: DCF believes that a bright-line definition requiring the existence of a landlord-tenant relationship is easiest for staff to apply to ensure consistent determinations across the districts.

Comment: The definition of “economic unit” should be “families who consider themselves family and choose to live in the same unit.”

- Response:** DCF believes the current definition of “economic unit” includes individuals who consider themselves family and choose to live in the same unit, while also giving meaning to the term “economic” by including a requirement that the individuals share income and expenses.
- Comment:** The definition of “live in Vermont” should include “People currently living in Vermont will still be considered ‘living in Vermont,’ regardless of their hopes for the future.”
- Response:** The current definition is consistent with the definition of residency used in other benefit programs administered by DCF. DCF believes the current definition appropriately defines Vermont residency.
- Comment:** The rule should define acceptable verification for each eligibility category and alternative forms of verification should be allowed.
- Response:** Rule 2652.2(g) includes examples of acceptable forms of verification for each eligibility category. The list is non-exhaustive; other forms of verification not listed may be acceptable.
- Comment:** The rule should include information about the shelter exemption form in the rules.
- Response:** As a general practice, DCF does not reference specific forms in its rules as these forms may change over time. Rule 2652.2(h)(1)(i) addresses DCF’s obligation to house an eligible household in a hotel or motel if a shelter is unable to provide a reasonable accommodation.
- Comment:** The 1100 room cap should be implemented as an average.
- Response:** The proposed methodology for determining the room cap would be administratively unfeasible for DCF to implement.
- Comment:** DCF should ensure shelter for all families with an open CHINS case.
- Response:** The legislature did not appropriate funds to DCF to offer shelter for all families with an open CHINS case. Act 113 appropriated a limited amount of funds to DCF to provide short-term housing to certain categories of households.
- Comment:** The requirement to accept alternative housing placement could separate families.
- Response:** The alternative housing placement applies to the entire household. Rule 2652.2(k)(2) states that the *household* must have access to an alternative housing placement. If an individual member of the household has access to an alternative housing placement, they would not be required to leave the household to accept the placement.
- Comment:** The denial notice should include a specific list of resources available to support household through fair hearing process.

Responses: The notice includes a phone number to call for more information, but it would be impractical to list all available resources as each household's circumstances are unique.

Comment: Add language to housing search activities subsection (k)(1)(i)(A) to "support case management with advocacy for families with open CHINS cases."

Response: This activity would fall under the broad housing search activity of "addressing barriers to permanent housing." The list of examples in subsection (k)(1)(i)(A) of ways to address these barriers is non-exhaustive; other ways of addressing barriers may be acceptable.

Comment: The purpose statement should be amended to eliminate language regarding available appropriations.

Response: The current purpose statement aligns with the language in section E.321(a) of Act 113: "To the extent emergency housing is available and within the funds appropriated..."

Comment: DCF should start collecting high level, non-identifying information on what types of reasonable accommodations are not being met by the shelters.

Response: DCF does not currently have the capacity to collect such data but will consider what other data may be useful to collect to determine how best to serve unhoused Vermonters.

Comment: The Department has been denying access to reasonable accommodations to stay sheltered on the basis that they "cannot" due to the law. In fact, a reasonable accommodation can always be given and no state law can interfere with that. So, that alone cannot be the premise by which a reasonable accommodation is denied.

Response: DCF has never denied a request for an accommodation on the grounds that a law prevents DCF from making a reasonable accommodation. DCF has denied requests for accommodations on the grounds that the requested accommodation constitutes a fundamental alteration of the program.

Comment: The expedited appeal process should include at minimum: 1) an internal review that occurs same day or next day similar to the old process for district director review; 2) that internal review is based on a prepared "packet" of documents including the application and notice of decision, verification documents, and notes, so that the information reviewed internally is available as the record on appeal; 3) the packet is transmitted to the Human Services Board and the appellant's representative, if they have one, at the same time as it is sent for internal review; 4) the Human Services Board schedules an expedited appeal before the hearing officer; 5) the Department notifies the Human Services Board about the results of the internal review; 6) the hearing officer holds a hearing and makes a recommended decision; 6) the Department puts recommended decision into effect if favorable; and 7) the decision is sent to the Human Services Board by the hearing officer and approved by the HSB as the resolution of the appeal.

Response: To the extent that this comment addresses appeal processes within DCF's authority, rule 252.2(q) specifies that DCF shall "follow All Programs Procedures P-2127, Fair Hearing Procedures, when a household requests a fair hearing...Notwithstanding any provision of the Fair Hearing Rules to the contrary, the Department shall put an expedited recommendation of the Human Services Board hearing officer into effect in the same manner as an order of the Human Services Board."

General Assistance

2600 General Assistance

General Assistance (GA) is an emergency financial assistance program for eligible applicant households whose emergency needs, according to department standards, cannot be met under any other assistance program administered by the department and cannot be relieved without the department's intervention. Receipt of 3SquaresVT, however, shall not be a factor in determination of emergency need since this is a diet supplement program and may not be considered in determining eligibility for or level of benefits in any other assistance program.

A household may qualify for GA in two ways, by meeting either the non-catastrophic or the catastrophic rules. All households must meet the citizenship and residence criteria in rule 2604 and furnish required information as specified in rule 2605.

Households with emergency needs not caused by a catastrophic situation must include a minor dependent or meet other criteria of age or ability to work (rule 2610) to be determined eligible, and must have income below the applicable income test (rule 2610 B). Households in which all members receive Reach Up, a Postsecondary Education Program (PSE) stipend, SSI/AABD, or a combination of these program benefits are ineligible for non-catastrophic GA because they are considered to be over income for this program.

Households with emergency needs caused by a catastrophic situation must meet the eligibility criteria in rule 2620. Emergency medical needs are considered catastrophic. All households applying for GA for an emergency medical need must meet the catastrophic GA criteria at rule 2620 to have the emergency medical need covered by GA.

General Assistance, a program to meet emergency needs, has no provision for ongoing assistance. Subsequent requests will be treated as new applications.

Application

2601 Application

To have their eligibility for GA considered, all applicants (rule 2603) or their authorized representatives must:

- a. submit a complete, signed application each time they request assistance; and
- b. have a face-to-face interview with an ESD representative, unless waived by the district manager.

Action on applications shall be taken upon receipt and review of a signed application. The action shall be considered complete when:

- a. A decision on the application has been made.
- b. Written notice of such decision has been made available to the applicant. A written grant notice is not required but will be provided upon request. A written denial notice is required if the entire application or any part of it is denied.

Oral notice of assistance granted shall include the following specific information:

- a. Items and amount authorized.
- b. Effective dates of authorization.
- c. Method of payment.

Written notice of assistance denied shall include the specific reason for denial.

Failure to complete action on an application promptly shall not constitute the sole reason for denial of assistance unless it can be established and documented in the case record that such failure is the result of noncooperation on the part of the applicant.

2601.1 Methods of Investigation

The applicant is the primary source of information about his need and eligibility for aid or benefits. Information furnished on the signed application and through interviews may be subject to verification, through documentary or collateral sources.

Application

Reliance on the applicant as the primary source of information to establish eligibility recognizes the right to privacy, but also places responsibility on the applicant to furnish necessary information completely and accurately or, when needed, to give consent to obtain such information elsewhere. Department responsibility to assist an applicant to establish eligibility requires careful explanation and interpretation of program eligibility criteria and information needed to assess the applicant's circumstances against such eligibility criteria.

An applicant has a right to refuse to give information, to submit required proof, or to give consent to a collateral contact. Such refusal of information or action necessary to establish eligibility will result in denial or closure of aid or benefits. Willful misrepresentation of applicant circumstances will also result in legal action under fraud statutes. Department staff shall make every effort to assure full applicant understanding of the consequences of refusal to take necessary action to establish eligibility or misrepresentation of individual circumstances.

An individual may apply for aid or benefits through another person; for example: an authorized representative; a person acting responsibly for an incompetent or incapacitated individual. The individual acting for the applicant is, in such situations, considered the primary source of information, subject to the same rights, responsibilities and consequences for the applicant as an applicant acting directly for himself.

2601.2 Interviews

Face to face interviews are required for General Assistance applications. Such interviews may be conducted in the applicant's home or another mutually convenient location when individual circumstances of health, or unusual transportation problems preclude office interviews.

Personal interviews are conducted privately with the applicant, who may have one representative of his choice to assist in oral presentation of his needs.

2601.3 Verification

Verification, defined as a written entry in the case record of third party or documentary confirmation of facts stated by an applicant, shall be required for the following:

- a. All income (including deductions), resources, and shelter expense.
- b. Positive means of personal identification (e.g., Social Security card, driver's license, birth certificate, marriage certificate).

Application

- c. Whenever necessary to obtain complete, clear, and consistent information with regard to any other eligibility factor.

Written verification statements shall include sufficient detail to enable independent reviewer evaluation of the reasonableness of the resulting eligibility decision, including but not limited to a description of method used, dates, sources, summary of information obtained, and any computations required.

Refusal to submit necessary verification or to consent to verification of any eligibility factor or to cooperate in investigation necessary to support an affirmative decision of eligibility shall result in denial of the application.

2601.4 Collateral Sources

Contact with sources other than the applicant concerning his eligibility for aid or benefits is limited to interviews, telephone calls, or correspondence necessary to obtain information required to make a decision on eligibility when the applicant is unable to furnish the necessary information. Information requested from collateral sources is limited to the specific eligibility factors in question.

Common collateral sources are relatives, town officials, town service officers, public records, doctors, and medical facilities. Other agencies that have worked with the applicant are generally the best source of collateral information.

No collateral contact is made without the applicant's knowledge and consent, based on his clear understanding of the need for and purpose of each contact. Department policies regarding confidentiality will be respected.

An applicant may on occasion be reluctant to consent to contact with collateral sources. If, with full understanding of the possible alternative of denial, the applicant refuses to permit a necessary contact, the application shall be denied.

Applicant Household

2602 **Applicant Household**

A GA household shall consist of an individual applying for GA and all dependents living with the applicant in Vermont for whom the applicant is legally responsible, i.e., spouse, civil union partner, and dependent children under the age of 18. The following individuals must be considered members of the applicant household when they live together:

- dependent children under the age of 18;
- their siblings, half-siblings, and step-siblings under the age of 18;
- their parents, step-parents, or other legally responsible relatives.

The members of the GA household shall have their needs, income, and resources considered together to determine eligibility.

Individuals age 18 or over who live with their parents are considered a separate family and must complete a separate application.

Definitions

2603 **Definitions**

The following definitions apply to the terms used in the GA rules.

- a. “Able-bodied” means no physical or mental impairment exists that prevents the person from working. A person shall not be considered able-bodied if currently unable to work in any type of employment due to physical or emotional problems that have lasted or presumably will last at least 30 days. This eligibility factor must be verified by a signed statement from a physician or licensed practitioner whose services would be covered under Medicaid were the GA applicant a Medicaid recipient. The department shall pay the reasonable expense of required medical examinations and may require and pay for a second opinion.

Individuals whose SSI/AABD eligibility has been terminated because of the SSI/AABD 36-month time limit related to drug or alcohol disability shall be considered able-bodied with respect to their drug or alcohol impairment.

- b. “Applicants” means individuals applying for GA for their own needs and for the needs of those dependents with whom they live in Vermont and for whom they are legally responsible.

For married individuals or parties to a civil union who live together, the term applicant refers to both spouses or civil union partners. Either spouse or partner may complete the application.

For unmarried adults who live together and have a child-in-common, the term applicant refers to both adults. Either adult may complete the application.

Applicants must be age 18 or older, unless emancipated (see emancipated minor below).

- c. “Available resources” means cash on hand or in a bank or other financial institution, including Christmas clubs and U. S. savings bonds or other negotiable instruments that can be converted into cash on demand within 24 hours when responding to an immediate emergency need for the first time. The applicant shall be advised to take steps to access other resources such as cash value of life insurance, sale of stock, bonds, or mutual funds, cashing of an IRA or other reasonably accessible resource to meet future needs. Future GA applications will be evaluated in relation to whether the applicant has taken reasonable steps to access these resources. If not, the application will be denied because no effort was made to access resources that could have been currently available to meet the emergency need.
- d. “Calculation of time periods” shall include the date of application. When determining income for the last 30 days, however, the 30-day period ending on the day prior to the date of application is used.

Definitions

- e. "Dependent" means any of the following members of the applicant's immediate family: husband, wife, civil union partner, and children under age 18, unless they are emancipated minors, including biological, adopted, and stepchildren. A pregnant woman having no children in her household shall not be considered to have a minor dependent.
- f. "Emancipated minor" means a minor emancipated by judicial decree under the laws of any state. A minor is also considered emancipated if married or in active military service.
- g. "Gainful employment" means individuals:
- work at least 35 hours per week at no less than the applicable minimum hourly wage;
 - have gross weekly income that, when divided by 35, equals or exceeds the applicable minimum hourly wage, regardless of the actual number of hours worked; or
 - if self-employed, work at least 35 hours per week and the balance of income remaining after deducting allowable self-employment deductions equals or exceeds the minimum wage. An individual shall be considered self-employed if the Internal Revenue Service requirements for classification as self-employed are met.
- h. "Minimum wage" means the state or federal minimum wage, whichever is the higher.
- i. "Relative" means one of the following individuals:
- Any blood relative, including those of half-blood, and including first cousins, nephews, nieces and preceding generations, as denoted by the prefixes grand-, great-, and great-great;
 - Stepparent, stepbrother, stepsister;
 - Any adoptive relative of corresponding degree, upon whom Vermont law (15A V. S. A. § 1-104) confers the same rights, duties, and obligations as natural relatives;
 - Any spouse or civil union partner of an individual included in the above groups, even if the marriage or civil union has been terminated by death, divorce, or dissolution.
- j. "Suitable employment" means that:
- The wages (monetary and in-kind) are equal to or exceed the minimum wage. The value of in-kind income shall be established by the employer.
 - The individual is physically and mentally fit to perform the employment offered.
 - The work offered is not at a site subject to a strike or a lockout at the time of the offer.

Definitions

The eligibility worker shall establish when medical documentation is required to determine suitability of employment. The department shall pay the reasonable charge for medical examination and report.

- k. "Transient" means an individual who does not intend to establish a permanent residence in Vermont.

Citizenship and Residence

2604 **Citizenship and Residence**

To be eligible for GA, an applicant must be a U. S. citizen or a legal alien.

When a town service officer or district director has reason to believe that an applicant came into Vermont for the purpose of receiving GA or, in the case of applications for payment of medical services, receiving medical care, the town service officer or district director may find the applicant ineligible. (33 V. S. A. §2107) Such applicants, however, may be granted GA for transportation to the place they were living before coming to Vermont. (33 V. S. A. §2107)

Applicant's Responsibility

2605 **Applicant's Responsibility**

Applicants are the primary source of information about their circumstances. Respect for their rights to privacy place responsibility on applicants to furnish complete and accurate information.

Pursuant to 33 VSA Section 2104 and 2105, all GA applications require investigation and recording of the circumstances of the person alleged to need GA to determine eligibility. Applicants must furnish information required as to physical condition, earnings or other income, ability of all members of their families to be employed, the cause of the person's condition, the ability and willingness of persons legally liable for their support to assist and other relevant data.

The Department retains the right to verify any or all information provided by applicants. To be eligible for consideration for assistance, applicants must agree to the requisite investigation of their circumstances.

District Director's Responsibility

2606 District Director's Responsibility

District Directors shall furnish necessary assistance, according to Department standards and regulations to meet immediate maintenance need (food, clothing, shelter, etc.) as it arises. Eligibility for such aid under any other Department program is explored prior to authorizing use of General Assistance funds.

District Directors shall assure exploration of the applicant's eligibility for medical or other assistance through a legally responsible relative or Department categorical program prior to issuing GA funds.

Services to help individuals with emergency admission to state institutions (other than penal) shall be handled by the District Director in the absence of the Town Service Officer, but only when no family member or other interested person is available to take this responsibility. Payment of necessary expenses is discretionary with District Directors according to Department policy.

Arrangements for burial, in the absence of the Town Service Officer and when no family member or other interested person is available to take this responsibility shall be handled by District Directors. Authorization to grant permission to bill the Department for burial expenses of a recipient of AABD, Reach Up or Medicaid (nursing home cases only), other needy individuals, or a committed child, shall be vested in the District Directors.

District Directors shall take positive action under the applicable paragraph of rule 2610 C to recover GA funds.

District Directors may delegate authority to subordinate staff members to carry out the functions of the GA program.

Non-Catastrophic Eligibility

2610 Non-Catastrophic Eligibility

Applicant households in which all members receive Reach Up, a Postsecondary Education Program (PSE) stipend, SSI/AABD, or a combination of these program benefits, do not qualify for GA in non-catastrophic situations. All other households applying for emergency needs that are not attributable to a catastrophic situation may qualify for GA to address that need, provided they meet one of the two criteria of subsection A, all of the criteria of subsection B, the citizenship and residence criteria in rule 2604, and the applicant's responsibility criteria in 2605.

- a. The household applying for non-catastrophic GA must meet either criterion 1 or 2.
 1. The household must include a dependent child under the age of 18 (rule 2603).
 2. The applicant and the applicant's spouse or civil union partner, if living in the home, must each meet one of the following four criteria:
 - i. is age 65 or older;
 - ii. is younger than 65 and not able-bodied (rule 2603);
 - iii. is younger than 65, able-bodied, and the spouse or civil union partner of an SSI/AABD recipient or an SSI/AABD applicant who meets criterion a or b above; or
 - iv. is younger than 65, able-bodied, and has two or more of the following employment barriers:

Employment Barriers

- i. Age 55 or over. Eligibility based on this barrier shall be contingent upon enrollment and active participation in employment-related activities under the Older Americans Act, or similar programs, as available.
- ii. Unable to read or write or has no more than an eighth-grade education. Eligibility based on this barrier shall be contingent upon enrollment and active participation in an Adult Basic Education or other approved/recognized educational program, as available. Eighth-grade education means completion of eighth grade, but not completion of ninth grade.
- iii. Employed or self-employed fewer than six months in the last five years and a full-time student fewer than six months in the last five years.
- iv. Released from a mental health institution or mental health hospital unit within the last six months.

Non-Catastrophic Eligibility

- v. Participating in a state or federally funded drug or alcohol treatment program. Participating means following an established treatment plan measured by the individual making progress toward the treatment goals as established by the treatment provider. Eligibility under this barrier shall be limited to 36 cumulative months, beginning on the day eligibility is based on this barrier. An individual whose SSI/AABD eligibility has terminated because of the SSI/AABD 36-month time limit related to drug or alcohol disability cannot base eligibility on this barrier. If the individual's SSI/AABD terminated prior to the 36-month time limit, the barrier may apply up to 36 months including of the period of SSI/AABD receipt.

- b. The household applying for non-catastrophic GA must meet all of the following six criteria:
 - 1. During the 30-day period immediately prior to application, the applicant household has received net income, computed according to rule 2640, less than the applicable income limit. The applicable income limits are as follows:
 - i. For a household with members participating in the Reach Up Program, the income limit is the Reach Up payment standard used to determine the amount of the family's Reach Up financial assistance grant.
 - ii. For a household with a parent participating in the PSE program and receiving a PSE living expense stipend, the income limit is the Reach Up payment standard used to determine the amount of the family's PSE stipend.
 - iii. For a household with a parent participating in the Postsecondary Education Program (PSE) but not receiving a PSE living expense stipend, the income limit is the Reach Up payment standard used to determine a stipend payment for a family of the same size with the same housing costs.
 - iv. For a household with no members participating in either Reach Up or PSE, the income limit is the Reach Up payment standard for a family of the same size with the same housing costs.

The Reach Up payment standard is the need standard ratably reduced before consideration of any income (rule 2252).

Non-Catastrophic Eligibility

2. No household members are sanctioned under the Reach Up program because of their refusal to comply with a program eligibility or participation requirement. The disqualification period for GA will be the same as the Reach Up sanction period.
 3. The household is actively pursuing all sources of potential income appropriate to their situation, such as, but not limited to, Reach Up, SSI, AABD, Medicaid, 3SquaresVT, fuel assistance, unemployment or worker's compensation, veterans benefits, insurance payments, railroad retirement, pensions, social security, wages, and child support. Pursuit of potential income means initiating an application, request or complaint as appropriate prior to a subsequent GA grant, cooperating with requirements for a timely decision, and continuing to cooperate in meeting requirements to maintain such income on an ongoing basis thereafter.
 4. There is an emergency need. If the emergency need is a need for medical services or items, the department shall determine eligibility according to the rules for catastrophic situations at rule 2620, even if the applicant meets the non-catastrophic income test at rule 2600.
 5. The household has exhausted all available income and resources except that:
 - i. Applicants who have available resources (rule 2603) less than their need shall have the amount of the resources deducted from the GA grant.
 - ii. Single individuals age 62 or over, or in receipt of SSI/AABD or social security based on blindness or disability, may have up to \$1,500 of available resources disregarded. Up to \$2,250 of the households available resources may be disregarded if the individual lives with a spouse or civil union partner. With the exception of special resource treatment related to burial expenses (rule 2670-2677), only resources in excess of these amounts will be counted as available in determining eligibility or benefits for such persons.
 - iii. Resources set aside in an escrow account for the purpose of paying property taxes or homeowner's insurance shall be disregarded up to the amount of these projected expenses.
 6. The household has complied with the employment requirements in rule 2631, if applicable.
- c. General Assistance shall be furnished with the understanding that when a recipient subsequently acquires benefits or resources in any amount from an inheritance; cash prize; sale of property; retroactive lump sum social security, veterans, or railroad retirement benefits; or court awards or settlements; the recipient shall be required to make reimbursement for the amount of aid furnished during the previous two years.

Non-Catastrophic Eligibility

SSI/AABD Applicants

The GA applicant or GA household member who has a pending SSI/AABD application, or who is being referred by the department to the Social Security Administration (SSA) to apply for SSI/AABD, must sign a Recovery of General Assistance Agreement authorizing SSA to send the initial SSI/AABD payment to this department so the amount of GA received can be deducted. Regardless of the amount of the initial SSI/AABD payment, the deduction shall be made for GA issued during the period from the first day of eligibility for SSI/AABD, or the day the Recovery of General Assistance Agreement is signed, if later, to the date the initial SSI/AABD payment is received by the department.

When the SSI/AABD grant does not include all members of the GA household, the deduction shall be for a prorated portion of GA granted, to reflect only those included in the SSI/AABD grant.

The department shall send any remainder due to the SSI/AABD recipient within 10 days. An exception to this provision applies to individuals whose SSI/AABD is based on drug addiction or alcoholism. After SSI/AABD is granted and SSA has reimbursed Vermont for GA received, SSA will pay the remainder of the initial SSI/AABD payment to the recipients representative payee.

Catastrophic Eligibility

2620 Catastrophic Eligibility

Applicants with an emergency need attributable to a catastrophic situation (rule 2621) may qualify for GA to address that need, provided that they meet the eligibility criteria in rules 2604 – 2605 and 2620 – 2623 and payment conditions in rules 2651-2667. Applicants seeking help for an emergency medical need shall not be eligible for GA to address that need if they have been denied or lost health insurance sponsored by the state or federal government for specified reasons (rule 2620 D).

To qualify for such assistance, applicants must meet all of the following eligibility criteria:

- a. They must have an emergency need attributable to a catastrophic situation, as defined in rule 2621.
- ~~b. They must have exhausted all available income and resources. The exhaustion of all available income does not apply to catastrophic temporary housing assistance provided under rule 2652.2 (see rule 2652.4).~~
- b.
- c. They must explore and pursue or have explored and pursued all alternatives for addressing the need, such as family, credit or loans, private or community resources, and private or government-sponsored health insurance. Before the department will determine eligibility for GA payment for vision services or items, the applicant must pursue or have pursued assistance from the Vermont Association for the Blind, the Lions Club and other service organizations, school-related health programs, and other child development programs, if applicable.
- d. If seeking assistance for a medical need, at the departments most recent eligibility determination they must not have been denied or lost government-sponsored health insurance that would have covered the current need because of either or both of the following reasons:
 - they failed to pay a premium for the government-sponsored health insurance, or
 - they failed to comply with any administrative eligibility requirement necessary to be covered by the government-sponsored health insurance.

For purposes of GA rules, premium is defined as it is defined in Vermont Medicaid rules. Premium means a nonrefundable charge that must be paid by an applicant or beneficiary as a condition of initial and ongoing enrollment for health insurance.

Catastrophic Eligibility

Eligibility workers shall explain to applicants that they are expected to take steps to avoid or resolve emergencies in the future without GA. Except for applicants who are receiving their final grant of assistance within a 12-month period, applicants and eligibility workers shall work together to develop a schedule of activities addressing the applicant's emergency need. Completion of these activities is a requirement for continued receipt of assistance. These activities shall be documented in the applicant's case record.

Subsequent applications must be evaluated in relation to the individual applicant's potential for having resolved the need within the time which has elapsed since the catastrophe to determine whether the need is now caused by the catastrophe or is a result of failure on the part of the applicant to explore potential resolution of the problem.

The department shall not apply an income test or resource exclusions in determining eligibility due to a catastrophic situation.

Catastrophic Situation

2621 Catastrophic Situation

For the purposes of this section, catastrophic situations are limited to the following situations:

- a. Death of a spouse or minor dependent child.
- b. The presence of an emergency medical need, as defined at rule 2623.

The department shall determine the eligibility of an applicant for payment of medical services or items using the criteria for eligibility due to a catastrophic situation at rule 2620, even if the applicant meets the non-catastrophic income test at rule 2610 B.

- c. A natural disaster such as a flood, fire, or hurricane.
- d. A court-ordered eviction or constructive eviction, as defined at rule 2622, due to circumstances over which the applicant had no control.

A court-ordered eviction resulting from intentional, serious property damage caused by the applicant, other household members, or their guests; repeated instances of raucous and illegal behavior that seriously infringed on the rights of the landlord or other tenants of the landlord; or intentional and serious violation of a tenant agreement is not considered a catastrophic situation. Violation of a tenant agreement shall include nonpayment of rent if the tenant had sufficient income to pay the rent and did not use that income to cover other basic necessities or withhold the rent pursuant to efforts to correct substandard housing.

- e. Domestic violence, dating violence, sexual assault, stalking, human trafficking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence.

Acceptable verification of domestic violence includes:

- a relief-from-abuse restraining order or order against stalking or sexual assault;
- observable physical evidence of abuse;
- corroboration of domestic violence, sexual violence, human trafficking, or stalking from police, hospitals, court officials, physicians, nurses, or any other credible sources;

Catastrophic Situation

- a determination of abuse by staff at a domestic violence shelter or organization;
- a waiver of the Reach Up requirement to cooperate in pursuing child support (see rule 2235.2);
or
- a deferment or modification of the Reach Up work requirement due to the effects of domestic violence (see rule 2363.1).

Constructive Eviction

2622 **Constructive Eviction**

Constructive eviction is defined as any disturbance caused by a landlord, or someone acting on the landlords behalf, that makes the premises unfit for occupation. The motive for the disturbance, which may be inferred from the act, is the eviction of the occupant.

A situation in which the landlord has not provided heat, utilities, or water within a reasonable period of time and there is an agreement to furnish these items shall be considered a constructive eviction when the applicant is pursuing legal resolution of these offenses through the Vermont Department of Health or appropriate local officials, such as the local housing inspector or town health officer. The Department shall not deny benefits to an individual in a constructive eviction situation because the individual chooses not to pursue legal action such as withholding rent, obtaining a court order, suing the landlord, or terminating the rental agreement.

Constructive eviction includes written or verbal notice of a termination of tenancy for no cause from the landlord to the tenant. A no cause termination means the tenancy is being terminated and it is not the fault of the tenant. If a termination notice includes multiple reasons for terminating the tenancy, but one of the reasons for termination is not the fault of the tenant, the Department will consider the termination a no cause termination. The applicant must provide verification of the existence of a tenancy and termination of the tenancy. A tenancy exists when the landlord is the owner, lessor, or sublessor of a residential dwelling unit or building and the tenant has the right to exclude anyone else from the dwelling unit or building, including the landlord if the landlord has not given proper notice. A residential dwelling unit includes a room if the tenant has the right to lock anyone out of the room, including the landlord.

Emergency Medical Need

2623 Emergency Medical Need

The general definition of emergency medical need in subsection A applies to all items and services except those related to vision, dental, and prescription drugs. The definitions of emergency medical need as applied to vision, dental, and prescription drugs are specified in subsections B through D.

a. Emergency Medical Need – General

An emergency medical need is defined as a need for a medical service or item attributable to a medical condition characterized by acute symptoms of sufficient severity, including but not limited to severe pain, such that a prudent layperson, with an average knowledge of health and medicine, could reasonably expect the absence of medical attention to result in the following:

- serious jeopardy to the health of the participant;
- serious impairment to bodily functions; or
- serious dysfunction of the bodily organ or part.

Prior to issuing a vendor authorization for covered physician services, vision services and items, medical supplies, durable medical equipment, or ambulance services, eligibility workers shall obtain a determination from the Department of Vermont Health Access (DVHA) that such services or items address an emergency medical need (as defined in subsection A or B) or addressed such a need at the time the services or items were provided.

b. Emergency Medical Need – Vision

An emergency medical need is deemed to exist if and only if vision services or items for which GA payment is requested are covered by GA (rule 2663) and necessary to:

- aid convalescence from eye surgery;
- prevent blindness or further deterioration of eyesight;
- avert risk of physical injury from normal living hazards, such as stairs and stoves; or
- allow an individual to continue education or employment.

Emergency Medical Need

c. Emergency Medical Need – Dental

An emergency medical need is deemed to exist if and only if dental services for which GA payment is requested are covered by GA (rule 2662) and necessary to relieve pain, bleeding, or infection. The Division of Dental Services at the Vermont Department of Health shall determine whether dental services for which GA payment is requested addressed an emergency medical need at the time the dental services were provided.

d. Emergency Medical Need – Prescription Drugs

An emergency medical need is deemed to exist if and only if a prescribed drug for which GA payment is requested complies with the requirements of the pharmacy best practices and cost control program, and is not included in a classification on the departments list of noncovered drug classifications (rule 2664).

Employment

2630 **Employment**

Each applicant is required to explain the employment requirements to non-exempt individuals who are not present at the initial interview and to supply them with employment verification forms. Whenever possible, a non-exempt individual shall appear in person at the District Office at the time of each subsequent application.

Work Requirements

2631 **Work Requirements**

Any individual who is included in the application and is not exempted under rule 2632 shall:

- a. Be present whenever possible at the time of each application.
- b. Submit evidence of an active effort (rule 2633) to seek gainful employment consisting of at least three job contacts with different employers per week. This requirement does not apply to the first GA application.
- c. Not restrict employment search to his/her major field of experience or to limited types of occupations. The applicant shall accept any suitable job referrals and/or offers within his/her ability. The applicant shall be required to substantiate why a particular job cannot be performed.
- d. Submit evidence of contact within the past 24 hours or previous workday with the Department of Labor for the purpose of obtaining employment opportunity information.
- e. Not have refused within the 30 days prior to application to report to the local Department of Labor if requested by either the Department of Labor or the Department for Children and Families.
- f. Not have refused within the 30 days prior to application date to report for an employment interview for suitable employment when referred by the Department of Labor or the Department for Children and Families.
- g. Not have refused within the 30 days prior to application to accept a bona fide offer of full or part-time employment.
- h. Not have quit suitable employment in the 30 days prior to application.

If any person not exempted from the employment requirements (rule 2632) fails to meet any one of the above requirements, he/she and all individuals included in the application shall be ineligible.

Work Exemptions

2632 **Work Exemptions**

Any individual included in the application shall be exempt from the employment requirements (rule 2631) if such individual meets at least one of the following five exemption criteria:

- a. Is under age 16, is age 65 or over, or is age 16 or 17 and a full-time student.
- b. Is gainfully employed (rule 2603 G).
- c. Is personally providing the majority of care for a child who is born, under age three, and living in the home or for another household member who is unable to care for him/herself due to illness or injury.

When more than one individual in the GA household claims such responsibility, the determination as to whom shall be exempt will be made by the Department;

A pregnant woman with no other children is not exempt simply because of her pregnancy.

An individual who is pregnant or who has responsibility for care of a child who is age 3 or older but under age 18 may be exempt from the work requirement if that individual has not received General Assistance or Emergency Assistance in the previous sixty days.

- d. Is currently unable to work due to physical or emotional problems that have or may be presumed to last at least 30 days. Documentation of incapacity must be entered in the record to demonstrate that it is obvious, or to indicate that medical verification will be required within a worker-specified time period that may not be fewer than 3 days or more than 3 weeks.
- e. Has a verified written statement from a potential employer indicating that he/she will start working within 7 days from the date of the GA application. All individuals so exempted shall be advised to continue to attempt to seek temporary employment during the time they are waiting to start permanent work.

Any individual claiming an exemption has the burden of proving such. The Department shall pay the reasonable expense of required medical examinations.

Active Job Search Effort

2633 Active Job Search Effort

Active effort to seek employment pursuant to rule 2631 (b) is limited to the following:

- a. Personal contacts with a potential employer or company representative knowledgeable about the possibility of employment; and
- b. Time spent in actual registration or interviews at the Department of Labor to maintain an active registration and time spent at the Department of Labor inquiring as to immediate job referrals for as long as the individual is maintaining an active registration would count in lieu of one job contact. Visits which are merely to have forms signed at the Department of Labor shall not be counted; and
- c. Time spent in an employment counseling program recognized by the Department as enhancing employment opportunities would equal one job contact.

A GA recipient to whom the work search applies and who is a mandatory Reach Up participant must cooperate with the requirements of any Reach Up program service, such as an individual or group job search activity, which Reach Up program staff deem appropriate for that participant.

Telephone contacts, reading newspaper ads, resume writing, contacts with friends and acquaintances, etc., although recognized as legitimate sources of leads toward employment, shall not be counted unless part of an employment counseling program recognized by the Department as enhancing employment opportunities. Out-of-state contacts with potential employers are not counted unless the potential employment is within commuting distance of the person's home.

A GA applicant who fails to meet an "active effort" criterion will be ineligible only until he/she fulfills the requirement.

The eligibility worker shall verify as necessary the contacts specified by each applicant subject to the work search requirement. The application shall be denied for a 30-day period even when three job contacts are shown on the employment verification form, when the eligibility worker has been notified by Reach Up Program staff that a mandatory Reach Up participant is not cooperating, or when, in the judgment of the eligibility worker, the evidence of active effort to seek employment shows:

- a. There has been a substantial number of contacts with the same employers during consecutive weekly periods without a corresponding effort to seek out new potential employers.
- b. Contacts are limited to the applicant's primary occupation or in limited fields of employment in consecutive seven-day periods.

Income

2640 Income

Income means the total gross sum of all monetary remunerations received from any source for any reason. See rules 2641 through 2646 for deductions and excluded income. The following list identifies some kinds and sources of income:

- a. Reach Up financial assistance payments. Reach Up financial assistance prior to deductions to recover overpayments shall count as income received.
- b. GA and EA payments. Such payments, however, shall not be considered income if they:
 - constitute the only income received in the last 30 days;
 - are based on a catastrophic situation (rules 2621 or 2820); or
 - are issued for ~~temporary~~-emergency housing (rules 2652.2 or 2852.2) or rental or mortgage arrearage (rule 2853).
- c. Wages or compensation for services performed as an employee.
- d. Gross receipts from self-employment.

Gross receipts shall include all monies received from the following:

- sale of goods or commodities produced by the self-employment enterprise;
 - services performed in connection with and attributable to the enterprise; and
 - gross proceeds from the sale or transfer of capital assets used in or held as an investment by the enterprise (e.g., real estate, personal property, and securities).
- e. Room or board payments received.
 - f. Day care payments received.
 - g. The amount actually received in annuities, pensions, compensation or benefits (e.g., social security retirement or disability benefits, veterans benefits, railroad retirement, SSI/AABD).
 - h. Government-sponsored payments.

Income

- i. Cash gifts, child or spousal support.
- j. Rent, dividends, interest, royalties.
- k. Regularly or irregularly received cash from any source.

All income received by all persons included in the applicant household shall be verified and shall be computed to arrive at the total gross income received during the 30-day period prior to the date of the application. The total allowable deductions (rules 2641 through 2646) shall be computed and subtracted from the total gross income to arrive at the total net income received during the 30-day period prior to the date of application. If total net income equals or exceeds the applicable income limit (rule 2610 B), the application shall be denied unless the household is eligible because it has experienced a catastrophic situation (rule 2621).

The applicant may be required to substantiate that income and resources have actually been spent. Amounts not accounted for shall be considered cash-on-hand.

Work Expense Deduction

2641 **Work Expense Deduction**

To compute earned income used in determining eligibility for general assistance, an employment expense standard consisting of the first \$90 of earned income shall be deducted from the 30-day gross earned income of each employed individual in lieu of actual employment expenses such as taxes, insurance, dues, clothing, and transportation.

In addition, deductions for garnishments against income, although mandatory on the employer, shall be limited to garnishments:

- by the Internal Revenue Service for federal taxes;
- by the state of Vermont for state taxes; and
- for child and spousal support (rule 2643).

Self-Employment Deductions

2642 Self-Employment Deductions

Identifiable costs of self-employment, including self-employed farming, shall be deducted from gross receipts received in the 30-day period prior to the date of application.

Identifiable costs of self-employment include but are not limited to the following:

- a. Wages and payments for employee labor;
- b. Cost of materials used to produce commodities for sale (e.g., raw materials, stock, seed, fertilizer, inventory, livestock for resale, etc.)
- c. Taxes and interest paid on an installment contract to purchase income-producing real property, except that no portion of taxes, mortgage payment or interest attributable to investment in the home in which the household lives may be counted as a business cost;
- d. Interest on installment payments for purchase of capital assets, equipment, machinery, tools, etc.

The following items shall not be allowed as business expenses:

- a. Payments on the principal of real estate mortgages on income producing property;
- b. Monies paid to purchase capital assets; such as equipment, machinery, tools, livestock for dairying purposes;
- c. Any amount claimed as depreciation for Federal income tax or other purposes;
- d. Any amount claimed as a net loss sustained in any prior period.

Child Support Deductions

2643 **Child Support Deductions**

- a. Child support paid by a household member — The amount actually paid in the last 30 days for mandatory child support payments shall be deducted from the gross income received during that period. The child support payments shall be considered mandatory if they are made under the terms of a legal court order, or the amount of child support payments have been voluntarily agreed to between the individual and the Department, or executed through attachment of wages.

The applicant must provide positive proof of the child support payments. Check stub notations are not acceptable verification. In questionable situations contact with a knowledgeable third party, deemed reliable by the worker, may be necessary. If the payment cannot be verified the child support deduction shall not be allowed.

- b. Child support received by a household member — For purposes of determining eligibility, the first \$50 of child support received in the previous 30 days shall be deducted.

Room and Board Deductions

2644 Room and Board Deductions

The cost of providing room and board shall be deducted from the gross income received in the last 30 days in the following amounts:

Room and Board Deductions

Service Provided	Deduction Per Person Per Day
room only	\$1.00
board only	\$2.00
room and board	\$3.00

The deduction shall not exceed the amount of room and board payment received.

An applicant who provides room or board to three or more adult individuals unrelated to the applicant shall be considered to be operating a commercial enterprise and have deductions computed according to rule 2642.

Dependent Care Deduction

2645 Dependent Care Deduction

Except as specified below, dependent care expenses necessary to enable individuals to retain their employment shall be deducted as paid in the previous 30 days up to the following maximum amounts per adult or child:

Dependent Care Deduction

Dependent Needing Care	Maximum Deduction Per Dependent
child under age 2	\$200
child age 2-12	\$175
child age 13-17 who meets the criteria in Reach Up rule 2352	\$175
incapacitated adult	\$175

Dependent care deductions will be allowed on the basis of a signed statement by the provider of services. If a recipient's dependent care expenses are below the maximum, transportation to and from the dependent care facility may be deducted as part of the expense at the mileage rate published in Reach Up procedures.

As long as funding for child care subsidies through the Child Development Division (CDD) is available, Reach Up participants and PSE participants receiving a living expense stipend are not allowed a deduction for child care expenses because they qualify for the child care subsidy.

Excluded Income

2646 **Excluded Income**

Certain kinds of income are excluded from consideration when determining income eligibility for general assistance. They are considered, however, in evaluating whether an emergency need exists.

These kinds of income include:

- senior companion stipend,
- fuel assistance benefits,
- foster care payments from CDD, and
- adoption assistance subsidies.

Other kinds of income are totally excluded, even in the consideration of an emergency need, including catastrophic situations. These include:

- 3SquaresVT and 3SquaresVT cashout payments, as their use is dedicated exclusively to improvement of dietary standards; and
- money that an SSI/AABD recipient sets aside for the fulfillment of a plan to achieve self-support (PASS plan).

Benefit Issuance

2650 Benefit Issuance

During a 30-day period, benefits for emergency needs resulting from a non-catastrophic situation (rule 2610) cannot exceed the difference between the applicable income limit, as defined in rule 2610 B, and the net income for that household computed according to rule 2640. This provision is only applicable if the household has received general assistance or emergency assistance in the previous 60 days. Catastrophic benefits received in the previous 30 days are not counted as income in the net income calculation referred to above.

Benefits for needs in rules 2651 through 2657 may be issued to the applicant or to the provider of the service.

The eligibility worker determines the appropriate method of payment after assessing the preference of the applicant and provider and the applicant household's ability to use the money for the designated need.

2650.1 Vendor Payments

Vendor payments are defined as all payments made direct to a third party who has furnished goods or services to or on behalf of an applicant for or recipient of aid, benefits or services under Department programs. Vendor payments cover the following types of authorized General Assistance expenditures:

- a. Maintenance assistance authorized in lieu of direct money payment to the recipient.
- b. Medical care and services.
- c. Burial expenses.
- d. ~~Temporary~~ Emergency housing expenses.

Vendor billing shall require prior written authorization by designated Department staff. In specified emergency situations, oral authorization may be given; in such instances, confirming written authorization or approval of a designated staff member shall be required for payment.

Itemized bills shall be submitted in duplicate to the appropriate district office, when so directed, for approval. All other bills, itemized, shall be submitted, in duplicate, accompanied by appropriate written authorization to the State Office. Payment shall be made through established Department and State disbursement channels.

Benefit Issuance

Contracts with specified vendors to provide goods or services shall specify acceptable methods of authorization, billing and payment for items covered under the contract.

Persons who provide lodging to emergency housing assistance recipients must hold a lodging license issued by the Vermont Department of Health. These persons must comply with all applicable laws and rules, including but not limited to the Vermont Department of Health's Licensed Lodging Establishment Rule and the Vermont Department of Public Safety's Vermont Fire and Building Safety Code. The Department may withhold full or partial payment to any person who violates any law or rule or whose license is suspended, revoked, expired, or otherwise invalid. Specifically, the Department may withhold full or partial payment to persons to whom the Department of Health has issued a conditional license, abatement order, warning letter, or other notice of violation. Likewise, the Department may withhold full or partial payment to persons who have received notices from other government agencies that indicate that the person has violated a law or rule. Once the Department is satisfied that the person is complying with the law, the Department will begin or resume payments at the agreed-upon rate for lodging provided after the violation ended. The Department may provide all, some, or none of the payments withheld based on the nature and extent of the legal violations and the effects those violations had on emergency housing assistance recipients.

2650.2 Administrative Expenses

Administrative expense required to establish eligibility for assistance is currently limited to professional examination, evaluation and report on medical factors related to eligibility. Payment of reasonable charge for such examination and report shall be approved on receipt of the required written report and itemized bill.

Groceries and Personal Needs

2651 Groceries and Personal Needs

Groceries and personal needs include food and essential items for household and personal care, such as soap, toothpaste and such items as are normally purchased at a grocery outlet. General Assistance payment levels are based on current Reach Up basic need standards reduced by a percentage necessary to avoid exceeding current GA funding. The following payment standard shall be used by District Directors and Town Service Officers to determine the amount of aid to be given for groceries and personal needs (see also rule 2654 - Room and Board-Restaurant Meals). Grocery and personal need allowances shall be issued, as needed from one to seven days. For applicant households exempt from the employment requirements allowances may be issued for up to 28 days as needed. Do not issue an allowance for any period covered by a previous issuance except when a condition exists as defined in rule 2620 (b) and (c).

Groceries and Personal Needs Allowance

Groceries and personal needs allowance in dollars														
No. in family	1 day	2 days	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days	11 days	12 days	13 days	14 days
1	4.00	4.00	6.00	8.00	10.00	12.00	14.00	16.00	18.00	20.00	22.00	24.00	26.00	28.00
2	6.50	6.50	10.00	13.50	16.50	20.00	23.50	26.50	30.00	33.50	36.50	40.00	43.50	47.00
3	9.50	9.50	14.00	18.50	23.50	28.00	32.50	37.50	42.00	46.50	51.50	56.00	60.50	65.00
4	9.50	10.50	16.00	21.50	26.50	32.00	37.50	42.50	48.00	53.50	58.50	64.00	69.50	75.00
5	9.50	13.50	20.00	26.50	33.50	40.00	46.50	53.50	60.00	66.50	73.50	80.00	86.50	93.00
6	10.50	14.50	22.00	29.50	36.50	44.00	51.50	58.50	66.00	73.50	80.50	88.00	95.50	103.00
7	12.00	17.50	26.00	34.50	43.50	52.00	60.50	69.50	78.00	86.50	95.50	104.00	112.50	121.00
8	13.50	20.00	30.00	40.00	50.00	60.00	70.00	80.00	90.00	100.00	110.00	120.00	130.00	140.00
9	13.50	21.50	32.00	42.50	53.50	64.00	74.50	85.50	96.00	106.50	117.50	128.00	138.50	149.00
10	13.50	24.00	36.00	48.00	60.00	72.00	84.00	96.00	108.00	120.00	132.00	144.00	156.00	168.00

Annotated Text

For each add'l person	1.50	2.50	4.00	5.50	6.50	8.00	9.50	10.50	12.00	13.50	14.50	16.00	17.50	19.00
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Housing

2652 Housing

Housing includes accommodations to provide permanent or temporary shelter for eligible applicants. Housing may include furnishings, fuel, and utilities. Applicants are required to furnish verification of housing expenses. Housing payments may be authorized only when the applicant cannot obtain housing without cost to the applicant, for example, housing supplied by relatives, friends, or community groups. Payment may be provided for rent, lot rent, mortgage, condo and association fees, water and sewer charges, fuel and utilities when included in the rent, but not taxes. A household in crisis requiring general assistance should be considered for tax abatement before a housing crisis would occur. An exception to this policy, relative to taxes, is that payment may be made on behalf of an otherwise eligible applicant, when foreclosure proceedings have been filed by the municipality to which the taxes are owed, and the proceedings are scheduled to take place within 30 calendar days. Payment shall be for the minimum amount necessary to prevent tax foreclosure.

2652.1 Permanent Housing

Permanent housing is defined as housing accommodations intended to provide shelter on a continuing basis.

Payment shall not exceed the housing payment maximum or the actual payment, whichever is less.

When more than one individual or family unit occupy the same housing unit, the payment per applicant household shall not exceed the housing payment maximum or the pro-rata share of the total rent or mortgage payment, whichever is less. The total rent or mortgage payment used to compute the pro-rata share shall not exceed three times the applicable housing payment maximum. Any amount exceeding this shall be disregarded in the computation.

The pro-rata share is computed by dividing the total, up to three times the maximum, by the number of individual or family units sharing the housing unit.

When a housing allowance for the period to be covered has been or will be included in the applicants Reach Up financial assistance grant or Postsecondary Education Program living expense stipend, that allowance, after ratable reduction, shall be deducted from the applicant's general assistance grant.

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Payment may be authorized for the current mortgage or rental period only and shall not be authorized or issued prior to the due date for that period. "Current period" is defined as the period extending from the most recent date that rent was due through the day prior to the next date that rent is due. For example, if an applicant applies for rental assistance on January 10 and his rent is due monthly on the first of the month, the current period is January 1 through January 31. No payment may be authorized for a period other than the current period. Payment may be made only if the applicant is financially and otherwise eligible on the date of application.

When both a rental arrearage and a continuing rental obligation exist, a rental payment made (or a failure to make a payment) during a given month will be considered for GA purposes as a payment (or failure to pay) for that month. Example: A GA applicant makes a \$150 rent payment on January 1, which his landlord applies to his \$450 arrearage. On January 5 the applicant requests GA for his January rent. His rent payment on January 1 is considered for GA purposes as payment toward the January rent due, regardless of the fact that his landlord chose to apply the payment to arrearages.

Room rent is paid according to different maximums depending on whether the applicant pays this rent to a relative or to a non-relative. The relative or non-relative status of the person or persons to whom the applicant pays room rent shall be determined according to definitions used in the Reach Up Program. The following individuals shall meet the definition of "relative":

- a. Any blood relative, including those of half-blood, up to and including first cousins, nephews, nieces; and preceding generations, as denoted by the prefixes "grand-", and "great-grand-";
- b. Stepparent, stepbrother, stepsister;
- c. Any adoptive relative of corresponding degree, upon whom are conferred under Vermont law the same rights, duties and obligations as natural relatives;
- d. Any spouse of an individual included in one of the above groups, whether or not the marriage has been terminated by death or divorce.

General Assistance payment levels are based on basic need standards updated to recognize cost of living increases but then ratably reduced by a percentage necessary to avoid exceeding current GA funding.

Shelter payment in the General Assistance Program is allowed as incurred up to, but not in excess of, the maximums precomputed as shown below.

Housing

Housing Payment Maximums

Housing Type	Payment Maximums			
	Weekly	Bi Weekly	Semi Monthly	Monthly
Home Ownership or Rental				
<u>Chittenden County Only</u>	\$54.00	\$108.00	\$116.00	\$232.00
<u>All Other Counties</u>	\$46.00	\$92.00	\$99.00	\$198.00
Room Rent - paid to non-relative		\$40.00 (meals not supplied)		
Room Rent - paid to relative		\$30.00 (meals not supplied)		

Living space shall not qualify as home ownership or rental unless it consists of at least two rooms, a private toilet facility, private entrance either from outside or a public hallway, and has or is equipped to accept cooking facilities. (The G. A. Supervisor may make written exception when the space has clearly been designed as an apartment but does not meet specific criteria as listed.)

A rented mobile home shall qualify as home rental. A mortgaged or owned mobile home shall qualify as home ownership. Lot rental, water, and sewer charges are included in the payment maximums.

Amounts paid for ~~temporary emergency~~ housing shall not be added into amounts paid for permanent housing to arrive at the above maximums.

Room rent may be authorized for a period not to exceed one week, except that, when applicants are exempt from the employment requirements, it may be authorized for a two-week period.

Deposits or security payments shall not be authorized.

2652.2 ~~Temporary Housing in Catastrophic Situations~~ Emergency Housing Assistance
(3/28/2015, 15-06)

~~Temporary housing is intended to provide short term shelter (84 day maximum) for applicants who are involuntarily without housing through circumstances they could not reasonably have avoided, pursuant to rule 2621, and for whom permanent housing or alternative arrangements are not immediately available.~~

~~Authorization for temporary housing may be issued for periods of up to 28 days, at the Department's discretion. Payment may be authorized in an amount necessary to secure such housing at the least expensive rate available to the applicant at that time.~~

Housing

~~Temporary housing payments above the GA payment maximums will be allowed for only 84 days in any consecutive 12 month period. The 12 month period is computed from the date of application to the same day of the month 12 months prior. The 84 day period need not be consecutive. After the 84 day period, payments are allowed only up to the permanent housing payment maximum.~~

~~The 84 day temporary housing maximum is cumulative for the Emergency Assistance and General Assistance Programs. An applicant who has received 84 days in temporary housing under EA during a 12 month period is not eligible for any further temporary housing assistance under GA for the same 12 month period. Temporary housing beyond 28 cumulative days in any consecutive 12 month period is not an entitlement; payments shall cease upon expenditure of the annual appropriation for this purpose.~~

~~Housing authorizations in amounts above the GA payment maximums shall be discontinued as soon as permanent housing is located, or reduced if less expensive temporary housing becomes available while the applicant seeks permanent housing.~~

~~Deposits or security payments of any type shall not be authorized.~~

~~The Department shall make all possible effort to assist in the location of permanent housing for recipients located in temporary housing. The department shall inform recipients that they are primarily responsible, however, for locating permanent housing, and that if they do not make an active effort to locate permanent housing, or fail to accept suitable housing accommodations, even if in a location other than where they are situated, continued GA payment for temporary housing shall be denied.~~

~~The work search at rule 2630 is also required when it is a factor of eligibility for any member of the assistance household.~~

a. Purpose

The purpose of General Assistance emergency housing assistance is to provide eligible households with temporary emergency housing, subject to available appropriations, in a community-based shelter or hotel or motel when an alternative housing placement is unavailable.

b. Application of other General Assistance Rules

General Assistance rules 2600 through 2683 do not apply to emergency housing assistance unless specifically referenced in this section.

Housing

c. Definitions

1. “Application” means a written or verbal request by a household to the Department for emergency housing assistance.
2. “Alternative housing placement” means shelter beds and pods; placements with family or friends; permanent housing solutions, including tiny homes, manufactured homes, and apartments; residential treatment beds for physical health, long-term care, substance use, or mental health; nursing home beds; and recovery homes.
3. “Authorized representative” means a person or entity designated, via a form provided by the Department, by a household to act responsibly in assisting the household with their application and other ongoing communications with the Department. An authorized representative must be an adult and knowledgeable of the household’s circumstances. A judicially appointed legal guardian or legal representative automatically meets the criteria for an authorized representative.
4. “Available resources” has the same meaning as defined in rule 2603(c):

Cash on hand or in a bank or other financial institution, including Christmas clubs and U. S. savings bonds or other negotiable instruments that can be converted into cash on demand within 24 hours when responding to an immediate emergency need for the first time. The applicant shall be advised to take steps to access other resources such as cash value of life insurance, sale of stock, bonds, or mutual funds, cashing of an IRA or other reasonably accessible resource to meet future needs. Future GA applications will be evaluated in relation to whether the applicant has taken reasonable steps to access these resources. If not, the application will be denied because no effort was made to access resources that could have been currently available to meet the emergency need.

5. “Community-based shelter” means a shelter that meets the Vermont Housing Opportunity Grant Program’s Standards of Provision of Assistance.
6. “Constructive eviction” has the same meaning as defined in rule 2622:

Any disturbance caused by a landlord, or someone acting on the landlord’s behalf, that makes the premises unfit for occupation. The motive for the disturbance, which may be inferred from the act, is the eviction of the occupant.

A situation in which the landlord has not provided heat, utilities, or water within a reasonable period of time and there is an agreement to furnish these items shall be considered a constructive eviction when the applicant is pursuing legal resolution of these offenses through the Vermont Department of Health or appropriate local officials, such as the local housing inspector or town health officer. The Department shall not deny benefits to an individual in a constructive eviction situation because the individual chooses not to pursue legal action such as withholding rent, obtaining a court order, suing the landlord, or terminating the rental

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agreement.

Constructive eviction includes written or verbal notice of a termination of tenancy for no cause from the landlord to the tenant. A no cause termination means the tenancy is being terminated and it is not the fault of the tenant. If a termination notice includes multiple reasons for terminating the tenancy, but one of the reasons for termination is not the fault of the tenant, the Department will consider the termination a no cause termination. The applicant must provide verification of the existence of a tenancy and termination of the tenancy. A tenancy exists when the landlord is the owner, lessor, or sublessor of a residential dwelling unit or building and the tenant has the right to exclude anyone else from the dwelling unit or building, including the landlord if the landlord has not given proper notice. A residential dwelling unit includes a room if the tenant has the right to lock anyone out of the room, including the landlord.

7. “Denial” means the Department’s determination that a household is ineligible for emergency housing assistance.
8. “Department” means the Department for Children and Families.
9. “Dependent” means any of the following members of the applicant’s immediate family: spouse, civil union partner, and children age 19 years of age or under, including biological, adopted, and stepchildren.
10. “Economic unit” means two or more individuals who reside together and share income and expenses.
11. “Household” means an individual and any dependents for whom the individual is legally responsible and who live in Vermont. “Household” includes individuals who reside together as one economic unit, including those who are married, parties to a civil union, or unmarried.
12. “Income” has the same meaning as defined in rule 2640. The deductions and exclusions in rules 2641 through 2646 do not apply.
13. “Live in Vermont” means to be physically present in Vermont with the intent to make Vermont one’s home.
14. “Misconduct” means violent criminal behavior, non-violent criminal behavior that jeopardizes the health or safety of other hotel or motel guests or staff (for example, the sale, distribution, or manufacturing of illegal substances or tampering with fire safety equipment), or repeated non-violent criminal behavior (for example, theft or disorderly conduct).
15. “Termination” means the Department’s action of ending a household’s authorization period.
16. “Verification” means third-party confirmation or documentation of facts stated by the household.

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d. Application and Interview

1. Households interested in applying for emergency housing assistance must:
 - i. submit a complete, signed application each time they request assistance; and
 - ii. complete an interview with a representative of the Department each time they request assistance.
2. The household, ~~or the household's authorized representative~~ may complete the application and interview either in person or by phone.

e. Verification

1. The household is the primary source of information to establish eligibility. It is the household's responsibility to furnish the necessary information completely and accurately and to give the Department permission to obtain the information from other sources.
2. Verification shall be required for the following items:
 - i. Identity;
 - ii. Income;
 - iii. Eligibility criteria in subsection (g)(1)(iii); and
 - iv. Housing search requirements pursuant to subsection (k).
3. Verification may be required for any other information, if questionable, that affects eligibility.
4. The household has the right to refuse to give the Department information, to refuse to submit required verification, or to refuse to allow the Department to contact others. However, refusing to provide information or access to the information necessary to establish eligibility will result in denial of the application.
5. Willful misrepresentation of the household's circumstances will result in a denial or termination of emergency housing assistance, and may result in legal action under fraud statutes.
6. Households may provide verification and supporting documentation by:
 - i. Dropping it off at a district office;

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- ii. Mailing it to the Department;
- iii. Uploading it using the Department's uploader; or
- iv. Allowing a Department representative to confirm the information with a phone call.

f. Action on Application

1. The Department will determine a household's eligibility for emergency housing assistance once a completed, signed application with the necessary verification is submitted and an interview has been completed.
2. If the household's application is approved, the Department will provide verbal notice, and if requested, written notice of the decision. The notice must include:
 - i. The type of emergency housing assistance provided: community-based shelter or housing in a hotel or motel;
 - ii. The authorization period for emergency housing in a hotel or motel;
 - iii. The check-in and check-out date at the hotel or motel, if applicable; and
 - iv. The date the household must reapply.
3. If the household's application is denied, the Department will provide written notice of the decision. The notice must include:
 - i. The specific reason for denial; and
 - ii. The household's appeal rights.
4. Written notice shall be given directly to the household if the household applied in a district office or emailed or mailed, via first-class mail, to the address provided by the household.

g. Eligibility

1. To be eligible for emergency housing assistance, households must:
 - i. attest to lack of a fixed, regular, and adequate nighttime residence;
 - ii. not have access to an alternative housing placement;
 - iii. have a member who:

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- A. is 65 years of age or older, as verified by any document that shows date of birth, if the member's age has not already been documented by the Department;
- B. has a disability that can be documented by:
 - 1. receipt of Supplemental Security Income or Social Security Disability Insurance; or
 - 2. a form developed by the Department as a means of documenting a qualifying disability or health condition that includes, at a minimum:
 - i. the applicant's name, date of birth, and the last four digits of the applicant's Social Security number or other identifying number;
 - ii. a description of the applicant's disability or health condition;
 - iii. a description of the risk posed to the applicant's health, safety, or welfare if temporary emergency housing is not authorized pursuant to this section; and
 - iv. written certification of a health care provider, as defined in 18 V.S.A. § 9481, that includes the provider's credentials, credential number, address, and phone number;
- C. is a child 19 years of age or under, as verified by any document that shows date of birth, if the child's age has not already been documented by the Department;
- D. is pregnant, as verified by a health care provider if the pregnancy has not already been documented by the Department;
- E. has experienced the death of a spouse, domestic partner, or minor child that caused the household to lose its housing, as verified by an obituary, death certificate, or any other documentation that shows date of death;
- F. has experienced a natural disaster, such as a flood, fire, or hurricane, as verified by a landlord, home insurance claim, Red Cross documentation, or any other documentation showing the household member lives in an area affected by a natural disaster;
- G. is under a court-ordered eviction or constructive eviction due to circumstances over which the household has no control, as verified by eviction paperwork, documentation from a landlord, or documentation from a housing inspector the Department of Health, or another authority for cases involving habitability; or
- H. is experiencing domestic violence, dating violence, sexual assault, stalking, human trafficking, hate violence, or other dangerous or life-threatening conditions that relate to violence against the individual or a household member that caused the household to

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lose its housing, as verified by a domestic violence agency, restraining orders, documentation from law enforcement, a court, and health care providers, Reach Up waiver of cooperation for child support, or a Reach Up domestic violence deferment;

iv. provide information to the Department about the household's efforts to secure an alternative housing placement pursuant to subsection (j) below;

v. contribute 30% of the household's gross monthly income toward the cost of emergency housing assistance in accordance with rule 2652.3; and

vi. have exhausted all available resources.

h. Type of Emergency Housing Assistance

1. Households eligible for emergency housing assistance are provided housing in a community-based shelter if adequate community-based shelter space is available within the district in which the household applies for assistance.

i. If a household needs a reasonable accommodation to stay at a community-based shelter and the shelter is unable to provide the accommodation, the Department shall provide the household housing in a hotel or motel.

2. If adequate community-based shelter space is not available within the district in which the household applies for assistance, the household shall be provided housing in a hotel or motel within the district, if available, until adequate community-based shelter space becomes available.

i. Authorization Periods

1. Authorization for emergency housing assistance in a hotel or motel shall be issued for periods up to 28 days.

2. The Department shall terminate a household's authorization for emergency housing assistance in a hotel or motel effective the date community-based shelter becomes available.

3. Households that do not check in to their emergency housing assistance placement (community-based shelter or hotel or motel) shall not be authorized for additional emergency housing assistance for 30 days from the check-in date.

i. If the household is prevented from checking in to their emergency housing assistance placement due to circumstances over which the household had no control, the Department shall authorize the household for emergency housing assistance at another community-based shelter or hotel or motel, if available.

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4. Households that are exited by a community-based shelter or hotel or motel for misconduct shall not be authorized for additional emergency housing assistance for 30 days from the date the household is exited.

j. Provisional Housing

1. If verification of eligibility criteria, including verification of housing search requirements, cannot be obtained on the day of application, assistance may be authorized for no more than four days on a conditional basis pending verification. No more than four days of conditional assistance may be authorized within the 30-day period following the date of application.

k. Housing Search Requirements

1. All households applying for and receiving emergency housing assistance must engage in their own search for an alternative housing placement.
- i. The Department and household shall work together to develop a schedule of activities addressing the household's need for emergency housing assistance. Completion of the activities is a requirement for continued receipt of assistance. These activities shall be documented in the household's case record.
- A. Activities shall include at least one of the following: completing the coordinated entry assessment, engaging with a state agency or state-contracted service provider to secure an alternative housing placement, addressing barriers to permanent housing (for example, obtaining identification documents, social security cards, or birth certificates for all household members), or applying for a permanent housing voucher.
2. If the Department determines that a household, at the time of application or during the term of the household's authorization, has not made efforts to secure an alternative housing placement, or has access to an alternative housing placement, the Department shall deny the application or terminate the authorization at the end of the current authorization period.
3. Households must provide verification to the Department at least monthly that they have made efforts to secure an alternative housing placement or the household's application for emergency housing assistance will be denied.
- i. Verification may be provided in the form of documentation of meetings with housing case managers, applications for housing, or documentation of other housing search activities.

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i. Housing Limits

1. The maximum number of days a household may receive emergency housing in a hotel or motel shall not exceed 80 cumulative days in a 12-month period.
2. The 12-month period is calculated from the first day of the authorization period to the same day of the month 12 months prior.
3. Emergency housing assistance provided from December 1 through March 31 shall be exempt from and shall not count toward the 80-day housing limit.
4. Emergency housing assistance received prior to July 1, 2024 does not count toward the 80-day housing limit.

m. Room Cap

1. The utilization of hotel or motel rooms for emergency housing assistance shall be capped at 1,100 rooms per night.
2. From December 1 through March 31, there will be no room cap.
3. The Department may house a household in more than one hotel or motel room depending on the household's size and composition.

n. Prioritization

1. The Department may prioritize providing emergency housing assistance to certain categories of households through application times and authorization periods.

o. Rights of People with Disabilities

1. As required by the Americans with Disabilities Act and the Vermont Fair Housing and Public Accommodations Act, reasonable accommodations and modifications will be made to policies, practices, or procedures when necessary, as determined by the Commissioner or their designee, to provide equal access to programs, services and activities, or when necessary to avoid discrimination on the basis of disability.
2. If an individual disagrees with the Commissioner's determination:
 - i. The individual may request a fair hearing in accordance with Human Services Board, Fair Hearing Rules (CVR 13 020 002); or

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- ii. The individual may file a complaint with the Agency of Human Services in accordance with the State of Vermont's ADA/ADAA Grievance Procedure Policy Number 10.2.

p. Authorized Representative

I. An authorized representative may act on behalf of the household to carry out specific activities related to establishing eligibility for emergency housing assistance including completing an application and providing verification. The authorized representative is, in such situations, considered the primary source of information, subject to the same rights, responsibilities and consequences for the household as a household acting directly for itself.

q. Appeal Rights

1. If a household disagrees with a Department decision, the household may request a fair hearing in accordance with Human Services Board, Fair Hearing Rules (CVR 13 020 002).
2. The Department shall follow All Programs Procedures P-2127, Fair Hearing Procedures, when a household requests a fair hearing.
3. Notwithstanding any provision of the Fair Hearing Rules to the contrary, the Department shall put an expedited recommendation of the Human Services Board hearing officer into effect in the same manner as an order of the Human Services Board.
4. Housing in a hotel or motel shall not be provided while a fair hearing is pending unless ordered by the hearing officer.

2652.3 Temporary Housing for Vulnerable Populations (05/15/2024, 23-26)

~~Temporary housing is intended to provide up to 28 days of shelter for vulnerable populations who are without housing and do not qualify for catastrophic temporary housing under rule 2652.2. Applicants shall qualify for temporary housing, if all other eligibility criteria are met, if the household has a member who is:~~

- A. ~~65 years of age or older;~~
- B. ~~in receipt of SSI or SSDI;~~
- C. ~~a child 19 years of age or younger; or~~
- D. ~~in the third trimester of pregnancy.~~

~~Applicants, without a member belonging to one of the above vulnerable populations, shall qualify for temporary housing, if all other eligibility criteria are met, if the household has a member belonging to a vulnerable population and has been assessed a total of 4 or more points according to the following point system:~~

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Vulnerable Population Category	Points
Disabled Veteran (as defined in 38 U.S.C. § 4211)	1
Individual with an open case receiving services from the Family Services Division	1
SSI or SSDI applicant with medical documentation of disability	1
Individual discharged from a 48 hours or more inpatient hospital stay, within the past 30 days, who has an ongoing medical need related to the hospitalization	2
Individual over 18 years of age discharged from the custody of the department for children and families within the past 3 years	1
Reach-Up recipient	1
Individual on probation or parole with the department of corrections who has been incarcerated for 12 consecutive months and released within the past 6 months	1

~~Applicant households shall be assigned points only once within any vulnerable population category.~~

~~Assistance shall not be authorized when appropriate shelter space is available. Available shelter space shall be deemed appropriate absent documentation that the shelter poses health or safety risks to a member of the applicant household.~~

~~Applicant households that have caused their own loss of housing within the past 6 months shall not be eligible for temporary housing. Examples of causing one's own loss of housing include, but are not limited to:~~

- ~~• Court-ordered eviction, subject to the limitation set forth in rule 2621(D);~~
- ~~• Voluntarily leaving one's housing, excluding constructive eviction as defined in rule 2622;~~
- ~~• Denial of further accommodations at a shelter, motel, or similar establishment, for not following the rules of the establishment.~~

~~Recipient households who are denied further accommodations at a motel, or similar establishment, for not following the rules of the establishment shall be ineligible for temporary housing for 30 days following the last date housing assistance was received.~~

~~If verification of eligibility criteria cannot be obtained on the day of application, assistance may be authorized for no more than four days on a conditional basis pending verification. No more than four days of conditional assistance may be authorized within the 30-day period following the date of~~

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application.

Authorization for temporary housing may be issued for periods up to 28 days, at the Department's discretion.

Temporary housing payments will be allowed for only 28 days in any consecutive 12-month period. The 12-month period is computed from the date of application to the same day of the month 12-months prior. The 28 days need not be consecutive.

The 84-day housing maximum under rule 2652.2 is cumulative for assistance received under rules 2652.2 and 2652.3. An applicant who has received 84 days in temporary housing during a 12-month period is not eligible for any further temporary housing assistance for the same 12-month period. Temporary housing for vulnerable populations is not an entitlement; payments shall cease upon expenditure of the annual appropriation for this purpose.

Eligibility workers shall explain to applicants that they are expected to take steps to avoid or resolve emergencies in the future without GA. Except for applicants who are receiving their final grant of assistance within a 12-month period, applicants and eligibility workers shall work together to develop a schedule of activities addressing the applicant's need for temporary housing. Completion of the activities is a requirement for continued receipt of assistance. These activities shall be documented in the applicant's case record.

2652.4 Required Contribution Toward the Cost of Temporary Emergency Housing

Temporary housing applicant hHouseholds with gross monthly household income equal to or less than the Reach Up basic need standard for a household of the same size shall not be required to contribute any income toward the cost of temporary emergency housing.

Temporary housing applicant hHouseholds with gross monthly household income greater than the Reach Up basic need standard for a household of the same size shall be required to contribute 30 percent of their gross household income toward the cost of temporary housing emergency housing.

The following table contains the basic need standards by household size:

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Household Size	1	2	3	4	5	6	7	8	9 or more
Basic Need	\$475 <u>644</u>	\$680 <u>942</u>	\$891 <u>1236</u>	\$1064 <u>1478</u>	\$1247 <u>1733</u>	\$1372 <u>1907</u>	\$1589 <u>2203</u>	\$1769 <u>2458</u>	Add \$170 236 for each additional person

See rule 2602 for the definition of “applicant household.”

The Department will apply the following method in calculating the 30 percent income contribution:

- An ~~applicant~~ household with income received on the date of application will be required to house themselves for the number of days, rounded down to the nearest whole number, equal to 30 percent of the gross household income received on that day divided by the least expensive average daily motel rate available in the district at that time. If a household is currently housed in a motel under rule 2652.2, the household will be required to house themselves for the number of days, rounded down to the nearest whole number, equal to 30 percent of the household income received on that day divided by the current daily rate at the motel in which they are staying.
- An ~~applicant~~ household with no income received on the date of application, but that will be receiving income within the next 14 days, will be required to house themselves starting on the day the income is received for the number of days, rounded down to the nearest whole number, equal to 30 percent of their gross income for that payment cycle divided by the ~~least expensive average daily motel rate available in the district at that time.~~ If a household is currently housed in a motel under rule 2652.2, the household will be required to house themselves for the number of days, rounded down to the nearest whole number, equal to 30 percent of the household income received on that day divided by the current daily rate at the motel in which they are staying.

If 30 percent of gross household income divided by the least expensive daily motel rate is less than 1, the household will not be required to contribute any income toward the cost of ~~temporary emergency~~ housing.

Moving Expense

2653 **Moving Expense**

District managers or their designees and town service officers shall authorize payment of reasonable costs of moving household furniture to a new location provided the need to move said furniture is the direct result of a catastrophic event. This includes moving costs in situations such as:

- A. furniture and possessions salvaged from a fire, flood, hurricane or other natural disaster which made the home uninhabitable;
- B. personal property when a family must vacate its present home due to the death of the family member who owned the dwelling;
- C. a move necessitated by a medical emergency, though this would be rare since we would not normally assist with a temporary move; condemnation of an area for the protection of the public health could be included in this category; and
- D. constructive evictions, as well as court-ordered evictions, including the possessions of a battered spouse when it is necessary to move furniture or possessions from the battering spouse's home.

All potential alternatives and resources will be explored and the least expensive resolution of the problem will be utilized. This exploration would include disaster relief; help from friends, relatives or the community; and expedited payment of other program benefits.

Room and Board

2654 Room and Board

A room and board allowance shall be authorized from one to seven days. For applicant households exempt from the employment requirements, allowances may be issued for up to 14 days as needed.

Room & Board Allowance:

\$60.00 per week per person (if paid to non-relatives)

\$40.00 per week per person (if paid to relatives)

For the definition of "relative" see rule 2603.

When an eligible recipient receives a room and board allowance, he/she shall also receive the following personal needs allowance based on the number of General Assistance recipients included in the allowance:

Personal Needs Allowance

<u>No. of GA Recipients</u>	<u>PNI Per Week</u>
1	\$2.00
2 or more	\$3.00 maximum

Heating Equipment

2655 Heating Equipment

Purchase of heating equipment shall be authorized by the district director when such equipment cannot be obtained otherwise (for example, from donations from individuals or community groups, temporary loan pending insurance settlement). Purchase shall be limited to the most serviceable and appropriate used item, if available, or new item (if a used item is not available) at the lowest cost.

Transportation

2656 **Transportation**

Authorization of transportation shall be limited to transients determined eligible who need help to continue to their destination. Payment for the lowest cost public transportation to the applicant's destination shall be authorized as paid, as follows:

- A. to any point within the state;
- B. after an attempt by the district director to obtain funding from the transient's state of residence and, if successful, to any point outside of the state to be authorized by district directors only.

Necessary automobile expense to enable the applicant to continue his journey maybe authorized as follows:

- A. gasoline and oil, as paid;
- B. tires, essential repairs, if the cost is lower in relation to the price of the lowest cost public transportation.

Fuel and Utilities

2657 Fuel and Utilities

Fuel and utilities are such things as water, electricity, oil, gas, coal, wood, kerosene, etc., which provide space heating, hot water, refrigeration, cooking fuel and light for the home. Sewage disposal provided as a utility service and billed on a regular basis shall be considered a utility. For purposes of the General Assistance Program, fuel and utilities are classified according to two customary methods of delivery:

- A. Metered Delivery (i.e., electricity, gas) provides service as needed and consumption is measured by an on-the-premises meter. The customer is billed at routine billing periods.
- B. Bulk Delivery (i.e., oil, bottled gas, kerosene, wood) provides a specific volume in advance of need and the customer is billed on delivery.

The amount of GA payment to applicants who are on a budget plan payment system for either metered or bulk delivery, shall equal the amount of the budget payment, even though the actual charge for service during that period is more than or less than the budget payment. A budget plan is an arrangement whereby a customer agrees in writing to pay a fixed amount for future consumption for a specified time period.

Payment for fuel and utilities may be authorized only when the conditions specified in the appropriate subsection are met.

Each recipient of GA emergency fuel or utility assistance shall be given the opportunity to have his name and address made available to the Weatherization Assistance Program as a potential recipient of a home energy audit and subsequent referral for weatherization service.

2657.1 Metered Delivery

Payment for the "current billing period" portion of a bill may be authorized only when:

- A. The billing period specified on the bill is the most current period for which a bill has been rendered by the company; and
- B. A "due date" specified on the bill has been reached (the date of receipt is considered the "due date" if no "due date" is specified); and
- C. The billing period is the standard billing period used by the company for all customers; and
- D. The bill is issued in the name of the applicant or the applicant's spouse or in the name of another

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individual living with the applicant; and

- E. The applicant meets regular General Assistance eligibility criteria or qualifies for exception under catastrophic situation criteria (rule 2620).

Companies usually bill customers for a billing period which corresponds to a monthly period or a bi-monthly period. In unusual circumstances it may be necessary to contact a company representative to ascertain the portion of a bill which is equivalent to the company's normal billing period.

In areas where quarter meters (25cm) are utilized it will be necessary to contact a company representative to determine anticipated consumption. Payment may be authorized in an amount necessary to continue quarter meter service for up to seven days.

A deposit may be paid provided a deposit is legally collectible under Public Service Board rules and the amount does not exceed two-twelfths of the reasonable estimated charge for service for the ensuing twelve months. The company must be advised that the deposit is to be credited and refunded to the department in accordance with the company's usual refund policy and that deposit refunds inadvertently made to the recipient will not constitute settlement of the refund obligation to the Department.

A reconnection charge may be paid provided service has been interrupted and the amount charged is the same for all customers.

A new account charge may be paid provided the company is authorized by Public Service Board rules to collect a new account charge. A new account is generally defined as a request for service for the first time, a name change on a meter or a new meter as a result of a change location.

Some companies are authorized under Public Service Board rules to collect "deferred charges", "purchased energy charges", "temporary charges" and similar charges. Some of these "charges" may appear as credits on the bill during the period such "charge" is incurred. Even though these charges may appear as credits (and are not technically due) they must be included in the GA payment if they were incurred during the period being approved.

Charges for either purchase or rental of equipment, appliances, space or water heaters, outdoor lighting, or installation, service, and repair charges shall not be paid by General Assistance except as authorized specifically in other sections of the manual.

Fuel and Utilities

2657.2 Bulk Delivery

Payment may be authorized only when:

- A. There is less than a 72 hour supply on hand; or less than 1 weeks supply when in the workers judgment authorization would eliminate extra delivery costs, conform with the regular delivery schedule for the area, or prevent fuel from running out on a weekend or holiday; or when the applicant's primary heating fuel is wood, less than 2 weeks supply on hand if in the workers judgment the applicant will not have means to replenish the supply before it is exhausted; or such other expansions of these limits as the Commissioner may order on a case by case, area by area, or individual fuel type basis in the event of local shortage or extended delivery period requirements; and
- B. The provider will not deliver unless payment for the delivery is received in full; and
- C. The amount to be authorized does not exceed a normal one-week supply or the minimum amount the provider will deliver; and
- D. Delivery is made in the name of the applicant or applicant's spouse, or in the name of another individual living with the applicant; and
- E. The applicant meets regular General Assistance eligibility criteria or qualifies for exception under catastrophic situation criteria (rule 2620).

Payment shall not be authorized for charges for: previous deliveries; deposits for any item or reason; a new account charge; purchase or rental of storage tanks or containers, space or water heaters, furnaces, equipment or appliance, or installation, service, cleaning and repair charges except as specifically authorized under other sections of this manual.

Except in unusual circumstances, the volume and amount charged, and delivery time and date, must be established through the provider in advance of the transaction. Charges for off-hour or off-schedule delivery are allowable only when permitted under Vermont law and applicable PSB regulations and the amount charged is the same for all customers. Every effort should be made to avoid these charges whenever possible.

Medical Care

2660 **Medical Care**

The types of medical care covered for applicants meeting the eligibility criteria in rules 2620, 2621, and 2623 for eligibility due to a catastrophic situation and the general eligibility criteria in rules 2604 and 2605 are limited to:

- physician services (as further limited in rule 2661),
- dental services, (as further limited in rule 2662),
- vision services and items (as further limited in rule 2663),
- prescription drugs (as specified in rule 2664),
- medical supplies (as defined and further limited in rule 2665),
- durable medical equipment (as defined and further limited in rule 2666), and
- ambulance transportation (as further limited in rule 2667).

Other types of medical care (e.g., hospital services, other transportation, visiting nurses) and payment of premiums for private or government-sponsored health insurance are not covered. For purposes of GA rules, premium is defined as it is defined in Vermont Medicaid rules. Premium means a nonrefundable charge that must be paid by an applicant or beneficiary as a condition of initial and ongoing enrollment for health insurance. Routine examinations and treatment are not covered by GA because they do not address emergency medical needs.

For applicants who are beneficiaries under Medicaid, VHAP or another government-sponsored health care coverage program, the prior authorization requirements for that program, if any, apply equally to coverage for medical care under GA. GA payment is limited to providers enrolled in the Medicaid program.

The department shall pay for medical care with GA only if application is made within the following time frames:

- before receipt of the care,
- up to 30 days after the original billing date for care received, or
- within 30 days from the notice date on denial of eligibility by Medicaid, VHAP, or other government-sponsored health care coverage for reasons other than those specified in rule

Medical Care

- 2620(D).

When application is made within 30 days from the notice date on denial of eligibility by Medicaid, VHAP, or other government-sponsored health care coverage for reasons other than those specified in rule 2620 (D), the application date for health care coverage shall be considered the application date for GA, and the GA application shall cover the full period during which the application for health care coverage was pending.

The department shall determine the applicants eligibility for GA payment of medical care based on the applicants circumstances on the date of application, not on the date the care is received.

Requests for payment from providers of medical care shall not be considered applications for GA.

2660.1 Payment for Medical Care

Eligibility workers shall issue vendor authorizations to eligible applicants. Vendor authorizations issued by the department must accompany provider bills for medical services other than prescription drugs. No GA payments shall be made, however, unless the requirements set forth in rules 2660-2667 are also met.

Payment to providers may not exceed the amount set forth in the fee schedule used in the Vermont Medicaid Program. Vermont law (33 V. S. A. §6501-6508) prohibits balance billing, which is charging or collecting from the recipient any amount in excess of the reasonable charge for the service, defined as the amount in the fee schedule.

Physician Services

2661 **Physician Services**

The following physician services are not covered by GA:

- cosmetic surgery,
- experimental surgery,
- sterilization,
- fertility services,
- acupuncture, and
- massage therapy.

Dental Services

2662 **Dental Services**

Covered dental services to relieve pain, bleeding, and infection are limited to:

- examinations;
- diagnostic radiographs of the symptomatic area;
- sedative fillings;
- therapeutic pulpotomy;
- extraction of infected and symptomatic teeth;
- incision and drainage of abscess; and
- minor procedures for the emergency palliative treatment of dental pain.

No payment shall be made for replacement of missing teeth or dentures.

Vision Services and Items

2663 **Vision Services and Items**

Eyeglass frames or lenses meeting an emergency medical need are covered only if purchased through the department's authorized supplier.

Prescription Drugs

2664 Prescription Drugs

To receive GA payment for prescription drugs, including over-the-counter drugs prescribed by a physician, providers are required to comply with the requirements of the departments pharmacy best practices and cost control program, as implemented through its pharmacy benefit manager. The program, designed to reduce the cost of providing prescription drugs while maintaining high quality in prescription drug therapies, includes a preferred list of covered prescription drugs identifying preferred choices within therapeutic classes for particular diseases and conditions and utilization review procedures.

No payment shall be made for drugs in drug classifications not covered by GA. Such drug classifications are not covered because none of the drugs in those classifications is ever appropriately prescribed to address an emergency medical need (rule 2623), in the departments judgment. GA payment shall be made for drugs in classifications other than those on the not-covered list, as long as they comply with the requirements of the pharmacy best practices and cost control program. These payments shall be made even if the likelihood of an emergency is small or the drug has not been prescribed to address an emergency need.

The department's list of drug classifications not covered by GA will be made available at the website for the Office of Vermont Health Access or in paper form upon request.

Payment shall not be authorized for items to be used in a hospital or nursing home.

Medical Supplies

2665 **Medical Supplies**

Medical supplies are nondurable items customarily used in conjunction with the care or treatment of a specific illness, injury, or disability.

Durable Medical Equipment

2666 Durable Medical Equipment

Durable medical equipment is equipment that arrests, alleviates, or retards a medical condition and is:

- used primarily and customarily to serve a medical purpose;
- able to withstand repeated use;
- generally not useful to a person in the absence of an illness, injury, or disability; and
- suitable for use in the home and in the community.

The following durable medical equipment is not covered by GA because it does not address emergency medical needs:

- air cleaners
- dehumidifiers
- patient lifts
- exercise equipment
- message devices
- speech teaching machines

The following durable items are not covered by GA to address an emergency medical need because they do not meet the definition of durable medical equipment:

- air conditioners
- heating plants
- elevators
- saunas
- bathroom scales

Durable Medical Equipment

- car seats not designed specifically for medical purposes
- equipment prescribed for education or vocational purposes
- toys
- whirlpool pumps

Ambulance Services

2667 **Ambulance Services**

Ambulance services that meet the definition of a medical emergency need may be covered. Transportation of a hospital inpatient to another facility for outpatient services is never a covered ambulance service because it is not an emergency medical need.

Burial Responsibility

2670 **Burial Responsibility**

When a person dies without sufficient known assets to pay for burial, a state institution, a town of domicile, or the department may be responsible for paying burial expenses.

A. **Burials Paid by the Department**

The department is responsible for paying the burial expenses of a person when the person:

1. died in Vermont or was a Vermont resident at the time of death regardless of the place of death,
2. died without sufficient known assets to pay for burial, and meets one of the following criteria:
 - a. was an honorably discharged veteran of any branch of the U. S. military forces;
 - b. was a recipient of assistance under one or more of the following programs:
 - Titles IV or XVI of the Social Security Act,
 - nursing home care under Title XIX of the Social Security Act,
 - state aid to the aged, blind or disabled; or
 - c. was a person who did not die in a state institution (B below).

All payments made by the department for burial expenses are subject to the limitations specified in rule 2674 and 2676.

B. **Burials Paid by State Institutions**

The state institution is responsible for the burial of a person who is without sufficient known assets to pay for burial and dies while an inmate of the state institution.

C. **Burials Paid by Town of Domicile**

The town is responsible for the burial of persons who die in their town of domicile, are without sufficient known assets, and do not qualify for burial paid by the department (see A 3 above). The department shall reimburse a town up to \$250.00 for burial expenses incurred.

Burial Arrangements

2671 Burial Arrangements

For purposes of rules 2670 through 2677, “burial” means the final disposition of human remains, including, interring or cremating a decedent and the ceremonies directly related to that cremation or interment at the gravesite. “Funeral” means the ceremonies prior to burial by interment, cremation, or other method.

The department shall make the decision on eligibility and level of payment; and shall be responsible for making the burial arrangements in situations where no relative, friend, or interested person is available. Unless the decedent or the decedent’s family has expressly requested an alternative arrangement, the decedent’s body shall be cremated. It is not the policy of the department to make bodies available for the advancement of anatomical science in those instances when no family or friends are known. Autopsies are performed only under regulations of the State pathologist, who pays related expenses.

Application for Burial

2672 **Application for Burial**

The department will cooperate with the funeral director, other agencies and persons to obtain information to determine in a specific instance whether or not the department will be responsible for all or part of the payment of burial expenses.

Burial Eligibility

2673 Burial Eligibility

Eligibility for department financial participation in burial expenses shall be approved when all of the following requirements are met:

- A. The Department for Children and Families is responsible under the provision of 33 VSA § 2301;
and
- B. Available resources of the deceased and the surviving spouse (rule 2675) are less than the maximum payment for burial expenses.

Payment of burial expenses shall not be issued until a full accounting of burial expenses and resources has been completed and the department has determined that the burial fulfills the provisions at rule 2676, Payment for Burial, and payments made will not exceed the maximum prescribed in procedures section P-2690.

Maximum Payment for Burial Expenses

2674 **Maximum Payment for Burial Expenses**

The department will pay no more than the maximum specified in Procedures at P-2690 for burial expenses for an eligible individual. If available resources of the deceased and the surviving spouse (rule 2675) equal or exceed the maximum payment, the department will not pay any burial expenses. This provision does not preclude the funeral director from accepting contributions from other individuals toward burial and funeral expenses.

Any change in the dollar amount specified in Procedures P-2690 for the Maximum Payment for Burial Expenses that represents an increase relative to the dollar amount that immediately precedes the change shall be carried out via a procedures change. Any change in the dollar amount specified in Procedures P-2690 for the Maximum Payment for Burial Expenses that represents a decrease relative to the dollar amount that immediately precedes the change shall be accomplished only by following the Administrative Procedures Act process for regulatory changes.

Resources, Burial

2675 **Resources, Burial**

Payment will be denied if the available resources of the deceased and surviving spouse equal or exceed the maximum payment for burial expenses. "Available resources" are "total resources" less a \$255 disregard.

The department representative will explore the existence and availability of all resources. Since many death benefits are negotiable by a surviving spouse or other individual, it is essential that a clear understanding exists that such benefits shall be deducted from the allowable expenses in accordance with the provisions for payment.

Liquid or available resources include, but are not limited to, the following: stocks, bonds, cash on hand or in a bank or other financial institution, lump sum death benefits, proceeds of life insurance policies, and employee death benefits. Such resources are available to pay burial expenses and must be treated in accordance with the section on provisions for payment. Available resources shall not include contributions that family, other than the deceased's spouse, or friends provide to the funeral director.

When the deceased individually owns real or personal property (other than the above), the value of which exceeds the total cost of burial, the request for burial payment shall be denied if there was no surviving spouse or dependent children residing with the deceased at the time of his or her death. If the value of such real or personal property does not exceed the total cost of burial, it shall be disregarded.

Payment for Burial

2676 **Payment for Burial**

Contributions from friends or relatives may be used to pay burial expenses not paid by the department, the deceased, or the surviving spouse.

Available resources of the deceased and surviving spouse shall be applied against those expenses for which the department would be responsible for the purpose of reducing the maximum payment for burial expenses. If the surviving spouse contributes all or some of the \$255 in excluded resources to burial expenses, the contribution shall not be applied against those expenses for which the department would be responsible.

Towns and funeral directors requesting reimbursement for burial expenses under Vermont law must do so on the appropriate departmental billing form. Reimbursement to a town is made on an "as paid" basis up to a maximum of \$250.00 for total burial expenses.

Payment Process, Burial

2677 **Payment Process, Burial**

Payment shall be authorized only when an itemized accounting of specific burial expenses that are to be provided at public expense is received at State Office on the appropriate billing form that includes the signatures of the funeral director and the party making the funeral arrangements.

Town Service Officer (TSO)

2680 Town Service Officer (TSO)

"On or before April 15 of each year the selection shall appoint a town service officer and notify the commissioner of their appointment. A town service officer may be appointed to serve more than one town. A selectman may be a town service officer. The commissioner shall give him a certificate of appointment and contract for his compensation. If the selectmen fail to appoint a town service officer any selectman may act in his behalf" (VSA § 3002.)

TSO Duties

2681 **TSO Duties**

The duties of town service officers are to receive applications for emergency General Assistance when the district welfare office is closed or when an immediate visit to the district office is impossible for the applicant. The town service officer may perform other duties under the welfare code as the commissioner may direct. The town service officers work under the direction of the District Director who will provide necessary training, forms, procedure material, and approval of compensation.

TSO Decisions

2682 TSO Decisions

Town service officers shall determine the eligibility of applicants by determining the applicant's available income and resources and establishing the applicant's need.

The applicant must furnish necessary information to determine eligibility and supply, or permit, appropriate verification. Applicants who have available income and/or resources equal to the amount of the emergency need are not eligible for payment.

An applicant does not have available income and/or resources may be granted payment for food, housing, fuel and utilities, emergency medical care, and other items, according to the limits set forth in the following subsections.

Town Service Officers are authorized to issue payments for up to 4 days. If the applicant will have needs beyond 4 days, the applicant should be advised to visit the district office. If it is impossible for such applicant to visit the district office within 4 days, the town service officer should contact the District Director so that satisfactory arrangements may be completed.

Town Service Officers may provide assistance only on a vendor authorization form (form 292). Town Service Officers will not be reimbursed for cash given to applicants.

2682.1 Groceries or Meals, TSO

If the applicant does not have available income and resources, and has a need for groceries, payment may be issued on a vendor authorization form (form 292) for the number of days until the district office is open, in the following amounts (payment for groceries may not be issued for more than 4 days):

Groceries

Groceries Allowance

No. of Days	1	2	3	4	5	6	7	8	9	10	For each add'l person
1	3.00	5.00	6.00	7.00	7.00	8.00	9.00	10.00	10.00	10.00	1.00
2	3.00	5.00	7.00	8.00	10.00	11.00	13.00	15.00	16.00	18.00	2.00
3	4.50	7.50	10.50	12.00	15.00	16.50	19.50	22.50	24.00	27.00	3.00
4	6.00	10.00	14.00	16.00	20.00	22.00	26.00	30.00	32.00	36.00	4.00

TSO Decisions

2682.2 Housing, TSO

The town service officer shall not issue payment for housing if the applicant has housing accommodations which can be maintained until the district office is open, even if payment for such an accommodation is due.

If, however, the applicant does not have available income and resources, and is actually without a housing accommodation, payment may be authorized on a vendor authorization form (form 292) in an amount necessary to secure housing until the district office is open. Payment shall not be issued for housing for more than 4 days.

2682.3 Fuel and Utilities, TSO

The town service officer shall not issue payment for fuel or utilities if the applicant has a sufficient supply to last until the district office is open.

Payment may be issued if the applicant does not have available income and resources or credit, and:

- is without fuel or utilities,
- does not have sufficient supply on hand to last until the district office is open,
- has or will have metered service disconnected while the district office is closed.

The amount to be issued should be sufficient to last until applicant can visit the district office, or the minimum necessary to maintain continued metered service. Payment shall not be authorized if the provider will extend credit to the applicant.

Payment may be authorized on a vendor authorization form (form 292) in the necessary amount.

2682.4 Emergency Medical Care, TSO

If the applicant does not have available income and resources or credit, payment may be issued for emergency medical care or for a prescription which must be filled immediately.

Payment may be made on a vendor authorization form (form 292) in the amount necessary. If the amount cannot be determined, write "According to Medicaid Fee Schedule" on Vendor authorization form (form 292).

TSO Decisions

2682.5 Other Items, TSO

From time to time, applicants may request other items such as transient transportation, etc. "Other items" may be approved only if, in the judgement of the town service officer, such item needed is required immediately and a decision must be made before the district office will be open. If a town service officer approves "other items", payment should be made at the lowest available cost on a vendor authorization form (form 292), and a notation made on the issuance report (form 291G) specifying the reason(s) for the decision.

TSO Compensation

2683 **TSO Compensation**

A. Time

Town Service Officers will be compensated for time and personal expenses as contracted with the Commissioner under authorization of 33 VSA § 3002.2

General Assistance

2600 General Assistance

General Assistance (GA) is an emergency financial assistance program for eligible applicant households whose emergency needs, according to department standards, cannot be met under any other assistance program administered by the department and cannot be relieved without the department's intervention. Receipt of 3SquaresVT, however, shall not be a factor in determination of emergency need since this is a diet supplement program and may not be considered in determining eligibility for or level of benefits in any other assistance program.

A household may qualify for GA in two ways, by meeting either the non-catastrophic or the catastrophic rules. All households must meet the citizenship and residence criteria in rule 2604 and furnish required information as specified in rule 2605.

Households with emergency needs not caused by a catastrophic situation must include a minor dependent or meet other criteria of age or ability to work (rule 2610) to be determined eligible, and must have income below the applicable income test (rule 2610 B). Households in which all members receive Reach Up, a Postsecondary Education Program (PSE) stipend, SSI/AABD, or a combination of these program benefits are ineligible for non-catastrophic GA because they are considered to be over income for this program.

Households with emergency needs caused by a catastrophic situation must meet the eligibility criteria in rule 2620. Emergency medical needs are considered catastrophic. All households applying for GA for an emergency medical need must meet the catastrophic GA criteria at rule 2620 to have the emergency medical need covered by GA.

General Assistance, a program to meet emergency needs, has no provision for ongoing assistance. Subsequent requests will be treated as new applications.

Application

2601 Application

To have their eligibility for GA considered, all applicants (rule 2603) or their authorized representatives must:

- a. submit a complete, signed application each time they request assistance; and
- b. have a face-to-face interview with an ESD representative, unless waived by the district manager.

Action on applications shall be taken upon receipt and review of a signed application. The action shall be considered complete when:

- a. A decision on the application has been made.
- b. Written notice of such decision has been made available to the applicant. A written grant notice is not required but will be provided upon request. A written denial notice is required if the entire application or any part of it is denied.

Oral notice of assistance granted shall include the following specific information:

- a. Items and amount authorized.
- b. Effective dates of authorization.
- c. Method of payment.

Written notice of assistance denied shall include the specific reason for denial.

Failure to complete action on an application promptly shall not constitute the sole reason for denial of assistance unless it can be established and documented in the case record that such failure is the result of noncooperation on the part of the applicant.

2601.1 Methods of Investigation

The applicant is the primary source of information about his need and eligibility for aid or benefits. Information furnished on the signed application and through interviews may be subject to verification, through documentary or collateral sources.

Application

Reliance on the applicant as the primary source of information to establish eligibility recognizes the right to privacy, but also places responsibility on the applicant to furnish necessary information completely and accurately or, when needed, to give consent to obtain such information elsewhere. Department responsibility to assist an applicant to establish eligibility requires careful explanation and interpretation of program eligibility criteria and information needed to assess the applicant's circumstances against such eligibility criteria.

An applicant has a right to refuse to give information, to submit required proof, or to give consent to a collateral contact. Such refusal of information or action necessary to establish eligibility will result in denial or closure of aid or benefits. Willful misrepresentation of applicant circumstances will also result in legal action under fraud statutes. Department staff shall make every effort to assure full applicant understanding of the consequences of refusal to take necessary action to establish eligibility or misrepresentation of individual circumstances.

An individual may apply for aid or benefits through another person; for example: an authorized representative; a person acting responsibly for an incompetent or incapacitated individual. The individual acting for the applicant is, in such situations, considered the primary source of information, subject to the same rights, responsibilities and consequences for the applicant as an applicant acting directly for himself.

2601.2 Interviews

Face to face interviews are required for General Assistance applications. Such interviews may be conducted in the applicant's home or another mutually convenient location when individual circumstances of health, or unusual transportation problems preclude office interviews.

Personal interviews are conducted privately with the applicant, who may have one representative of his choice to assist in oral presentation of his needs.

2601.3 Verification

Verification, defined as a written entry in the case record of third party or documentary confirmation of facts stated by an applicant, shall be required for the following:

- a. All income (including deductions), resources, and shelter expense.
- b. Positive means of personal identification (e.g., Social Security card, driver's license, birth certificate, marriage certificate).

Application

- c. Whenever necessary to obtain complete, clear, and consistent information with regard to any other eligibility factor.

Written verification statements shall include sufficient detail to enable independent reviewer evaluation of the reasonableness of the resulting eligibility decision, including but not limited to a description of method used, dates, sources, summary of information obtained, and any computations required.

Refusal to submit necessary verification or to consent to verification of any eligibility factor or to cooperate in investigation necessary to support an affirmative decision of eligibility shall result in denial of the application.

2601.4 Collateral Sources

Contact with sources other than the applicant concerning his eligibility for aid or benefits is limited to interviews, telephone calls, or correspondence necessary to obtain information required to make a decision on eligibility when the applicant is unable to furnish the necessary information. Information requested from collateral sources is limited to the specific eligibility factors in question.

Common collateral sources are relatives, town officials, town service officers, public records, doctors, and medical facilities. Other agencies that have worked with the applicant are generally the best source of collateral information.

No collateral contact is made without the applicant's knowledge and consent, based on his clear understanding of the need for and purpose of each contact. Department policies regarding confidentiality will be respected.

An applicant may on occasion be reluctant to consent to contact with collateral sources. If, with full understanding of the possible alternative of denial, the applicant refuses to permit a necessary contact, the application shall be denied.

Applicant Household

2602 Applicant Household

A GA household shall consist of an individual applying for GA and all dependents living with the applicant in Vermont for whom the applicant is legally responsible, i.e., spouse, civil union partner, and dependent children under the age of 18. The following individuals must be considered members of the applicant household when they live together:

- dependent children under the age of 18;
- their siblings, half-siblings, and step-siblings under the age of 18;
- their parents, step-parents, or other legally responsible relatives.

The members of the GA household shall have their needs, income, and resources considered together to determine eligibility.

Individuals age 18 or over who live with their parents are considered a separate family and must complete a separate application.

Definitions

2603 **Definitions**

The following definitions apply to the terms used in the GA rules.

- a. “Able-bodied” means no physical or mental impairment exists that prevents the person from working. A person shall not be considered able-bodied if currently unable to work in any type of employment due to physical or emotional problems that have lasted or presumably will last at least 30 days. This eligibility factor must be verified by a signed statement from a physician or licensed practitioner whose services would be covered under Medicaid were the GA applicant a Medicaid recipient. The department shall pay the reasonable expense of required medical examinations and may require and pay for a second opinion.

Individuals whose SSI/AABD eligibility has been terminated because of the SSI/AABD 36-month time limit related to drug or alcohol disability shall be considered able-bodied with respect to their drug or alcohol impairment.

- b. “Applicants” means individuals applying for GA for their own needs and for the needs of those dependents with whom they live in Vermont and for whom they are legally responsible.

For married individuals or parties to a civil union who live together, the term applicant refers to both spouses or civil union partners. Either spouse or partner may complete the application.

For unmarried adults who live together and have a child-in-common, the term applicant refers to both adults. Either adult may complete the application.

Applicants must be age 18 or older, unless emancipated (see emancipated minor below).

- c. “Available resources” means cash on hand or in a bank or other financial institution, including Christmas clubs and U. S. savings bonds or other negotiable instruments that can be converted into cash on demand within 24 hours when responding to an immediate emergency need for the first time. The applicant shall be advised to take steps to access other resources such as cash value of life insurance, sale of stock, bonds, or mutual funds, cashing of an IRA or other reasonably accessible resource to meet future needs. Future GA applications will be evaluated in relation to whether the applicant has taken reasonable steps to access these resources. If not, the application will be denied because no effort was made to access resources that could have been currently available to meet the emergency need.
- d. “Calculation of time periods” shall include the date of application. When determining income for the last 30 days, however, the 30-day period ending on the day prior to the date of application is used.

Definitions

- e. "Dependent" means any of the following members of the applicant's immediate family: husband, wife, civil union partner, and children under age 18, unless they are emancipated minors, including biological, adopted, and stepchildren. A pregnant woman having no children in her household shall not be considered to have a minor dependent.
- f. "Emancipated minor" means a minor emancipated by judicial decree under the laws of any state. A minor is also considered emancipated if married or in active military service.
- g. "Gainful employment" means individuals:
- work at least 35 hours per week at no less than the applicable minimum hourly wage;
 - have gross weekly income that, when divided by 35, equals or exceeds the applicable minimum hourly wage, regardless of the actual number of hours worked; or
 - if self-employed, work at least 35 hours per week and the balance of income remaining after deducting allowable self-employment deductions equals or exceeds the minimum wage. An individual shall be considered self-employed if the Internal Revenue Service requirements for classification as self-employed are met.
- h. "Minimum wage" means the state or federal minimum wage, whichever is the higher.
- i. "Relative" means one of the following individuals:
- Any blood relative, including those of half-blood, and including first cousins, nephews, nieces and preceding generations, as denoted by the prefixes grand-, great-, and great-great;
 - Stepparent, stepbrother, stepsister;
 - Any adoptive relative of corresponding degree, upon whom Vermont law (15A V. S. A. § 1-104) confers the same rights, duties, and obligations as natural relatives;
 - Any spouse or civil union partner of an individual included in the above groups, even if the marriage or civil union has been terminated by death, divorce, or dissolution.
- j. "Suitable employment" means that:
- The wages (monetary and in-kind) are equal to or exceed the minimum wage. The value of in-kind income shall be established by the employer.
 - The individual is physically and mentally fit to perform the employment offered.
 - The work offered is not at a site subject to a strike or a lockout at the time of the offer.

Definitions

The eligibility worker shall establish when medical documentation is required to determine suitability of employment. The department shall pay the reasonable charge for medical examination and report.

- k. "Transient" means an individual who does not intend to establish a permanent residence in Vermont.

Citizenship and Residence

2604 Citizenship and Residence

To be eligible for GA, an applicant must be a U. S. citizen or a legal alien.

When a town service officer or district director has reason to believe that an applicant came into Vermont for the purpose of receiving GA or, in the case of applications for payment of medical services, receiving medical care, the town service officer or district director may find the applicant ineligible. (33 V. S. A. §2107) Such applicants, however, may be granted GA for transportation to the place they were living before coming to Vermont. (33 V. S. A. §2107)

Applicant's Responsibility

2605 Applicant's Responsibility

Applicants are the primary source of information about their circumstances. Respect for their rights to privacy place responsibility on applicants to furnish complete and accurate information.

Pursuant to 33 VSA Section 2104 and 2105, all GA applications require investigation and recording of the circumstances of the person alleged to need GA to determine eligibility. Applicants must furnish information required as to physical condition, earnings or other income, ability of all members of their families to be employed, the cause of the person's condition, the ability and willingness of persons legally liable for their support to assist and other relevant data.

The Department retains the right to verify any or all information provided by applicants. To be eligible for consideration for assistance, applicants must agree to the requisite investigation of their circumstances.

District Director's Responsibility

2606 District Director's Responsibility

District Directors shall furnish necessary assistance, according to Department standards and regulations to meet immediate maintenance need (food, clothing, shelter, etc.) as it arises. Eligibility for such aid under any other Department program is explored prior to authorizing use of General Assistance funds.

District Directors shall assure exploration of the applicant's eligibility for medical or other assistance through a legally responsible relative or Department categorical program prior to issuing GA funds.

Services to help individuals with emergency admission to state institutions (other than penal) shall be handled by the District Director in the absence of the Town Service Officer, but only when no family member or other interested person is available to take this responsibility. Payment of necessary expenses is discretionary with District Directors according to Department policy.

Arrangements for burial, in the absence of the Town Service Officer and when no family member or other interested person is available to take this responsibility shall be handled by District Directors. Authorization to grant permission to bill the Department for burial expenses of a recipient of AABD, Reach Up or Medicaid (nursing home cases only), other needy individuals, or a committed child, shall be vested in the District Directors.

District Directors shall take positive action under the applicable paragraph of rule 2610 C to recover GA funds.

District Directors may delegate authority to subordinate staff members to carry out the functions of the GA program.

Non-Catastrophic Eligibility

2610 Non-Catastrophic Eligibility

Applicant households in which all members receive Reach Up, a Postsecondary Education Program (PSE) stipend, SSI/AABD, or a combination of these program benefits, do not qualify for GA in non-catastrophic situations. All other households applying for emergency needs that are not attributable to a catastrophic situation may qualify for GA to address that need, provided they meet one of the two criteria of subsection A, all of the criteria of subsection B, the citizenship and residence criteria in rule 2604, and the applicant's responsibility criteria in 2605.

- a. The household applying for non-catastrophic GA must meet either criterion 1 or 2.
 1. The household must include a dependent child under the age of 18 (rule 2603).
 2. The applicant and the applicant's spouse or civil union partner, if living in the home, must each meet one of the following four criteria:
 - i. is age 65 or older;
 - ii. is younger than 65 and not able-bodied (rule 2603);
 - iii. is younger than 65, able-bodied, and the spouse or civil union partner of an SSI/AABD recipient or an SSI/AABD applicant who meets criterion a or b above; or
 - iv. is younger than 65, able-bodied, and has two or more of the following employment barriers:

Employment Barriers

- i. Age 55 or over. Eligibility based on this barrier shall be contingent upon enrollment and active participation in employment-related activities under the Older Americans Act, or similar programs, as available.
- ii. Unable to read or write or has no more than an eighth-grade education. Eligibility based on this barrier shall be contingent upon enrollment and active participation in an Adult Basic Education or other approved/recognized educational program, as available. Eighth-grade education means completion of eighth grade, but not completion of ninth grade.
- iii. Employed or self-employed fewer than six months in the last five years and a full-time student fewer than six months in the last five years.
- iv. Released from a mental health institution or mental health hospital unit within the last six months.

Non-Catastrophic Eligibility

- v. Participating in a state or federally funded drug or alcohol treatment program. Participating means following an established treatment plan measured by the individual making progress toward the treatment goals as established by the treatment provider. Eligibility under this barrier shall be limited to 36 cumulative months, beginning on the day eligibility is based on this barrier. An individual whose SSI/AABD eligibility has terminated because of the SSI/AABD 36-month time limit related to drug or alcohol disability cannot base eligibility on this barrier. If the individual's SSI/AABD terminated prior to the 36-month time limit, the barrier may apply up to 36 months including of the period of SSI/AABD receipt.

- b. The household applying for non-catastrophic GA must meet all of the following six criteria:
 - 1. During the 30-day period immediately prior to application, the applicant household has received net income, computed according to rule 2640, less than the applicable income limit. The applicable income limits are as follows:
 - i. For a household with members participating in the Reach Up Program, the income limit is the Reach Up payment standard used to determine the amount of the family's Reach Up financial assistance grant.
 - ii. For a household with a parent participating in the PSE program and receiving a PSE living expense stipend, the income limit is the Reach Up payment standard used to determine the amount of the family's PSE stipend.
 - iii. For a household with a parent participating in the Postsecondary Education Program (PSE) but not receiving a PSE living expense stipend, the income limit is the Reach Up payment standard used to determine a stipend payment for a family of the same size with the same housing costs.
 - iv. For a household with no members participating in either Reach Up or PSE, the income limit is the Reach Up payment standard for a family of the same size with the same housing costs.

The Reach Up payment standard is the need standard ratably reduced before consideration of any income (rule 2252).

Non-Catastrophic Eligibility

2. No household members are sanctioned under the Reach Up program because of their refusal to comply with a program eligibility or participation requirement. The disqualification period for GA will be the same as the Reach Up sanction period.
 3. The household is actively pursuing all sources of potential income appropriate to their situation, such as, but not limited to, Reach Up, SSI, AABD, Medicaid, 3SquaresVT, fuel assistance, unemployment or worker's compensation, veterans benefits, insurance payments, railroad retirement, pensions, social security, wages, and child support. Pursuit of potential income means initiating an application, request or complaint as appropriate prior to a subsequent GA grant, cooperating with requirements for a timely decision, and continuing to cooperate in meeting requirements to maintain such income on an ongoing basis thereafter.
 4. There is an emergency need. If the emergency need is a need for medical services or items, the department shall determine eligibility according to the rules for catastrophic situations at rule 2620, even if the applicant meets the non-catastrophic income test at rule 2600.
 5. The household has exhausted all available income and resources except that:
 - i. Applicants who have available resources (rule 2603) less than their need shall have the amount of the resources deducted from the GA grant.
 - ii. Single individuals age 62 or over, or in receipt of SSI/AABD or social security based on blindness or disability, may have up to \$1,500 of available resources disregarded. Up to \$2,250 of the households available resources may be disregarded if the individual lives with a spouse or civil union partner. With the exception of special resource treatment related to burial expenses (rule 2670-2677), only resources in excess of these amounts will be counted as available in determining eligibility or benefits for such persons.
 - iii. Resources set aside in an escrow account for the purpose of paying property taxes or homeowner's insurance shall be disregarded up to the amount of these projected expenses.
 6. The household has complied with the employment requirements in rule 2631, if applicable.
- c. General Assistance shall be furnished with the understanding that when a recipient subsequently acquires benefits or resources in any amount from an inheritance; cash prize; sale of property; retroactive lump sum social security, veterans, or railroad retirement benefits; or court awards or settlements; the recipient shall be required to make reimbursement for the amount of aid furnished during the previous two years.

Non-Catastrophic Eligibility

SSI/AABD Applicants

The GA applicant or GA household member who has a pending SSI/AABD application, or who is being referred by the department to the Social Security Administration (SSA) to apply for SSI/AABD, must sign a Recovery of General Assistance Agreement authorizing SSA to send the initial SSI/AABD payment to this department so the amount of GA received can be deducted. Regardless of the amount of the initial SSI/AABD payment, the deduction shall be made for GA issued during the period from the first day of eligibility for SSI/AABD, or the day the Recovery of General Assistance Agreement is signed, if later, to the date the initial SSI/AABD payment is received by the department.

When the SSI/AABD grant does not include all members of the GA household, the deduction shall be for a prorated portion of GA granted, to reflect only those included in the SSI/AABD grant.

The department shall send any remainder due to the SSI/AABD recipient within 10 days. An exception to this provision applies to individuals whose SSI/AABD is based on drug addiction or alcoholism. After SSI/AABD is granted and SSA has reimbursed Vermont for GA received, SSA will pay the remainder of the initial SSI/AABD payment to the recipients representative payee.

Catastrophic Eligibility

2620 Catastrophic Eligibility

Applicants with an emergency need attributable to a catastrophic situation (rule 2621) may qualify for GA to address that need, provided that they meet the eligibility criteria in rules 2604 – 2605 and 2620 –2623 and payment conditions in rules 2651-2667. Applicants seeking help for an emergency medical need shall not be eligible for GA to address that need if they have been denied or lost health insurance sponsored by the state or federal government for specified reasons (rule 2620 D).

To qualify for such assistance, applicants must meet all of the following eligibility criteria:

- a. They must have an emergency need attributable to a catastrophic situation, as defined in rule 2621.
- b. They must have exhausted all available income and resources.
- c. They must explore and pursue or have explored and pursued all alternatives for addressing the need, such as family, credit or loans, private or community resources, and private or government-sponsored health insurance. Before the department will determine eligibility for GA payment for vision services or items, the applicant must pursue or have pursued assistance from the Vermont Association for the Blind, the Lions Club and other service organizations, school-related health programs, and other child development programs, if applicable.
- d. If seeking assistance for a medical need, at the departments most recent eligibility determination they must not have been denied or lost government-sponsored health insurance that would have covered the current need because of either or both of the following reasons:
 - they failed to pay a premium for the government-sponsored health insurance, or
 - they failed to comply with any administrative eligibility requirement necessary to be covered by the government-sponsored health insurance.

For purposes of GA rules, premium is defined as it is defined in Vermont Medicaid rules. Premium means a nonrefundable charge that must be paid by an applicant or beneficiary as a condition of initial and ongoing enrollment for health insurance.

Catastrophic Eligibility

Eligibility workers shall explain to applicants that they are expected to take steps to avoid or resolve emergencies in the future without GA. Except for applicants who are receiving their final grant of assistance within a 12-month period, applicants and eligibility workers shall work together to develop a schedule of activities addressing the applicant's emergency need. Completion of these activities is a requirement for continued receipt of assistance. These activities shall be documented in the applicant's case record.

Subsequent applications must be evaluated in relation to the individual applicant's potential for having resolved the need within the time which has elapsed since the catastrophe to determine whether the need is now caused by the catastrophe or is a result of failure on the part of the applicant to explore potential resolution of the problem.

The department shall not apply an income test or resource exclusions in determining eligibility due to a catastrophic situation.

Catastrophic Situation

2621 Catastrophic Situation

For the purposes of this section, catastrophic situations are limited to the following situations:

- a. Death of a spouse or minor dependent child.
- b. The presence of an emergency medical need, as defined at rule 2623.

The department shall determine the eligibility of an applicant for payment of medical services or items using the criteria for eligibility due to a catastrophic situation at rule 2620, even if the applicant meets the non-catastrophic income test at rule 2610 B.

- c. A natural disaster such as a flood, fire, or hurricane.
- d. A court-ordered eviction or constructive eviction, as defined at rule 2622, due to circumstances over which the applicant had no control.

A court-ordered eviction resulting from intentional, serious property damage caused by the applicant, other household members, or their guests; repeated instances of raucous and illegal behavior that seriously infringed on the rights of the landlord or other tenants of the landlord; or intentional and serious violation of a tenant agreement is not considered a catastrophic situation. Violation of a tenant agreement shall include nonpayment of rent if the tenant had sufficient income to pay the rent and did not use that income to cover other basic necessities or withhold the rent pursuant to efforts to correct substandard housing.

- e. Domestic violence, dating violence, sexual assault, stalking, human trafficking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence.

Acceptable verification of domestic violence includes:

- a relief-from-abuse restraining order or order against stalking or sexual assault;
- observable physical evidence of abuse;
- corroboration of domestic violence, sexual violence, human trafficking, or stalking from police, hospitals, court officials, physicians, nurses, or any other credible sources;

Catastrophic Situation

- a determination of abuse by staff at a domestic violence shelter or organization;
- a waiver of the Reach Up requirement to cooperate in pursuing child support (see rule 2235.2);
or
- a deferment or modification of the Reach Up work requirement due to the effects of domestic violence (see rule 2363.1).

Constructive Eviction

2622 Constructive Eviction

Constructive eviction is defined as any disturbance caused by a landlord, or someone acting on the landlords behalf, that makes the premises unfit for occupation. The motive for the disturbance, which may be inferred from the act, is the eviction of the occupant.

A situation in which the landlord has not provided heat, utilities, or water within a reasonable period of time and there is an agreement to furnish these items shall be considered a constructive eviction when the applicant is pursuing legal resolution of these offenses through the Vermont Department of Health or appropriate local officials, such as the local housing inspector or town health officer. The Department shall not deny benefits to an individual in a constructive eviction situation because the individual chooses not to pursue legal action such as withholding rent, obtaining a court order, suing the landlord, or terminating the rental agreement.

Constructive eviction includes written or verbal notice of a termination of tenancy for no cause from the landlord to the tenant. A no cause termination means the tenancy is being terminated and it is not the fault of the tenant. If a termination notice includes multiple reasons for terminating the tenancy, but one of the reasons for termination is not the fault of the tenant, the Department will consider the termination a no cause termination. The applicant must provide verification of the existence of a tenancy and termination of the tenancy. A tenancy exists when the landlord is the owner, lessor, or sublessor of a residential dwelling unit or building and the tenant has the right to exclude anyone else from the dwelling unit or building, including the landlord if the landlord has not given proper notice. A residential dwelling unit includes a room if the tenant has the right to lock anyone out of the room, including the landlord.

Emergency Medical Need

2623 Emergency Medical Need

The general definition of emergency medical need in subsection A applies to all items and services except those related to vision, dental, and prescription drugs. The definitions of emergency medical need as applied to vision, dental, and prescription drugs are specified in subsections B through D.

a. Emergency Medical Need – General

An emergency medical need is defined as a need for a medical service or item attributable to a medical condition characterized by acute symptoms of sufficient severity, including but not limited to severe pain, such that a prudent layperson, with an average knowledge of health and medicine, could reasonably expect the absence of medical attention to result in the following:

- serious jeopardy to the health of the participant;
- serious impairment to bodily functions; or
- serious dysfunction of the bodily organ or part.

Prior to issuing a vendor authorization for covered physician services, vision services and items, medical supplies, durable medical equipment, or ambulance services, eligibility workers shall obtain a determination from the Department of Vermont Health Access (DVHA) that such services or items address an emergency medical need (as defined in subsection A or B) or addressed such a need at the time the services or items were provided.

b. Emergency Medical Need –Vision

An emergency medical need is deemed to exist if and only if vision services or items for which GA payment is requested are covered by GA (rule 2663) and necessary to:

- aid convalescence from eye surgery;
- prevent blindness or further deterioration of eyesight;
- avert risk of physical injury from normal living hazards, such as stairs and stoves; or
- allow an individual to continue education or employment.

Emergency Medical Need

c. Emergency Medical Need – Dental

An emergency medical need is deemed to exist if and only if dental services for which GA payment is requested are covered by GA (rule 2662) and necessary to relieve pain, bleeding, or infection. The Division of Dental Services at the Vermont Department of Health shall determine whether dental services for which GA payment is requested addressed an emergency medical need at the time the dental services were provided.

d. Emergency Medical Need – Prescription Drugs

An emergency medical need is deemed to exist if and only if a prescribed drug for which GA payment is requested complies with the requirements of the pharmacy best practices and cost control program, and is not included in a classification on the departments list of noncovered drug classifications (rule 2664).

Employment

2630 Employment

Each applicant is required to explain the employment requirements to non-exempt individuals who are not present at the initial interview and to supply them with employment verification forms. Whenever possible, a non-exempt individual shall appear in person at the District Office at the time of each subsequent application.

Work Requirements

2631 Work Requirements

Any individual who is included in the application and is not exempted under rule 2632 shall:

- a. Be present whenever possible at the time of each application.
- b. Submit evidence of an active effort (rule 2633) to seek gainful employment consisting of at least three job contacts with different employers per week. This requirement does not apply to the first GA application.
- c. Not restrict employment search to his/her major field of experience or to limited types of occupations. The applicant shall accept any suitable job referrals and/or offers within his/her ability. The applicant shall be required to substantiate why a particular job cannot be performed.
- d. Submit evidence of contact within the past 24 hours or previous workday with the Department of Labor for the purpose of obtaining employment opportunity information.
- e. Not have refused within the 30 days prior to application to report to the local Department of Labor if requested by either the Department of Labor or the Department for Children and Families.
- f. Not have refused within the 30 days prior to application date to report for an employment interview for suitable employment when referred by the Department of Labor or the Department for Children and Families.
- g. Not have refused within the 30 days prior to application to accept a bona fide offer of full or part-time employment.
- h. Not have quit suitable employment in the 30 days prior to application.

If any person not exempted from the employment requirements (rule 2632) fails to meet any one of the above requirements, he/she and all individuals included in the application shall be ineligible.

Work Exemptions

2632 Work Exemptions

Any individual included in the application shall be exempt from the employment requirements (rule 2631) if such individual meets at least one of the following five exemption criteria:

- a. Is under age 16, is age 65 or over, or is age 16 or 17 and a full-time student.
- b. Is gainfully employed (rule 2603 G).
- c. Is personally providing the majority of care for a child who is born, under age three, and living in the home or for another household member who is unable to care for him/herself due to illness or injury.

When more than one individual in the GA household claims such responsibility, the determination as to whom shall be exempt will be made by the Department;

A pregnant woman with no other children is not exempt simply because of her pregnancy.

An individual who is pregnant or who has responsibility for care of a child who is age 3 or older but under age 18 may be exempt from the work requirement if that individual has not received General Assistance or Emergency Assistance in the previous sixty days.

- d. Is currently unable to work due to physical or emotional problems that have or may be presumed to last at least 30 days. Documentation of incapacity must be entered in the record to demonstrate that it is obvious, or to indicate that medical verification will be required within a worker-specified time period that may not be fewer than 3 days or more than 3 weeks.
- e. Has a verified written statement from a potential employer indicating that he/she will start working within 7 days from the date of the GA application. All individuals so exempted shall be advised to continue to attempt to seek temporary employment during the time they are waiting to start permanent work.

Any individual claiming an exemption has the burden of proving such. The Department shall pay the reasonable expense of required medical examinations.

Active Job Search Effort

2633 Active Job Search Effort

Active effort to seek employment pursuant to rule 2631 (b) is limited to the following:

- a. Personal contacts with a potential employer or company representative knowledgeable about the possibility of employment; and
- b. Time spent in actual registration or interviews at the Department of Labor to maintain an active registration and time spent at the Department of Labor inquiring as to immediate job referrals for as long as the individual is maintaining an active registration would count in lieu of one job contact. Visits which are merely to have forms signed at the Department of Labor shall not be counted; and
- c. Time spent in an employment counseling program recognized by the Department as enhancing employment opportunities would equal one job contact.

A GA recipient to whom the work search applies and who is a mandatory Reach Up participant must cooperate with the requirements of any Reach Up program service, such as an individual or group job search activity, which Reach Up program staff deem appropriate for that participant.

Telephone contacts, reading newspaper ads, resume writing, contacts with friends and acquaintances, etc., although recognized as legitimate sources of leads toward employment, shall not be counted unless part of an employment counseling program recognized by the Department as enhancing employment opportunities. Out-of-state contacts with potential employers are not counted unless the potential employment is within commuting distance of the person's home.

A GA applicant who fails to meet an "active effort" criterion will be ineligible only until he/she fulfills the requirement.

The eligibility worker shall verify as necessary the contacts specified by each applicant subject to the work search requirement. The application shall be denied for a 30-day period even when three job contacts are shown on the employment verification form, when the eligibility worker has been notified by Reach Up Program staff that a mandatory Reach Up participant is not cooperating, or when, in the judgment of the eligibility worker, the evidence of active effort to seek employment shows:

- a. There has been a substantial number of contacts with the same employers during consecutive weekly periods without a corresponding effort to seek out new potential employers.
- b. Contacts are limited to the applicant's primary occupation or in limited fields of employment in consecutive seven-day periods.

Income

2640 **Income**

Income means the total gross sum of all monetary remunerations received from any source for any reason. See rules 2641 through 2646 for deductions and excluded income. The following list identifies some kinds and sources of income:

- a. Reach Up financial assistance payments. Reach Up financial assistance prior to deductions to recover overpayments shall count as income received.
- b. GA and EA payments. Such payments, however, shall not be considered income if they:
 - constitute the only income received in the last 30 days;
 - are based on a catastrophic situation (rules 2621 or 2820); or
 - are issued for emergency housing (rules 2652.2 or 2852.2) or rental or mortgage arrearage (rule 2853).
- c. Wages or compensation for services performed as an employee.
- d. Gross receipts from self-employment.

Gross receipts shall include all monies received from the following:

- sale of goods or commodities produced by the self-employment enterprise;
 - services performed in connection with and attributable to the enterprise; and
 - gross proceeds from the sale or transfer of capital assets used in or held as an investment by the enterprise (e.g., real estate, personal property, and securities).
- e. Room or board payments received.
 - f. Day care payments received.
 - g. The amount actually received in annuities, pensions, compensation or benefits (e.g., social security retirement or disability benefits, veterans benefits, railroad retirement, SSI/AABD).
 - h. Government-sponsored payments.

Income

- i. Cash gifts, child or spousal support.
- j. Rent, dividends, interest, royalties.
- k. Regularly or irregularly received cash from any source.

All income received by all persons included in the applicant household shall be verified and shall be computed to arrive at the total gross income received during the 30-day period prior to the date of the application. The total allowable deductions (rules 2641 through 2646) shall be computed and subtracted from the total gross income to arrive at the total net income received during the 30-day period prior to the date of application. If total net income equals or exceeds the applicable income limit (rule 2610 B), the application shall be denied unless the household is eligible because it has experienced a catastrophic situation (rule 2621).

The applicant may be required to substantiate that income and resources have actually been spent. Amounts not accounted for shall be considered cash-on-hand.

Work Expense Deduction

2641 Work Expense Deduction

To compute earned income used in determining eligibility for general assistance, an employment expense standard consisting of the first \$90 of earned income shall be deducted from the 30-day gross earned income of each employed individual in lieu of actual employment expenses such as taxes, insurance, dues, clothing, and transportation.

In addition, deductions for garnishments against income, although mandatory on the employer, shall be limited to garnishments:

- by the Internal Revenue Service for federal taxes;
- by the state of Vermont for state taxes; and
- for child and spousal support (rule 2643).

Self-Employment Deductions

2642 Self-Employment Deductions

Identifiable costs of self-employment, including self-employed farming, shall be deducted from gross receipts received in the 30-day period prior to the date of application.

Identifiable costs of self-employment include but are not limited to the following:

- a. Wages and payments for employee labor;
- b. Cost of materials used to produce commodities for sale (e.g., raw materials, stock, seed, fertilizer, inventory, livestock for resale, etc.)
- c. Taxes and interest paid on an installment contract to purchase income-producing real property, except that no portion of taxes, mortgage payment or interest attributable to investment in the home in which the household lives may be counted as a business cost;
- d. Interest on installment payments for purchase of capital assets, equipment, machinery, tools, etc.

The following items shall not be allowed as business expenses:

- a. Payments on the principal of real estate mortgages on income producing property;
- b. Monies paid to purchase capital assets; such as equipment, machinery, tools, livestock for dairying purposes;
- c. Any amount claimed as depreciation for Federal income tax or other purposes;
- d. Any amount claimed as a net loss sustained in any prior period.

Child Support Deductions

2643 **Child Support Deductions**

- a. Child support paid by a household member — The amount actually paid in the last 30 days for mandatory child support payments shall be deducted from the gross income received during that period. The child support payments shall be considered mandatory if they are made under the terms of a legal court order, or the amount of child support payments have been voluntarily agreed to between the individual and the Department, or executed through attachment of wages.

The applicant must provide positive proof of the child support payments. Check stub notations are not acceptable verification. In questionable situations contact with a knowledgeable third party, deemed reliable by the worker, may be necessary. If the payment cannot be verified the child support deduction shall not be allowed.

- b. Child support received by a household member — For purposes of determining eligibility, the first \$50 of child support received in the previous 30 days shall be deducted.

Room and Board Deductions

2644 Room and Board Deductions

The cost of providing room and board shall be deducted from the gross income received in the last 30 days in the following amounts:

Room and Board Deductions

Service Provided	Deduction Per Person Per Day
room only	\$1.00
board only	\$2.00
room and board	\$3.00

The deduction shall not exceed the amount of room and board payment received.

An applicant who provides room or board to three or more adult individuals unrelated to the applicant shall be considered to be operating a commercial enterprise and have deductions computed according to rule 2642.

Dependent Care Deduction

2645 Dependent Care Deduction

Except as specified below, dependent care expenses necessary to enable individuals to retain their employment shall be deducted as paid in the previous 30 days up to the following maximum amounts per adult or child:

Dependent Care Deduction

Dependent Needing Care	Maximum Deduction Per Dependent
child under age 2	\$200
child age 2-12	\$175
child age 13-17 who meets the criteria in Reach Up rule 2352	\$175
incapacitated adult	\$175

Dependent care deductions will be allowed on the basis of a signed statement by the provider of services. If a recipient's dependent care expenses are below the maximum, transportation to and from the dependent care facility may be deducted as part of the expense at the mileage rate published in Reach Up procedures.

As long as funding for child care subsidies through the Child Development Division (CDD) is available, Reach Up participants and PSE participants receiving a living expense stipend are not allowed a deduction for child care expenses because they qualify for the child care subsidy.

Excluded Income

2646 **Excluded Income**

Certain kinds of income are excluded from consideration when determining income eligibility for general assistance. They are considered, however, in evaluating whether an emergency need exists.

These kinds of income include:

- senior companion stipend,
- fuel assistance benefits,
- foster care payments from CDD, and
- adoption assistance subsidies.

Other kinds of income are totally excluded, even in the consideration of an emergency need, including catastrophic situations. These include:

- 3SquaresVT and 3SquaresVT cashout payments, as their use is dedicated exclusively to improvement of dietary standards; and
- money that an SSI/AABD recipient sets aside for the fulfillment of a plan to achieve self-support (PASS plan).

Benefit Issuance

2650 **Benefit Issuance**

During a 30-day period, benefits for emergency needs resulting from a non-catastrophic situation (rule 2610) cannot exceed the difference between the applicable income limit, as defined in rule 2610 B, and the net income for that household computed according to rule 2640. This provision is only applicable if the household has received general assistance or emergency assistance in the previous 60 days. Catastrophic benefits received in the previous 30 days are not counted as income in the net income calculation referred to above.

Benefits for needs in rules 2651 through 2657 may be issued to the applicant or to the provider of the service.

The eligibility worker determines the appropriate method of payment after assessing the preference of the applicant and provider and the applicant household's ability to use the money for the designated need.

2650.1 **Vendor Payments**

Vendor payments are defined as all payments made direct to a third party who has furnished goods or services to or on behalf of an applicant for or recipient of aid, benefits or services under Department programs. Vendor payments cover the following types of authorized General Assistance expenditures:

- a. Maintenance assistance authorized in lieu of direct money payment to the recipient.
- b. Medical care and services.
- c. Burial expenses.
- d. Emergency housing expenses.

Vendor billing shall require prior written authorization by designated Department staff. In specified emergency situations, oral authorization may be given; in such instances, confirming written authorization or approval of a designated staff member shall be required for payment.

Itemized bills shall be submitted in duplicate to the appropriate district office, when so directed, for approval. All other bills, itemized, shall be submitted, in duplicate, accompanied by appropriate written authorization to the State Office. Payment shall be made through established Department and State disbursement channels.

Benefit Issuance

Contracts with specified vendors to provide goods or services shall specify acceptable methods of authorization, billing and payment for items covered under the contract.

Persons who provide lodging to emergency housing assistance recipients must hold a lodging license issued by the Vermont Department of Health. These persons must comply with all applicable laws and rules, including but not limited to the Vermont Department of Health's Licensed Lodging Establishment Rule and the Vermont Department of Public Safety's Vermont Fire and Building Safety Code. The Department may withhold full or partial payment to any person who violates any law or rule or whose license is suspended, revoked, expired, or otherwise invalid. Specifically, the Department may withhold full or partial payment to persons to whom the Department of Health has issued a conditional license, abatement order, warning letter, or other notice of violation. Likewise, the Department may withhold full or partial payment to persons who have received notices from other government agencies that indicate that the person has violated a law or rule. Once the Department is satisfied that the person is complying with the law, the Department will begin or resume payments at the agreed-upon rate for lodging provided after the violation ended. The Department may provide all, some, or none of the payments withheld based on the nature and extent of the legal violations and the effects those violations had on emergency housing assistance recipients.

2650.2 Administrative Expenses

Administrative expense required to establish eligibility for assistance is currently limited to professional examination, evaluation and report on medical factors related to eligibility. Payment of reasonable charge for such examination and report shall be approved on receipt of the required written report and itemized bill.

Groceries and Personal Needs

2651 Groceries and Personal Needs

Groceries and personal needs include food and essential items for household and personal care, such as soap, toothpaste and such items as are normally purchased at a grocery outlet. General Assistance payment levels are based on current Reach Up basic need standards reduced by a percentage necessary to avoid exceeding current GA funding. The following payment standard shall be used by District Directors and Town Service Officers to determine the amount of aid to be given for groceries and personal needs (see also rule 2654 - Room and Board-Restaurant Meals). Grocery and personal need allowances shall be issued, as needed from one to seven days. For applicant households exempt from the employment requirements allowances may be issued for up to 28 days as needed. Do not issue an allowance for any period covered by a previous issuance except when a condition exists as defined in rule 2620 (b) and (c).

Groceries and Personal Needs Allowance

		Groceries and personal needs allowance in dollars													
No. in family	1 day	2 days	3 days	4 days	5 days	6 days	7 days	8 days	9 days	10 days	11 days	12 days	13 days	14 days	
1	4.00	4.00	6.00	8.00	10.00	12.00	14.00	16.00	18.00	20.00	22.00	24.00	26.00	28.00	
2	6.50	6.50	10.00	13.50	16.50	20.00	23.50	26.50	30.00	33.50	36.50	40.00	43.50	47.00	
3	9.50	9.50	14.00	18.50	23.50	28.00	32.50	37.50	42.00	46.50	51.50	56.00	60.50	65.00	
4	9.50	10.50	16.00	21.50	26.50	32.00	37.50	42.50	48.00	53.50	58.50	64.00	69.50	75.00	
5	9.50	13.50	20.00	26.50	33.50	40.00	46.50	53.50	60.00	66.50	73.50	80.00	86.50	93.00	
6	10.50	14.50	22.00	29.50	36.50	44.00	51.50	58.50	66.00	73.50	80.50	88.00	95.50	103.00	
7	12.00	17.50	26.00	34.50	43.50	52.00	60.50	69.50	78.00	86.50	95.50	104.00	112.50	121.00	
8	13.50	20.00	30.00	40.00	50.00	60.00	70.00	80.00	90.00	100.00	110.00	120.00	130.00	140.00	
9	13.50	21.50	32.00	42.50	53.50	64.00	74.50	85.50	96.00	106.50	117.50	128.00	138.50	149.00	
10	13.50	24.00	36.00	48.00	60.00	72.00	84.00	96.00	108.00	120.00	132.00	144.00	156.00	168.00	

For each add'l person	1.50	2.50	4.00	5.50	6.50	8.00	9.50	10.50	12.00	13.50	14.50	16.00	17.50	19.00
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Housing

2652 Housing

Housing includes accommodations to provide permanent or temporary shelter for eligible applicants. Housing may include furnishings, fuel, and utilities. Applicants are required to furnish verification of housing expenses. Housing payments may be authorized only when the applicant cannot obtain housing without cost to the applicant, for example, housing supplied by relatives, friends, or community groups. Payment may be provided for rent, lot rent, mortgage, condo and association fees, water and sewer charges, fuel and utilities when included in the rent, but not taxes. A household in crisis requiring general assistance should be considered for tax abatement before a housing crisis would occur. An exception to this policy, relative to taxes, is that payment may be made on behalf of an otherwise eligible applicant, when foreclosure proceedings have been filed by the municipality to which the taxes are owed, and the proceedings are scheduled to take place within 30 calendar days. Payment shall be for the minimum amount necessary to prevent tax foreclosure.

2652.1 Permanent Housing

Permanent housing is defined as housing accommodations intended to provide shelter on a continuing basis.

Payment shall not exceed the housing payment maximum or the actual payment, whichever is less.

When more than one individual or family unit occupy the same housing unit, the payment per applicant household shall not exceed the housing payment maximum or the pro-rata share of the total rent or mortgage payment, whichever is less. The total rent or mortgage payment used to compute the pro-rata share shall not exceed three times the applicable housing payment maximum. Any amount exceeding this shall be disregarded in the computation.

The pro-rata share is computed by dividing the total, up to three times the maximum, by the number of individual or family units sharing the housing unit.

When a housing allowance for the period to be covered has been or will be included in the applicants Reach Up financial assistance grant or Postsecondary Education Program living expense stipend, that allowance, after ratable reduction, shall be deducted from the applicant's general assistance grant.

Housing

Payment may be authorized for the current mortgage or rental period only and shall not be authorized or issued prior to the due date for that period. "Current period" is defined as the period extending from the most recent date that rent was due through the day prior to the next date that rent is due. For example, if an applicant applies for rental assistance on January 10 and his rent is due monthly on the first of the month, the current period is January 1 through January 31. No payment may be authorized for a period other than the current period. Payment may be made only if the applicant is financially and otherwise eligible on the date of application.

When both a rental arrearage and a continuing rental obligation exist, a rental payment made (or a failure to make a payment) during a given month will be considered for GA purposes as a payment (or failure to pay) for that month. Example: A GA applicant makes a \$150 rent payment on January 1, which his landlord applies to his \$450 arrearage. On January 5 the applicant requests GA for his January rent. His rent payment on January 1 is considered for GA purposes as payment toward the January rent due, regardless of the fact that his landlord chose to apply the payment to arrearages.

Room rent is paid according to different maximums depending on whether the applicant pays this rent to a relative or to a non-relative. The relative or non-relative status of the person or persons to whom the applicant pays room rent shall be determined according to definitions used in the Reach Up Program. The following individuals shall meet the definition of "relative":

- a. Any blood relative, including those of half-blood, up to and including first cousins, nephews, nieces; and preceding generations, as denoted by the prefixes "grand-", and "great-grand-";
- b. Stepparent, stepbrother, stepsister;
- c. Any adoptive relative of corresponding degree, upon whom are conferred under Vermont law the same rights, duties and obligations as natural relatives;
- d. Any spouse of an individual included in one of the above groups, whether or not the marriage has been terminated by death or divorce.

General Assistance payment levels are based on basic need standards updated to recognize cost of living increases but then ratably reduced by a percentage necessary to avoid exceeding current GA funding.

Shelter payment in the General Assistance Program is allowed as incurred up to, but not in excess of, the maximums precomputed as shown below.

Housing

Housing Payment Maximums

Housing Type	Weekly	Payment Maximums		
		Bi Weekly	Semi Monthly	Monthly
Home Ownership or Rental				
<u>Chittenden County Only</u>	\$54.00	\$108.00	\$116.00	\$232.00
<u>All Other Counties</u>	\$46.00	\$92.00	\$99.00	\$198.00
Room Rent - paid to non-relative		\$40.00 (meals not supplied)		
Room Rent - paid to relative		\$30.00 (meals not supplied)		

Living space shall not qualify as home ownership or rental unless it consists of at least two rooms, a private toilet facility, private entrance either from outside or a public hallway, and has or is equipped to accept cooking facilities. (The G. A. Supervisor may make written exception when the space has clearly been designed as an apartment but does not meet specific criteria as listed.)

A rented mobile home shall qualify as home rental. A mortgaged or owned mobile home shall qualify as home ownership. Lot rental, water, and sewer charges are included in the payment maximums.

Amounts paid for emergency housing shall not be added into amounts paid for permanent housing to arrive at the above maximums.

Room rent may be authorized for a period not to exceed one week, except that, when applicants are exempt from the employment requirements, it may be authorized for a two-week period.

Deposits or security payments shall not be authorized.

Housing

2652.2 Emergency Housing Assistance

a. Purpose

The purpose of General Assistance emergency housing assistance is to provide eligible households with temporary emergency housing, subject to available appropriations, in a community-based shelter or hotel or motel when an alternative housing placement is unavailable.

b. Application of other General Assistance Rules

General Assistance rules 2600 through 2683 do not apply to emergency housing assistance unless specifically referenced in this section.

c. Definitions

1. "Application" means a written or verbal request by a household to the Department for emergency housing assistance.
2. "Alternative housing placement" means shelter beds and pods; placements with family or friends; permanent housing solutions, including tiny homes, manufactured homes, and apartments; residential treatment beds for physical health, long-term care, substance use, or mental health; nursing home beds; and recovery homes.
3. "Authorized representative" means a person or entity designated, via a form provided by the Department, by a household to act responsibly in assisting the household with their application and other ongoing communications with the Department. An authorized representative must be an adult and knowledgeable of the household's circumstances. A judicially appointed legal guardian or legal representative automatically meets the criteria for an authorized representative.
4. "Available resources" has the same meaning as defined in rule 2603(c):

Cash on hand or in a bank or other financial institution, including Christmas clubs and U. S. savings bonds or other negotiable instruments that can be converted into cash on demand within 24 hours when responding to an immediate emergency need for the first time. The applicant shall be advised to take steps to access other resources such as cash value of life insurance, sale of stock, bonds, or mutual funds, cashing of an IRA or other reasonably accessible resource to meet future needs. Future GA applications will be evaluated in relation to whether the applicant has taken reasonable steps to access these resources. If not, the application will be denied because no effort was made to access resources that could have been currently available to meet the emergency need.

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5. "Community-based shelter" means a shelter that meets the Vermont Housing Opportunity Grant Program's Standards of Provision of Assistance.

6. "Constructive eviction" has the same meaning as defined in rule 2622:

Any disturbance caused by a landlord, or someone acting on the landlord's behalf, that makes the premises unfit for occupation. The motive for the disturbance, which may be inferred from the act, is the eviction of the occupant.

A situation in which the landlord has not provided heat, utilities, or water within a reasonable period of time and there is an agreement to furnish these items shall be considered a constructive eviction when the applicant is pursuing legal resolution of these offenses through the Vermont Department of Health or appropriate local officials, such as the local housing inspector or town health officer. The Department shall not deny benefits to an individual in a constructive eviction situation because the individual chooses not to pursue legal action such as withholding rent, obtaining a court order, suing the landlord, or terminating the rental agreement.

Constructive eviction includes written or verbal notice of a termination of tenancy for no cause from the landlord to the tenant. A no cause termination means the tenancy is being terminated and it is not the fault of the tenant. If a termination notice includes multiple reasons for terminating the tenancy, but one of the reasons for termination is not the fault of the tenant, the Department will consider the termination a no cause termination. The applicant must provide verification of the existence of a tenancy and termination of the tenancy. A tenancy exists when the landlord is the owner, lessor, or sublessor of a residential dwelling unit or building and the tenant has the right to exclude anyone else from the dwelling unit or building, including the landlord if the landlord has not given proper notice. A residential dwelling unit includes a room if the tenant has the right to lock anyone out of the room, including the landlord.

7. "Denial" means the Department's determination that a household is ineligible for emergency housing assistance.
8. "Department" means the Department for Children and Families.
9. "Dependent" means any of the following members of the applicant's immediate family: husband, wife, civil union partner, and children age 19 years of age or under, including biological, adopted, and stepchildren. A pregnant woman having no children in her household shall not be considered to have a minor dependent.
10. "Economic unit" means two or more individuals who reside together and share income and expenses.

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11. "Household" means an individual and any dependents for whom the individual is legally responsible and who live in Vermont. "Household" includes individuals who reside together as one economic unit, including those who are married, parties to a civil union, or unmarried.
12. "Income" has the same meaning as defined in rule 2640. The deductions and exclusions in rules 2641 through 2646 do not apply.
13. "Live in Vermont" means to be physically present in Vermont with the intent to make Vermont one's home.
14. "Misconduct" means violent criminal behavior, non-violent criminal behavior that jeopardizes the health or safety of other hotel or motel guests or staff (for example, the sale, distribution, or manufacturing of illegal substances or tampering with fire safety equipment), or repeated non-violent criminal behavior (for example, theft or disorderly conduct).
15. "Termination" means the Department's action of ending a household's authorization period.
16. "Verification" means third-party confirmation or documentation of facts stated by the household.

d. Application and Interview

1. Households interested in applying for emergency housing assistance must:
 - i. submit a complete, signed application each time they request assistance; and
 - ii. complete an interview with a representative of the Department each time they request assistance.
2. The household may complete the application and interview either in person or by phone.

e. Verification

1. The household is the primary source of information to establish eligibility. It is the household's responsibility to furnish the necessary information completely and accurately and to give the Department permission to obtain the information from other sources.
2. Verification shall be required for the following items:
 - i. Identity;
 - ii. Income;

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- iii. Eligibility criteria in subsection (g)(1)(iii); and
 - iv. Housing search requirements pursuant to subsection (k).
3. Verification may be required for any other information, if questionable, that affects eligibility.
 4. The household has the right to refuse to give the Department information, to refuse to submit required verification, or to refuse to allow the Department to contact others. However, refusing to provide information or access to the information necessary to establish eligibility will result in denial of the application.
 5. Willful misrepresentation of the household's circumstances will result in a denial or termination of emergency housing assistance, and may result in legal action under fraud statutes.
 6. Households may provide verification and supporting documentation by:
 - i. Dropping it off at a district office;
 - ii. Mailing it to the Department;
 - iii. Uploading it using the Department's uploader; or
 - iv. Allowing a Department representative to confirm the information with a phone call.

f. Action on Application

1. The Department will determine a household's eligibility for emergency housing assistance once a completed, signed application with the necessary verification is submitted and an interview has been completed.
2. If the household's application is approved, the Department will provide verbal notice, and if requested, written notice of the decision. The notice must include:
 - i. The type of emergency housing assistance provided: community-based shelter or housing in a hotel or motel;
 - ii. The authorization period for emergency housing assistance in a hotel or motel;
 - iii. The check-in and check-out date at the hotel or motel, if applicable; and
 - iv. The date the household must reapply.
3. If the household's application is denied, the Department will provide written notice of the decision. The notice must include:

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- i. The specific reason for denial; and
 - ii. The household's appeal rights.
4. Written notice shall be given directly to the household if the household applied in a district office or emailed or mailed, via first-class mail, to the address provided by the household.

g. Eligibility

1. To be eligible for emergency housing assistance, households must:
 - i. attest to lack of a fixed, regular, and adequate nighttime residence;
 - ii. not have access to an alternative housing placement;
 - iii. have a member who:
 - A. is 65 years of age or older, as verified by any document that shows date of birth, if the member's age has not already been documented by the Department;
 - B. has a disability that can be documented by:
 1. receipt of Supplemental Security Income or Social Security Disability Insurance; or
 2. a form developed by the Department as a means of documenting a qualifying disability or health condition that includes, at a minimum:
 - i. the applicant's name, date of birth, and the last four digits of the applicant's Social Security number or other identifying number;
 - ii. a description of the applicant's disability or health condition;
 - iii. a description of the risk posed to the applicant's health, safety, or welfare if temporary emergency housing is not authorized pursuant to this section; and
 - iv. written certification of a health care provider, as defined in 18 V.S.A. § 9481, that includes the provider's credentials, credential number, address, and phone number;
 - C. is a child 19 years of age or under, as verified by any document that shows date of birth, if the child's age has not already been documented by the Department;
 - D. is pregnant, as verified by a health care provider if the pregnancy has not already been documented by the Department;

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- E. has experienced the death of a spouse, domestic partner, or minor child that caused the
 - F. household to lose its housing, as verified by an obituary, death certificate, or any other documentation that shows date of death;
 - G. has experienced a natural disaster, such as a flood, fire, or hurricane, as verified by a landlord, home insurance claim, Red Cross documentation, or any other documentation showing the household member lives in an area affected by a natural disaster;
 - H. is under a court-ordered eviction or constructive eviction due to circumstances over which the household has no control, as verified by eviction paperwork, documentation from a landlord, or documentation from a housing inspector the Department of Health, or another authority for cases involving habitability; or
 - I. is experiencing domestic violence, dating violence, sexual assault, stalking, human trafficking, hate violence, or other dangerous or life-threatening conditions that relate to violence against the individual or a household member that caused the household to lose its housing, as verified by a domestic violence agency, restraining orders, documentation from law enforcement, a court, and health care providers, Reach Up waiver of cooperation for child support, or a Reach Up domestic violence deferment;
- iv. provide information to the Department about the household's efforts to secure an alternative housing placement pursuant to subsection (j) below;
 - v. contribute 30% of the household's gross monthly income toward the cost of emergency housing assistance in accordance with rule 2652.3; and
 - vi. have exhausted all available resources.

h. Type of Emergency Housing Assistance

1. Households eligible for emergency housing assistance are provided housing in a community-based shelter if adequate community-based shelter space is available within the district in which the household applies for assistance.
 - i. If a household needs a reasonable accommodation to stay at a community-based shelter and the shelter is unable to provide the accommodation, the Department shall provide the household housing in a hotel or motel.
2. If adequate community-based shelter space is not available within the district in which the household applies for assistance, the household shall be provided housing in a hotel or motel within the district, if available, until adequate community-based shelter space becomes available.

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i. Authorization Periods

1. Authorization for emergency housing assistance in a hotel or motel shall be issued for periods up to 28 days.
2. The Department shall terminate a household's authorization for emergency housing assistance in a hotel or motel effective the date community-based shelter space becomes available.
3. Households that do not check in to their emergency housing assistance placement (community-based shelter or hotel or motel) shall not be authorized for additional emergency housing assistance for 30 days from the check-in date.
 - i. If the household is prevented from checking in to their emergency housing assistance placement due to circumstances over which the household had no control, the Department shall authorize the household for emergency housing assistance at another community-based shelter or hotel or motel, if available.
4. Households that are exited by a community-based shelter or hotel or motel for misconduct shall not be authorized for additional emergency housing assistance for 30 days from the date the household is exited.

j. Provisional Housing

1. If verification of eligibility criteria, including verification of housing search requirements, cannot be obtained on the day of application, assistance may be authorized for no more than four days on a conditional basis pending verification. No more than four days of conditional assistance may be authorized within the 30-day period following the date of application.

k. Housing Search Requirements

1. All households applying for and receiving emergency housing assistance must engage in their own search for an alternative housing placement.
 - i. The Department and household shall work together to develop a schedule of activities addressing the household's need for emergency housing assistance. Completion of the activities is a requirement for continued receipt of assistance. These activities shall be documented in the household's case record.
 - A. Activities shall include at least one of the following: completing the coordinated entry assessment, engaging with a state agency or state-contracted service provider to secure an alternative housing placement, addressing barriers to permanent housing (for example, obtaining identification documents, social security cards, or birth certificates for all household members), or applying for a permanent housing voucher.
2. If the Department determines that a household, at the time of application or during the term of the household's authorization, has not made efforts to secure an alternative housing placement,

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3. or has access to an alternative housing placement, the Department shall deny the application or terminate the authorization at the end of the current authorization period.
4. Households must provide verification to the Department at least monthly that they have made efforts to secure an alternative housing placement or the household's application for emergency housing assistance will be denied.
 - i. Verification may be provided in the form of documentation of meetings with housing case managers, applications for housing, or documentation of other housing search activities.

l. Housing Limits

1. The maximum number of days a household may receive emergency housing in a hotel or motel shall not exceed 80 cumulative days in a 12-month period.
2. The 12-month period is calculated from the first day of the authorization period to the same day of the month 12 months prior.
3. Emergency housing assistance provided from December 1 through March 31 shall be exempt from and shall not count toward the 80-day housing limit.
4. Emergency housing assistance received prior to July 1, 2024 does not count toward the 80-day housing limit.

m. Room Cap

1. The utilization of hotel or motel rooms for emergency housing assistance shall be capped at 1,100 rooms per night.
2. From December 1 through March 31, there will be no room cap.
3. The Department may house a household in more than one hotel or motel room depending on the household's size and composition.

n. Prioritization

1. The Department may prioritize providing emergency housing assistance to certain categories of households through application times and authorization periods.

o. Authorized Representative

1. An authorized representative may act on behalf of the household to carry out specific activities related to establishing eligibility for emergency housing assistance including completing an application and providing verification. The authorized representative is, in such situations, considered the primary source of information, subject to the same rights, responsibilities and consequences for the household as a household acting directly for itself.

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p. Rights of People with Disabilities

1. As required by the Americans with Disabilities Act and the Vermont Fair Housing and Public Accommodations Act, reasonable accommodations and modifications will be made to policies, practices, or procedures when necessary, as determined by the Commissioner or their designee, to provide equal access to programs, services and activities, or when necessary to avoid discrimination on the basis of disability.
2. If an individual disagrees with the Commissioner's determination:
 - i. The individual may request a fair hearing in accordance with Human Services Board, Fair Hearing Rules (CVR 13 020 002); or
 - ii. The individual may file a complaint with the Agency of Human Services in accordance with the State of Vermont's ADA/ADAA Grievance Procedure Policy Number 10.2.

2652.3 Required Contribution Toward the Cost of Emergency Housing

Households with gross monthly household income equal to or less than the Reach Up basic need standard for a household of the same size shall not be required to contribute any income toward the cost of emergency housing.

Households with gross monthly household income greater than the Reach Up basic need standard for a household of the same size shall be required to contribute 30 percent of their gross household income toward the cost of emergency housing.

The following table contains the basic need standards by household size:

Household Size	1	2	3	4	5	6	7	8	9 or more
Basic Need	\$ 644	\$ 942	\$ 1236	\$ 1478	\$ 1733	\$ 1907	\$ 2203	\$ 2458	Add \$ 236 for each additional person

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The Department will apply the following method in calculating the 30 percent income contribution:

- A household with income received on the date of application will be required to house themselves for the number of days, rounded down to the nearest whole number, equal to 30 percent of the gross household income received on that day divided by the average daily motel rate in the district at that time. If a household is currently housed in a motel under rule 2652.2,
- the household will be required to house themselves for the number of days, rounded down to
- the nearest whole number, equal to 30 percent of the household income received on that day divided by the current daily rate at the motel in which they are staying.
- A household with no income received on the date of application, but that will be receiving income within the next 14 days, will be required to house themselves starting on the day the income is received for the number of days, rounded down to the nearest whole number, equal to 30 percent of their gross income for that payment cycle divided by the average daily motel rate in the district at that time. If a household is currently housed in a motel under rule 2652.2, the household will be required to house themselves for the number of days, rounded down to the nearest whole number, equal to 30 percent of the household income received on that day divided by the current daily rate at the motel in which they are staying.

If 30 percent of gross household income divided by the least expensive daily motel rate is less than 1, the household will not be required to contribute any income toward the cost of emergency housing.

Moving Expense

2653 **Moving Expense**

District managers or their designees and town service officers shall authorize payment of reasonable costs of moving household furniture to a new location provided the need to move said furniture is the direct result of a catastrophic event. This includes moving costs in situations such as:

- A. furniture and possessions salvaged from a fire, flood, hurricane or other natural disaster which made the home uninhabitable;
- B. personal property when a family must vacate its present home due to the death of the family member who owned the dwelling;
- C. a move necessitated by a medical emergency, though this would be rare since we would not normally assist with a temporary move; condemnation of an area for the protection of the public health could be included in this category; and
- D. constructive evictions, as well as court-ordered evictions, including the possessions of a battered spouse when it is necessary to move furniture or possessions from the battering spouse's home.

All potential alternatives and resources will be explored and the least expensive resolution of the problem will be utilized. This exploration would include disaster relief; help from friends, relatives or the community; and expedited payment of other program benefits.

Room and Board

2654 Room and Board

A room and board allowance shall be authorized from one to seven days. For applicant households exempt from the employment requirements, allowances may be issued for up to 14 days as needed.

Room & Board Allowance:

\$60.00 per week per person (if paid to non-relatives)

\$40.00 per week per person (if paid to relatives)

For the definition of "relative" see rule 2603.

When an eligible recipient receives a room and board allowance, he/she shall also receive the following personal needs allowance based on the number of General Assistance recipients included in the allowance:

Personal Needs Allowance

<u>No. of GA Recipients</u>	<u>PNI Per Week</u>
1	\$2.00
2 or more	\$3.00 maximum

Heating Equipment

2655 Heating Equipment

Purchase of heating equipment shall be authorized by the district director when such equipment cannot be obtained otherwise (for example, from donations from individuals or community groups, temporary loan pending insurance settlement). Purchase shall be limited to the most serviceable and appropriate used item, if available, or new item (if a used item is not available) at the lowest cost.

Transportation

2656 Transportation

Authorization of transportation shall be limited to transients determined eligible who need help to continue to their destination. Payment for the lowest cost public transportation to the applicant's destination shall be authorized as paid, as follows:

- A. to any point within the state;
- B. after an attempt by the district director to obtain funding from the transient's state of residence and, if successful, to any point outside of the state to be authorized by district directors only.

Necessary automobile expense to enable the applicant to continue his journey maybe authorized as follows:

- A. gasoline and oil, as paid;
- B. tires, essential repairs, if the cost is lower in relation to the price of the lowest cost public transportation.

Fuel and Utilities

2657 Fuel and Utilities

Fuel and utilities are such things as water, electricity, oil, gas, coal, wood, kerosene, etc., which provide space heating, hot water, refrigeration, cooking fuel and light for the home. Sewage disposal provided as a utility service and billed on a regular basis shall be considered a utility. For purposes of the General Assistance Program, fuel and utilities are classified according to two customary methods of delivery:

- A. Metered Delivery (i.e., electricity, gas) provides service as needed and consumption is measured by an on-the-premises meter. The customer is billed at routine billing periods.
- B. Bulk Delivery (i.e., oil, bottled gas, kerosene, wood) provides a specific volume in advance of need and the customer is billed on delivery.

The amount of GA payment to applicants who are on a budget plan payment system for either metered or bulk delivery, shall equal the amount of the budget payment, even though the actual charge for service during that period is more than or less than the budget payment. A budget plan is an arrangement whereby a customer agrees in writing to pay a fixed amount for future consumption for a specified time period.

Payment for fuel and utilities may be authorized only when the conditions specified in the appropriate subsection are met.

Each recipient of GA emergency fuel or utility assistance shall be given the opportunity to have his name and address made available to the Weatherization Assistance Program as a potential recipient of a home energy audit and subsequent referral for weatherization service.

2657.1 Metered Delivery

Payment for the "current billing period" portion of a bill may be authorized only when:

- A. The billing period specified on the bill is the most current period for which a bill has been rendered by the company; and
- B. A "due date" specified on the bill has been reached (the date of receipt is considered the "due date" if no "due date" is specified); and
- C. The billing period is the standard billing period used by the company for all customers; and
- D. The bill is issued in the name of the applicant or the applicant's spouse or in the name of another

Fuel and Utilities

individual living with the applicant; and

- E. The applicant meets regular General Assistance eligibility criteria or qualifies for exception under catastrophic situation criteria (rule 2620).

Companies usually bill customers for a billing period which corresponds to a monthly period or a bi-monthly period. In unusual circumstances it may be necessary to contact a company representative to ascertain the portion of a bill which is equivalent to the company's normal billing period.

In areas where quarter meters (25cm) are utilized it will be necessary to contact a company representative to determine anticipated consumption. Payment may be authorized in an amount necessary to continue quarter meter service for up to seven days.

A deposit may be paid provided a deposit is legally collectible under Public Service Board rules and the amount does not exceed two-twelfths of the reasonable estimated charge for service for the ensuing twelve months. The company must be advised that the deposit is to be credited and refunded to the department in accordance with the company's usual refund policy and that deposit refunds inadvertently made to the recipient will not constitute settlement of the refund obligation to the Department.

A reconnection charge may be paid provided service has been interrupted and the amount charged is the same for all customers.

A new account charge may be paid provided the company is authorized by Public Service Board rules to collect a new account charge. A new account is generally defined as a request for service for the first time, a name change on a meter or a new meter as a result of a change location.

Some companies are authorized under Public Service Board rules to collect "deferred charges", "purchased energy charges", "temporary charges" and similar charges. Some of these "charges" may appear as credits on the bill during the period such "charge" is incurred. Even though these charges may appear as credits (and are not technically due) they must be included in the GA payment if they were incurred during the period being approved.

Charges for either purchase or rental of equipment, appliances, space or water heaters, outdoor lighting, or installation, service, and repair charges shall not be paid by General Assistance except as authorized specifically in other sections of the manual.

Fuel and Utilities

2657.2 Bulk Delivery

Payment may be authorized only when:

- A. There is less than a 72 hour supply on hand; or less than 1 weeks supply when in the workers judgment authorization would eliminate extra delivery costs, conform with the regular delivery schedule for the area, or prevent fuel from running out on a weekend or holiday; or when the applicant's primary heating fuel is wood, less than 2 weeks supply on hand if in the workers judgment the applicant will not have means to replenish the supply before it is exhausted; or such other expansions of these limits as the Commissioner may order on a case by case, area by area, or individual fuel type basis in the event of local shortage or extended delivery period requirements; and
- B. The provider will not deliver unless payment for the delivery is received in full; and
- C. The amount to be authorized does not exceed a normal one-week supply or the minimum amount the provider will deliver; and
- D. Delivery is made in the name of the applicant or applicant's spouse, or in the name of another individual living with the applicant; and
- E. The applicant meets regular General Assistance eligibility criteria or qualifies for exception under catastrophic situation criteria (rule 2620).

Payment shall not be authorized for charges for: previous deliveries; deposits for any item or reason; a new account charge; purchase or rental of storage tanks or containers, space or water heaters, furnaces, equipment or appliance, or installation, service, cleaning and repair charges except as specifically authorized under other sections of this manual.

Except in unusual circumstances, the volume and amount charged, and delivery time and date, must be established through the provider in advance of the transaction. Charges for off-hour or off-schedule delivery are allowable only when permitted under Vermont law and applicable PSB regulations and the amount charged is the same for all customers. Every effort should be made to avoid these charges whenever possible.

Medical Care

2660 Medical Care

The types of medical care covered for applicants meeting the eligibility criteria in rules 2620, 2621, and 2623 for eligibility due to a catastrophic situation and the general eligibility criteria in rules 2604 and 2605 are limited to:

- physician services (as further limited in rule 2661),
- dental services, (as further limited in rule 2662),
- vision services and items (as further limited in rule 2663),
- prescription drugs (as specified in rule 2664),
- medical supplies (as defined and further limited in rule 2665),
- durable medical equipment (as defined and further limited in rule 2666), and
- ambulance transportation (as further limited in rule 2667).

Other types of medical care (e.g., hospital services, other transportation, visiting nurses) and payment of premiums for private or government-sponsored health insurance are not covered. For purposes of GA rules, premium is defined as it is defined in Vermont Medicaid rules. Premium means a nonrefundable charge that must be paid by an applicant or beneficiary as a condition of initial and ongoing enrollment for health insurance. Routine examinations and treatment are not covered by GA because they do not address emergency medical needs.

For applicants who are beneficiaries under Medicaid, VHAP or another government-sponsored health care coverage program, the prior authorization requirements for that program, if any, apply equally to coverage for medical care under GA. GA payment is limited to providers enrolled in the Medicaid program.

The department shall pay for medical care with GA only if application is made within the following time frames:

- before receipt of the care,
- up to 30 days after the original billing date for care received, or
- within 30 days from the notice date on denial of eligibility by Medicaid, VHAP, or other government-sponsored health care coverage for reasons other than those specified in rule

Medical Care

- 2620(D).

When application is made within 30 days from the notice date on denial of eligibility by Medicaid, VHAP, or other government-sponsored health care coverage for reasons other than those specified in rule 2620 (D), the application date for health care coverage shall be considered the application date for GA, and the GA application shall cover the full period during which the application for health care coverage was pending.

The department shall determine the applicants eligibility for GA payment of medical care based on the applicants circumstances on the date of application, not on the date the care is received.

Requests for payment from providers of medical care shall not be considered applications for GA.

2660.1 Payment for Medical Care

Eligibility workers shall issue vendor authorizations to eligible applicants. Vendor authorizations issued by the department must accompany provider bills for medical services other than prescription drugs. No GA payments shall be made, however, unless the requirements set forth in rules 2660-2667 are also met.

Payment to providers may not exceed the amount set forth in the fee schedule used in the Vermont Medicaid Program. Vermont law (33 V. S. A. §6501-6508) prohibits balance billing, which is charging or collecting from the recipient any amount in excess of the reasonable charge for the service, defined as the amount in the fee schedule.

Physician Services

2661 **Physician Services**

The following physician services are not covered by GA:

- cosmetic surgery,
- experimental surgery,
- sterilization,
- fertility services,
- acupuncture, and
- massage therapy.

Dental Services

2662 Dental Services

Covered dental services to relieve pain, bleeding, and infection are limited to:

- examinations;
- diagnostic radiographs of the symptomatic area;
- sedative fillings;
- therapeutic pulpotomy;
- extraction of infected and symptomatic teeth;
- incision and drainage of abscess; and
- minor procedures for the emergency palliative treatment of dental pain.

No payment shall be made for replacement of missing teeth or dentures.

Vision Services and Items

2663 **Vision Services and Items**

Eyeglass frames or lenses meeting an emergency medical need are covered only if purchased through the department's authorized supplier.

Prescription Drugs

2664 **Prescription Drugs**

To receive GA payment for prescription drugs, including over-the-counter drugs prescribed by a physician, providers are required to comply with the requirements of the departments pharmacy best practices and cost control program, as implemented through its pharmacy benefit manager. The program, designed to reduce the cost of providing prescription drugs while maintaining high quality in prescription drug therapies, includes a preferred list of covered prescription drugs identifying preferred choices within therapeutic classes for particular diseases and conditions and utilization review procedures.

No payment shall be made for drugs in drug classifications not covered by GA. Such drug classifications are not covered because none of the drugs in those classifications is ever appropriately prescribed to address an emergency medical need (rule 2623), in the departments judgment. GA payment shall be made for drugs in classifications other than those on the not-covered list, as long as they comply with the requirements of the pharmacy best practices and cost control program. These payments shall be made even if the likelihood of an emergency is small or the drug has not been prescribed to address an emergency need.

The department's list of drug classifications not covered by GA will be made available at the website for the Office of Vermont Health Access or in paper form upon request.

Payment shall not be authorized for items to be used in a hospital or nursing home.

Medical Supplies

2665 **Medical Supplies**

Medical supplies are nondurable items customarily used in conjunction with the care or treatment of a specific illness, injury, or disability.

Durable Medical Equipment

2666 Durable Medical Equipment

Durable medical equipment is equipment that arrests, alleviates, or retards a medical condition and is:

- used primarily and customarily to serve a medical purpose;
- able to withstand repeated use;
- generally not useful to a person in the absence of an illness, injury, or disability; and
- suitable for use in the home and in the community.

The following durable medical equipment is not covered by GA because it does not address emergency medical needs:

- air cleaners
- dehumidifiers
- patient lifts
- exercise equipment
- message devices
- speech teaching machines

The following durable items are not covered by GA to address an emergency medical need because they do not meet the definition of durable medical equipment:

- air conditioners
- heating plants
- elevators
- saunas
- bathroom scales

Durable Medical Equipment

- car seats not designed specifically for medical purposes
- equipment prescribed for education or vocational purposes
- toys
- whirlpool pumps

Ambulance Services

2667 Ambulance Services

Ambulance services that meet the definition of a medical emergency need may be covered. Transportation of a hospital inpatient to another facility for outpatient services is never a covered ambulance service because it is not an emergency medical need.

Burial Responsibility

2670 Burial Responsibility

When a person dies without sufficient known assets to pay for burial, a state institution, a town of domicile, or the department may be responsible for paying burial expenses.

A. Burials Paid by the Department

The department is responsible for paying the burial expenses of a person when the person:

1. died in Vermont or was a Vermont resident at the time of death regardless of the place of death,
2. died without sufficient known assets to pay for burial, and meets one of the following criteria:
 - a. was an honorably discharged veteran of any branch of the U. S. military forces;
 - b. was a recipient of assistance under one or more of the following programs:
 - Titles IV or XVI of the Social Security Act,
 - nursing home care under Title XIX of the Social Security Act,
 - state aid to the aged, blind or disabled; or
 - c. was a person who did not die in a state institution (B below).

All payments made by the department for burial expenses are subject to the limitations specified in rule 2674 and 2676.

B. Burials Paid by State Institutions

The state institution is responsible for the burial of a person who is without sufficient known assets to pay for burial and dies while an inmate of the state institution.

C. Burials Paid by Town of Domicile

The town is responsible for the burial of persons who die in their town of domicile, are without sufficient known assets, and do not qualify for burial paid by the department (see A 3 above). The department shall reimburse a town up to \$250.00 for burial expenses incurred.

Burial Arrangements

2671 Burial Arrangements

For purposes of rules 2670 through 2677, “burial” means the final disposition of human remains, including, interring or cremating a decedent and the ceremonies directly related to that cremation or interment at the gravesite. “Funeral” means the ceremonies prior to burial by interment, cremation, or other method.

The department shall make the decision on eligibility and level of payment; and shall be responsible for making the burial arrangements in situations where no relative, friend, or interested person is available. Unless the decedent or the decedent’s family has expressly requested an alternative arrangement, the decedent’s body shall be cremated. It is not the policy of the department to make bodies available for the advancement of anatomical science in those instances when no family or friends are known. Autopsies are performed only under regulations of the State pathologist, who pays related expenses.

Application for Burial

2672 Application for Burial

The department will cooperate with the funeral director, other agencies and persons to obtain information to determine in a specific instance whether or not the department will be responsible for all or part of the payment of burial expenses.

Burial Eligibility

2673 Burial Eligibility

Eligibility for department financial participation in burial expenses shall be approved when all of the following requirements are met:

- A. The Department for Children and Families is responsible under the provision of 33 VSA § 2301;
and
- B. Available resources of the deceased and the surviving spouse (rule 2675) are less than the maximum payment for burial expenses.

Payment of burial expenses shall not be issued until a full accounting of burial expenses and resources has been completed and the department has determined that the burial fulfills the provisions at rule 2676, Payment for Burial, and payments made will not exceed the maximum prescribed in procedures section P-2690.

Maximum Payment for Burial Expenses

2674 Maximum Payment for Burial Expenses

The department will pay no more than the maximum specified in Procedures at P-2690 for burial expenses for an eligible individual. If available resources of the deceased and the surviving spouse (rule 2675) equal or exceed the maximum payment, the department will not pay any burial expenses. This provision does not preclude the funeral director from accepting contributions from other individuals toward burial and funeral expenses.

Any change in the dollar amount specified in Procedures P-2690 for the Maximum Payment for Burial Expenses that represents an increase relative to the dollar amount that immediately precedes the change shall be carried out via a procedures change. Any change in the dollar amount specified in Procedures P-2690 for the Maximum Payment for Burial Expenses that represents a decrease relative to the dollar amount that immediately precedes the change shall be accomplished only by following the Administrative Procedures Act process for regulatory changes.

Resources, Burial

2675 Resources, Burial

Payment will be denied if the available resources of the deceased and surviving spouse equal or exceed the maximum payment for burial expenses. "Available resources" are "total resources" less a \$255 disregard.

The department representative will explore the existence and availability of all resources. Since many death benefits are negotiable by a surviving spouse or other individual, it is essential that a clear understanding exists that such benefits shall be deducted from the allowable expenses in accordance with the provisions for payment.

Liquid or available resources include, but are not limited to, the following: stocks, bonds, cash on hand or in a bank or other financial institution, lump sum death benefits, proceeds of life insurance policies, and employee death benefits. Such resources are available to pay burial expenses and must be treated in accordance with the section on provisions for payment. Available resources shall not include contributions that family, other than the deceased's spouse, or friends provide to the funeral director.

When the deceased individually owns real or personal property (other than the above), the value of which exceeds the total cost of burial, the request for burial payment shall be denied if there was no surviving spouse or dependent children residing with the deceased at the time of his or her death. If the value of such real or personal property does not exceed the total cost of burial, it shall be disregarded.

Payment for Burial

2676 Payment for Burial

Contributions from friends or relatives may be used to pay burial expenses not paid by the department, the deceased, or the surviving spouse.

Available resources of the deceased and surviving spouse shall be applied against those expenses for which the department would be responsible for the purpose of reducing the maximum payment for burial expenses. If the surviving spouse contributes all or some of the \$255 in excluded resources to burial expenses, the contribution shall not be applied against those expenses for which the department would be responsible.

Towns and funeral directors requesting reimbursement for burial expenses under Vermont law must do so on the appropriate departmental billing form. Reimbursement to a town is made on an "as paid" basis up to a maximum of \$250.00 for total burial expenses.

Payment Process, Burial

2677 Payment Process, Burial

Payment shall be authorized only when an itemized accounting of specific burial expenses that are to be provided at public expense is received at State Office on the appropriate billing form that includes the signatures of the funeral director and the party making the funeral arrangements.

Town Service Officer (TSO)

2680 Town Service Officer (TSO)

"On or before April 15 of each year the selection shall appoint a town service officer and notify the commissioner of their appointment. A town service officer may be appointed to serve more than one town. A selectman may be a town service officer. The commissioner shall give him a certificate of appointment and contract for his compensation. If the selectmen fail to appoint a town service officer any selectman may act in his behalf" (VSA § 3002.)

TSO Duties

2681 **TSO Duties**

The duties of town service officers are to receive applications for emergency General Assistance when the district welfare office is closed or when an immediate visit to the district office is impossible for the applicant. The town service officer may perform other duties under the welfare code as the commissioner may direct. The town service officers work under the direction of the District Director who will provide necessary training, forms, procedure material, and approval of compensation.

TSO Decisions

2682 TSO Decisions

Town service officers shall determine the eligibility of applicants by determining the applicant's available income and resources and establishing the applicant's need.

The applicant must furnish necessary information to determine eligibility and supply, or permit, appropriate verification. Applicants who have available income and/or resources equal to the amount of the emergency need are not eligible for payment.

An applicant does not have available income and/or resources may be granted payment for food, housing, fuel and utilities, emergency medical care, and other items, according to the limits set forth in the following subsections.

Town Service Officers are authorized to issue payments for up to 4 days. If the applicant will have needs beyond 4 days, the applicant should be advised to visit the district office. If it is impossible for such applicant to visit the district office within 4 days, the town service officer should contact the District Director so that satisfactory arrangements may be completed.

Town Service Officers may provide assistance only on a vendor authorization form (form 292). Town Service Officers will not be reimbursed for cash given to applicants.

2682.1 Groceries or Meals, TSO

If the applicant does not have available income and resources, and has a need for groceries, payment may be issued on a vendor authorization form (form 292) for the number of days until the district office is open, in the following amounts (payment for groceries may not be issued for more than 4 days):

Groceries

Groceries Allowance

No. of Days	1	2	3	4	5	6	7	8	9	10	For each add'l person
1	3.00	5.00	6.00	7.00	7.00	8.00	9.00	10.00	10.00	10.00	1.00
2	3.00	5.00	7.00	8.00	10.00	11.00	13.00	15.00	16.00	18.00	2.00
3	4.50	7.50	10.50	12.00	15.00	16.50	19.50	22.50	24.00	27.00	3.00
4	6.00	10.00	14.00	16.00	20.00	22.00	26.00	30.00	32.00	36.00	4.00

TSO Decisions

2682.2 Housing, TSO

The town service officer shall not issue payment for housing if the applicant has housing accommodations which can be maintained until the district office is open, even if payment for such an accommodation is due.

If, however, the applicant does not have available income and resources, and is actually without a housing accommodation, payment may be authorized on a vendor authorization form (form 292) in an amount necessary to secure housing until the district office is open. Payment shall not be issued for housing for more than 4 days.

2682.3 Fuel and Utilities, TSO

The town service officer shall not issue payment for fuel or utilities if the applicant has a sufficient supply to last until the district office is open.

Payment may be issued if the applicant does not have available income and resources or credit, and:

- is without fuel or utilities,
- does not have sufficient supply on hand to last until the district office is open,
- has or will have metered service disconnected while the district office is closed.

The amount to be issued should be sufficient to last until applicant can visit the district office, or the minimum necessary to maintain continued metered service. Payment shall not be authorized if the provider will extend credit to the applicant.

Payment may be authorized on a vendor authorization form (form 292) in the necessary amount.

2682.4 Emergency Medical Care, TSO

If the applicant does not have available income and resources or credit, payment may be issued for emergency medical care or for a prescription which must be filled immediately.

Payment may be made on a vendor authorization form (form 292) in the amount necessary. If the amount cannot be determined, write "According to Medicaid Fee Schedule" on Vendor authorization form (form 292).

TSO Decisions

2682.5 Other Items, TSO

From time to time, applicants may request other items such as transient transportation, etc. "Other items" may be approved only if, in the judgement of the town service officer, such item needed is required immediately and a decision must be made before the district office will be open. If a town service officer approves "other items", payment should be made at the lowest available cost on a vendor authorization form (form 292), and a notation made on the issuance report (form 291G) specifying the reason(s) for the decision.

TSO Compensation

2683 **TSO Compensation**

A. Time

Town Service Officers will be compensated for time and personal expenses as contracted with the Commissioner under authorization of 33 VSA § 3002.2

VERMONT **GENERAL ASSEMBLY**

The Vermont Statutes Online

The Statutes below include the actions of the 2024 session of the General Assembly.

NOTE: The Vermont Statutes Online is an unofficial copy of the Vermont Statutes Annotated that is provided as a convenience.

Title 3 : Executive

Chapter 025 : Administrative Procedure

Subchapter 001 : GENERAL PROVISIONS

(Cite as: 3 V.S.A. § 801)

§ 801. Short title and definitions

(a) This chapter may be cited as the “Vermont Administrative Procedure Act.”

(b) As used in this chapter:

(1) “Agency” means a State board, commission, department, agency, or other entity or officer of State government, other than the Legislature, the courts, the Commander in Chief, and the Military Department, authorized by law to make rules or to determine contested cases.

(2) “Contested case” means a proceeding, including but not restricted to rate-making and licensing, in which the legal rights, duties, or privileges of a party are required by law to be determined by an agency after an opportunity for hearing.

(3) “License” includes the whole or part of any agency permit, certificate, approval, registration, charter, or similar form of permission required by law.

(4) “Licensing” includes the agency process respecting the grant, denial, renewal, revocation, suspension, annulment, withdrawal, or amendment of a license.

(5) “Party” means each person or agency named or admitted as a party, or properly seeking and entitled as of right to be admitted as a party.

(6) “Person” means any individual, partnership, corporation, association, governmental subdivision, or public or private organization of any character other than an agency.

(7) “Practice” means a substantive or procedural requirement of an agency, affecting one or more persons who are not employees of the agency, that is used by the agency in the discharge of its powers and duties. The term includes all such requirements, regardless of whether they are stated in writing.

(8) "Procedure" means a practice that has been adopted in writing, either at the election of the agency or as the result of a request under subsection 831(b) of this title. The term includes any practice of any agency that has been adopted in writing, whether or not labeled as a procedure, except for each of the following:

(A) a rule adopted under sections 836-844 of this title;

(B) a written document issued in a contested case that imposes substantive or procedural requirements on the parties to the case;

(C) a statement that concerns only:

(i) the internal management of an agency and does not affect private rights or procedures available to the public;

(ii) the internal management of facilities that are secured for the safety of the public and the individuals residing within them; or

(iii) guidance regarding the safety or security of the staff of an agency or its designated service providers or of individuals being provided services by the agency or such a provider;

(D) an intergovernmental or interagency memorandum, directive, or communication that does not affect private rights or procedures available to the public;

(E) an opinion of the Attorney General; or

(F) a statement that establishes criteria or guidelines to be used by the staff of an agency in performing audits, investigations, or inspections, in settling commercial disputes or negotiating commercial arrangements, or in the defense, prosecution, or settlement of cases, if disclosure of the criteria or guidelines would compromise an investigation or the health and safety of an employee or member of the public, enable law violators to avoid detection, facilitate disregard of requirements imposed by law, or give a clearly improper advantage to persons that are in an adverse position to the State.

(9) "Rule" means each agency statement of general applicability that implements, interprets, or prescribes law or policy and that has been adopted in the manner provided by sections 836-844 of this title.

(10) "Incorporation by reference" means the use of language in the text of a regulation that expressly refers to a document other than the regulation itself.

(11) "Adopting authority" means, for agencies that are attached to the Agencies of Administration, of Commerce and Community Development, of Natural Resources, of Human Services, and of Transportation, or any of their components, the secretaries of those agencies; for agencies attached to other departments or any of their components, the commissioners of those departments; and for other agencies, the chief officer of the agency. However, for the procedural rules of boards with quasi-judicial powers, for the Transportation Board, for the Vermont Veterans' Memorial Cemetery Advisory Board,

and for the Fish and Wildlife Board, the chair or executive secretary of the board shall be the adopting authority. The Secretary of State shall be the adopting authority for the Office of Professional Regulation.

(12) "Small business" means a business employing no more than 20 full-time employees.

(13)(A) "Arbitrary," when applied to an agency rule or action, means that one or more of the following apply:

(i) There is no factual basis for the decision made by the agency.

(ii) The decision made by the agency is not rationally connected to the factual basis asserted for the decision.

(iii) The decision made by the agency would not make sense to a reasonable person.

(B) The General Assembly intends that this definition be applied in accordance with the Vermont Supreme Court's application of "arbitrary" in *Beyers v. Water Resources Board*, 2006 VT 65, and *In re Town of Sherburne*, 154 Vt. 596 (1990).

(14) "Guidance document" means a written record that has not been adopted in accordance with sections 836-844 of this title and that is issued by an agency to assist the public by providing an agency's current approach to or interpretation of law or describing how and when an agency will exercise discretionary functions. The term does not include the documents described in subdivisions (8)(A) through (F) of this section.

(15) "Index" means a searchable list of entries that contains subjects and titles with page numbers, hyperlinks, or other connections that link each entry to the text or document to which it refers. (Added 1967, No. 360 (Adj. Sess.), § 1, eff. July 1, 1969; amended 1981, No. 82, § 1; 1983, No. 158 (Adj. Sess.), eff. April 13, 1984; 1985, No. 56, § 1; 1985, No. 269 (Adj. Sess.), § 4; 1987, No. 76, § 18; 1989, No. 69, § 2, eff. May 27, 1989; 1989, No. 250 (Adj. Sess.), § 88; 2001, No. 149 (Adj. Sess.), § 46, eff. June 27, 2002; 2017, No. 113 (Adj. Sess.), § 3; 2017, No. 156 (Adj. Sess.), § 2.)

VERMONT **GENERAL ASSEMBLY**

The Vermont Statutes Online

The Statutes below include the actions of the 2024 session of the General Assembly.

NOTE: The Vermont Statutes Online is an unofficial copy of the Vermont Statutes Annotated that is provided as a convenience.

Title 33 : Human Services

Chapter 001 : Department for Children and Families

Subchapter 001 : POLICY, ORGANIZATION, POWERS, AND DUTIES

(Cite as: 33 V.S.A. § 105)

§ 105. Commissioner; appointment, term, duties, and powers

(a) The Commissioner may exercise the powers and perform duties required for effective administration of the Department, and he or she shall determine the policies of the Department.

(b) In addition to other duties imposed by law, the Commissioner shall:

(1) administer the laws assigned to the Department;

(2) fix standards and adopt rules necessary to administer those laws and for the custody and preservation of records of the Department;

(3) appoint all necessary assistants, prescribe their duties, and adopt rules necessary to ensure that the assistants shall hold merit system status while in the employ of the Department, unless otherwise specifically provided by law.

(c) The Commissioner or the Governor, whenever the federal law so provides, may cooperate with the federal government in providing relief and work relief and community work and training programs in the State.

(d) The Commissioner, with the approval of the Attorney General, may enter into reciprocal agreements with social and child welfare agencies in other states in matters relating to social welfare, children, and families.

(e) The Commissioner shall ensure the provision of services to children and adolescents with a severe emotional disturbance in coordination with the Secretary of Education and the Commissioners of Mental Health and of Disabilities, Aging, and Independent Living in accordance with the provisions of chapter 43 of this title.

(f) Notwithstanding any other provision of law, the Commissioner may delegate to any appropriate employee of the Department any of the administrative duties and powers

imposed on him or her by law, with the exception of the duties and powers enumerated in this section. The delegation of authority and responsibility shall not relieve the Commissioner of accountability for the proper administration of the Department.

(g) The Commissioner may publicly disclose findings or information about any case of child abuse or neglect that has resulted in the fatality or near fatality of a child, including information obtained under chapter 49 of this title, unless the State's Attorney or Attorney General who is investigating or prosecuting any matter related to the fatality requests the Commissioner to withhold disclosure, in which case the Commissioner shall not disclose any information until completion of any criminal proceedings related to the fatality or until the State's Attorney or Attorney General consents to disclosure, whichever occurs earlier. (Added 1967, No. 147, § 1; amended 1973, No. 101, § 6; 1983, No. 175 (Adj. Sess.); 2013, No. 131 (Adj. Sess.), § 6, eff. May 20, 2014; 2015, No. 29, § 11; 2021, No. 20, § 273.)



Proposed Rules Postings

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Deadline For Public Comment

Deadline: Nov 01, 2024

The deadline for public comment has expired. Contact the agency or primary contact person listed below for assistance.

Rule Details

Rule Number:	24P042
Title:	General Assistance Emergency Housing Assistance Rules.
Type:	Standard
Status:	Final Proposed
Agency:	Department for Children and Families, Agency of Human Services
Legal Authority:	3 V.S.A. § 801(b)(11); 33 V.S.A. § 105(b)(2)
Summary:	The proposed rule contains five amendments to the General Assistance program rules: (1) language regarding notices to terminate tenancy was added to the definition of constructive eviction in rule 2622;

(2) language was added to rule 2650 authorizing DCF to withhold payments to hotels/motels in violation of lodging licensing rules; (3) the catastrophic and vulnerable populations eligibility categories in rules 2652.2 and 2652.3 have been replaced with the new eligibility criteria set forth in sec. E.321 of Act 113 of 2024; (4) the rule updates the basic needs standard chart in rule 2652.4 to align with the current Reach Up basic needs dollar amounts; and (5) the methodology for calculating the 30 income contribution in rule 2652.4 was changed from using the least expensive daily motel rate to either the current daily rate at the motel in which the temporary housing applicant is staying or if the applicant is not currently housed in a motel, the average daily rate.

Persons Affected:

Households applying for General Assistance emergency housing assistance; the Department for Children and Families; motels/hotels serving General Assistance clients; and shelters and organizations serving unhoused populations.

Economic Impact:

The Department estimates that the total cost of providing emergency housing assistance in hotel and motel rooms for fiscal year 2025, based on the criteria in the rule, is approximately \$45,146,513. This includes: (1) an approximated cost for hotel and motel rooms of \$39,439,879; (2)\$5,206,634 in administrative expenses; and (3) \$500,000 in security expenses. An additional \$10,000,000 is appropriated to the Department for grants to housing organizations to increase shelter capacity and permanent supportive housing. Economic impacts on other parties include: (1) 80 days of emergency housing assistance for eligible households during the months of July 1 through November 30 and April 1 through June 30. About 500 additional households will be eligible for assistance when the 80-day limit and 1,100 room cap are lifted from the months of December through March; and (2) Motel and hotels will be paid for each room occupied by an emergency housing assistance household.

Posting date:

Sep 18,2024

Hearing Information

Information for Hearing # 1

Hearing date: 10-25-2024 10:00 AM [ADD TO YOUR CALENDAR](#)

Location: St. Leo's Hall
Address: 109 South Main Street
City: Waterbury
State: VT
Zip: 05671
Hearing
Notes:

Information for Hearing # 2

Hearing date: 10-25-2024 10:00 AM [ADD TO YOUR CALENDAR](#)

Location: Virtually via MS Teams

Address: https://teams.microsoft.com/l/meetup-join/193ameeting_MjNhOTdjNDYtNTkxMy00YWQ4LTg0MDQtYTQxNzkzZWY4YWNm40thread.v2/0?context7b22Tid223a2220b4933b-baad-433c-9c02-70edcc7559c6222c22Oid223a22a7972903-b22b-48ab-91f0-1282d59b4a10227d

City: n/a
State: VT
Zip: n/a

Hearing Notes: Virtually via MS Teams at: https://teams.microsoft.com/l/meetup-join/193ameeting_MjNhOTdjNDYtNTkxMy00YWQ4LTg0MDQtYTQxNzkzZWY4YWNm40thread.v2/0?context7b22Tid223a2220b4933b-baad-433c-9c02-70edcc7559c6222c22Oid223a22a7972903-b22b-48ab-91f0-1282d59b4a10227d

Contact Information

Information for Primary Contact

PRIMARY CONTACT PERSON - A PERSON WHO IS ABLE TO ANSWER QUESTIONS ABOUT THE CONTENT OF THE RULE.

Level: Primary
Name: Heidi Moreau
Agency: Department for Children and Families, Agency of Human Services
Address: 280 State Drive, NOB 1 North
City: Waterbury
State: VT
Zip: 05671
Telephone: 802-595-9639
Fax:
Email: heidi.moreau@vermont.gov

[SEND A COMMENT](#)

Website Address: <https://dcf.vermont.gov/esd/laws-rules/proposed>

[VIEW WEBSITE](#)

Information for Secondary Contact

SECONDARY CONTACT PERSON - A SPECIFIC PERSON FROM WHOM COPIES OF FILINGS MAY BE REQUESTED OR WHO MAY ANSWER QUESTIONS ABOUT FORMS SUBMITTED FOR FILING IF DIFFERENT FROM THE PRIMARY CONTACT PERSON.

Level: Secondary
Name: Amanda Beliveau
Agency: Department for Children and Families, Agency of Human Services
Address: 280 State Drive, HC 1 South
City: Waterbury
State: VT
Zip: 05671
Telephone: 802-241-0641
Fax:
Email: amanda.beliveau@vermont.gov

[SEND A COMMENT](#)

Keyword Information

Keywords:

General Assistance
GA
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	Times Argus & Rutland Herald Classified Ads (classified.ads@rutlandherald.com)	Tel: 802-747-6121 ext 2238 FAX: 802-776-5600
	The Valley News (advertising@vnews.com)	Tel: 603-298-8711 FAX: 603-298-0212
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	The Islander (islander@vermontislander.com)	Tel: 802-372-5600 FAX: 802-372-3025
	Vermont Lawyer (hunter.press.vermont@gmail.com)	Attn: Will Hunter

FROM: APA Coordinator, VSARA

Date of Fax: September 22, 2024

RE: The "Proposed State Rules " ad copy to run on

September 26, 2024

PAGES INCLUDING THIS COVER MEMO:

3

***NOTE* 8-pt font in body. 12-pt font max. for headings - single space body. Please include dashed lines where they appear in ad copy. Otherwise minimize the use of white space. Exceptions require written approval.**

If you have questions, or if the printing schedule of your paper is disrupted by holiday etc. please contact VSARA at 802-828-3700, or E-Mail sos.statutoryfilings@vermont.gov, Thanks.

PROPOSED STATE RULES

By law, public notice of proposed rules must be given by publication in newspapers of record. The purpose of these notices is to give the public a chance to respond to the proposals. The public notices for administrative rules are now also available online at <https://secure.vermont.gov/SOS/rules/> . The law requires an agency to hold a public hearing on a proposed rule, if requested to do so in writing by 25 persons or an association having at least 25 members.

To make special arrangements for individuals with disabilities or special needs please call or write the contact person listed below as soon as possible.

To obtain further information concerning any scheduled hearing(s), obtain copies of proposed rule(s) or submit comments regarding proposed rule(s), please call or write the contact person listed below. You may also submit comments in writing to the Legislative Committee on Administrative Rules, State House, Montpelier, Vermont 05602 (802-828-2231).

Note: The four rules below have been promulgated by the Agency of Human Services who has requested the notices be combined to facilitate a savings for the agency. When contacting the agency about these rules please note the title and rule number of the rule(s) you are interested in.

- Dental Services
Vermont Proposed Rule: **24P036**
- Dental Services for Beneficiaries Under Age 21, and Pregnant and Postpartum Women
Vermont Proposed Rule: **24P037**
- Medical and Surgical Services of a Dentist
Vermont Proposed Rule: **24P038**
- Orthodontic Treatment
Vermont Proposed Rule: **24P039**

AGENCY: Agency of Human Services

CONCISE SUMMARY: These proposed rules set forth the criteria for coverage and service delivery for Health Care Administrative Rules (HCAR) for Dental Services under Vermont's Medicaid program. These rules are being combined into one rule for dental services. The revisions are designed to improve public accessibility and comprehension of the rules concerning the operation of Vermont's Medicaid program.

FOR FURTHER INFORMATION, CONTACT: Ashley Berliner Agency of Human Services 280 State Drive Waterbury, VT 05671-1000 Tel: 802-578-9305 Fax: 802-241-0450 E-Mail: ashley.berliner@vermont.gov
URL: <https://humanservices.vermont.gov/rules-policies/health-care-rules>.

FOR COPIES, CONTACT: Susan Coburn, Agency of Human Services 280 State Drive, Waterbury, VT 05671-1000 Tel: 802-578-9412 Fax: 802-241-0450 Email: Susan.Coburn@vermont.gov.

Chiropractic Services.

Vermont Proposed Rule: 24P040

AGENCY: Agency of Human Services

CONCISE SUMMARY: This rule sets forth the criteria for coverage of chiropractic services under Vermont's

Medicaid program. It amends current Health Care Administrative Rule 3.101 titled "Chiropractic Services". Amendments include updating the prior authorization requirements, clarifying terms that were not previously defined, and specifying services that are not covered.

FOR FURTHER INFORMATION, CONTACT: Ashley Berliner, Agency of Human Services, 280 State Drive, Waterbury, VT 05671-1000 Tel: 802-578-9305 Fax: 802-241-0450 Email: Ashley.Berliner@vermont.gov URL: <https://humanservices.vermont.gov/rules-polies/health-care-rules/health-care-administrative-rules-hcar>.

FOR COPIES: Susan Coburn, Agency of Human Services 280 State Drive, Waterbury, VT 05671-1000 Tel: 802-578-9412 Fax: 802-241-0450 Email: Susan.Coburn@vermont.gov.

Administrative Rules for Notaries Public.

Vermont Proposed Rule: 24P041

AGENCY: Secretary of State, Office of Professional Regulation

CONCISE SUMMARY: These rules create standards for issuing commissions as well as special endorsements to notaries public to perform notarial acts on electronic records and for remotely located individuals. The standards specify acceptable methods for performing notarial acts, including identification of individuals, personal appearance, completion of the notarial certificate, remote notarization, and recording notarial acts.

FOR FURTHER INFORMATION, CONTACT: Jennifer Colin, Esq. Office of Professional Regulation, 89 Main St., 3rd Fl., Montpelier, VT 05602 Tel: 802-828-1505 Email: jennifer.colin@vermont.gov URL: <https://sos.vermont.gov/notaries-public/statutes-rules-resources/>.

FOR COPIES: Gina Hruban, Office of Professional Regulation, 89 Main St., 3rd Fl., Montpelier, VT 05602 Tel: 802-828-1505 Email: gina.hruban@vermont.gov.

General Assistance Emergency Housing Assistance Rules.

Vermont Proposed Rule: 24P042

AGENCY: Agency of Human Services, Department for Children and Families

CONCISE SUMMARY: The proposed rule contains five amendments to the General Assistance program rules: (1) language regarding notices to terminate tenancy was added to the definition of constructive eviction in rule 2622; (2) language was added to rule 2650 authorizing DCF to withhold payments to hotels/motels in violation of lodging licensing rules; (3) the catastrophic and vulnerable populations eligibility categories in rules 2652.2 and 2652.3 have been replaced with the new eligibility criteria set forth in sec. E.321 of Act 113 of 2024; (4) the rule updates the basic needs standard chart in rule 2652.4 to align with the current Reach Up basic needs dollar amounts; and (5) the methodology for calculating the 30% income contribution in rule 2652.4 was changed from using the least expensive daily motel rate to either the current daily rate at the motel in which the temporary housing applicant is staying or if the applicant is not currently housed in a motel, the average daily rate.

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