

EMERGENCY FINANCIAL ASSISTANCE

Service Category Description

Emergency financial assistance is the provision of short-term payments to agencies or establishment of voucher programs to assist with emergency expenses related to essential utilities, housing, food (including groceries, food vouchers, and food stamps), and medication when other resources are not available.

Unit of Service: 1 Unit = Any assistance request (including denied requests)

Requirement	Indicator	Data Source
<p>Participant eligibility is based on income level.</p> <p>Participants between 0-125% of Federal Poverty Level (FPL) are eligible for financial and housing assistance not exceed \$800 for the current fiscal year. Of this amount up to \$400 maximum may be used for hotel stays.</p> <p>Participants between 126-185% of FPL are eligible for financial and housing assistance not to exceed \$400 dollars for current fiscal year. Of this amount up to \$400 maximum may be used for hotel stays.</p> <p>Important Note: The \$400 maximum for hotel stays under both FPL Tiers is NOT additional funds; it is simply the maximum amount available for that benefit.</p> <p>The following restrictions and procedures apply:</p>	Phone: \$35/monthly maximum, current bill only	Participant's file contains a copy of the bill.
	Water: amount of current billing cycle only	Participant's file contains a copy of the bill.
	Utilities: current service only	Participant's file contains a copy of the bill.
	Medical: Can pay co-pays on meds and doctor's visits, can't be in collections.	Participant's file contains a copy of the bill.
	Insurance: Medical insurance premiums	Participant's file contains a copy of the bill.
	Hotel Stays: One week maximum	Participant's file contains a copy of the bill.

Requirement	Indicator	Data Source
	No clothing covered	Participant's file contains no reimbursement for clothing.
Providers will have structured procedures for participants to gain assistance, deny requests and handle inappropriate use of funds.	The participant requesting assistance should provide information as to the purpose of the assistance, a copy of the bill to be paid, identifying the specific item and vendor to be paid. The participant should supply to the case manager the cause of the shortfall as well as a plan of action to ensure that the situation does not become an ongoing process in which the participant can never recover.	Participant's file shows adherence to the provider's procedures and Emergency Financial Standards.
	Medical Case Manager will update the participant's service plan to include goals and objectives to stabilize the participants Income and/or household budgeting.	Participant's file contains an updated Service Plan with Income and/or appropriate budgeting goals and objectives.
	If a participant's request is denied, the participant should be given the opportunity to appeal to the respective case management provider. The reconsideration should be based on the broader appeal guidelines that apply to all provider activities in relation to direct participant service provision.	Participant's file shows adherence to the provider's procedures and Emergency Financial Standards.

Requirement	Indicator	Data Source
	Case management agencies have the opportunity to appeal single payer decisions.	Provider's policies and procedures outline the appeal procedures.
	If a participant is suspended from services due to misrepresentation of expenses or income or fraudulent behavior, any case management provider can suspend that participant, give a timeframe for the suspension, report the suspension and timeframe to the single payer, and the suspension will be honored across all case management agencies.	Participant's file shows adherence to the provider's procedures and Emergency Financial Standards.
Distributed checks must insure that needs are met and limit possibilities of fraud.	Checks for emergency financial assistance will be issued by the contracted single payer provider.	Participant's file contains a copy of the check issued by the single payer provider.
	Checks will be issued to the vendor. Checks cannot be payable or issued to participants.	Participant's file contains a copy of the properly written check
	A copy of the check is placed in the participant's file.	Participant's file contains a copy of the check
	Approved check request will be completed within 3 working days from the referral from agencies.	Participant's file demonstrates that the check request was completed in a timely manner.