

TANF and TA-DVS

Computer Coding for Domestic Violence Cases

TA-DVS Program Coding:

Program Code:

E2 - If open case, use existing program code (e.g. **2, 82, M5, P2**).



Case Descriptors:

When added as an **E2** case, the **NCP** (no cash pay) and **NID** (no medical ID) case descriptors are required.

Use a **WDV** (Waived DV Citizenship) case descriptor on all program 2 and 82 cases where citizenship requirements are being waived due to domestic violence. Add the case descriptor to each person that you're waiving citizenship requirements for. Change in-grant code to "AD" or "CH". Remove the **WDV** descriptor when citizenship requirements are no longer being waived and change in-grant code to "NO".

Need/Resource Code: DVS - (only code the payee)

For the need/resource date, use the first month of DVS eligibility. (Code the month/year (01 07 = January 2007))The eligibility period begins the date the client clears eligibility, not the date of the first payment. The date will remain on the system. If you need to remove it or change it, you must do so manually.

If there is a subsequent eligibility period, the date needs to be changed to the beginning month of the new eligibility period. *Remember to call central office if the client is applying for a second or subsequent eligibility period within 12 months (503) 945-5600.*

Program benefits issued through Special Pay:

Before issuing the payment, code CMS (as described above). Issue TA-DVS program benefits by 437 (special pay process) using pay reason code **22** for domestic violence unless payments are for medical issues or to ineligible non-citizens (see below). Make checks dual payee or vendor whenever possible. (If it's not possible...narrate reason in TRACS)

If benefits are being issued for TA-DVS medical related payments use **2M** pay reason code and for TA-DVS payments to ineligible non-citizen use **2N** pay reason code.

Closure and denial codes for TA-DVS:

- Use either TANF closure/denial codes or the following TA-DVS specific codes:
 - **VE** – no emergent need (safety concern)
 - **VM** – closed due to reconciliation with abuser
 - **VS** – Doesn't meet definition of domestic violence
 - **VW** – Waiver removed
 - **VN** – 90 Eligibility period has expired

Both TA-DVS and TANF require Case Plans for clients:

Use the DV Assistance Agreement - DVAA (DHS 1543) or the PDP & DVAA TRACS Narrative Supplement

***Use the TRACS narrative** unless there are concerns about abusers ability to access case narrative. (e.g. the abuser is: in the household, a DHS employee, in law enforcement, etc.)

- The **TRACS TA-DVS Eligibility & Assessment Addendum** is available as an optional use tool. If used, it is considered part of the narrative. The addendum has two parts. Part 1 is a quick reference guide for TA-DVS assessment & eligibility. Part 2 is a more extensive guided assessment & eligibility tool. The information gathered can be used in development of the Domestic Violence Assistance Agreement (DVAA) but can not be used in lieu of the DVAA.

***STEPS:** Use DV step for DV intervention related activities on TRACS. Code other plan (PDP) activities as appropriate.

***Support Services:** Identify support service needs for transportation, child care, etc. to support completion of the plan. Support service payments are available for both TANF cases and stand alone TA-DVS cases.

***Waiving requirements:** Waive TANF/TA-DVS when there is a further risk of domestic violence. Indicate on Plan page under "**Dom Viol:**" what type of requirement was waived. If no program requirements are waived use "No" code.

Examples under waiver codes:

- *Financial* - abuser income, income used to flee;
- *Non-Financial* - being in last month of pregnancy; child not currently in HH; citizenship requirements
- *Work and JOBS* - unable to fully participate due to DV issues, site is

unsafe;

- *Penalties* - JOBS disqualification, Child Support penalties, overpayments;
- *Time-limits* - related to Federal TANF time limits.

Note: If you are waiving TANF state time-limits use the time limit needs/resource code TLD on UCMS.

Waivers must be reviewed at a minimum of every six months to determine if they are still appropriate.

You can not waive Food Stamp or Medical requirements.

Good Cause for non-cooperation with Child Support:

If good cause is requested code the PCMS screen of absent parent with “A, B, C, or M” next to GOOD CAUSE. DCS will not pursue child support or medical support if there is any entry in this field. If client requests an address of record or claim of risk, DCS enters that information on SJ7F. Have the client complete the appropriate forms in the 8660 Safety Packet and return them to DCS. Enter “Good Cause” until DCS has received the information related to Address of Record (AOR) or Claim of Risk (COR). You need to remove the “Good Cause” coding once you have verified DCS has received the COR or AOR.

If the absent parent has medical coverage and it’s unsafe to pursue it. Code Good Cause on the PCMS screen of the absent parent and send a 415H to the Health Insurance Groups (HIG) with Domestic Violence noted in the comment section.

Note: On page 7 of the 415F there is a question asking if pursuing health insurance would put the adult or children’s safety at risk. If this is marked yes... note on HIG form (415H).

Other Important Information:

1. In rare cases we may need to use an alternate identify for a client fleeing domestic violence, if this becomes necessary, remember to staff the case with your Operations Manager before entering information on the computer. If you have questions about coding these cases, contact Lisa Stegmann at (503) 945-6725.
2. If there are safety concerns around using the social security number, if the client’s citizenship requirements are waived due to domestic violence, or if the client is applying for a new social security number, leave the Social

Security Number field blank on UCMS.

3. For Food Stamps use a T-Number (remember, you can't waive citizenship status for Food Stamps or medical).
4. Effective January 2007, if a client presents you with an *Address Confidentiality Program* (AC) participant identification card put the P.O. Box in CMS/FSMS. The system will enter "Do not disclose" in the resident address. Secure address information in the hard file in an envelope marked confidential.
 - o For medical plan enrollment you will need to ask Health Maintenance Unit for an exemption either by calling or e-mailing the following information: Case number; prime numbers for all individuals; and what managed care plan they are choosing. HMU will do a manual override to enroll the client in the appropriate plan. You will need to call HMU if the client discontinues use of the ACP.
 - o An additional 5 days will need to be added for notices requiring 10 days or less for service.

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