Low-Income Home Energy Assistance Program (LIHEAP)
&
Oregon Energy Assistance Program (OEAP)

INTAKE
OPERATIONS MANUAL
PROGRAM YEAR
2023
Oregon Housing and Community Services (OHCS)

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ENERGY ASSISTANCE PROGRAMS
Intake Operations Manual

Introduction:

Oregon Housing and Community Services (OHCS) administers two energy assistance programs; the federally funded Low-Income Home Energy Assistance Program (LIHEAP) and the ratepayer-funded Oregon Energy Assistance Program (OEAP). Neither of these programs are entitlement programs.

The Energy Assistance Intake Operations Manual establishes operating policies and procedures that govern both programs. The purpose of this manual is to provide detailed information and instructions for the administration of LIHEAP and OEAP. Please note that this Operations Manual is not a compilation of best practices or suggestions and the requirements contained within it are not optional.

LIHEAP provides home energy assistance to low-income Oregonians, especially households with the lowest incomes and the highest home energy need in relation to income. The purpose of this program is to supplement home heating and cooling costs. LIHEAP is a fuel blind energy assistance program provided on a first come first served basis. The LIHEAP program includes bill payment assistance, heating or cooling equipment repair and replacement, and energy education.

OEAP is a low-income electric bill payment assistance program funded by and for customers of Pacific Power and Portland General Electric. The purpose of this fund is to effectively reduce service disconnections to those customers. The statute requires that priority assistance be directed to customers who are in danger of having their electricity service disconnected.

OHCS recognizes that flexibility is necessary to meet the unique needs of each community across our state. It is critical that energy assistance coordinators and staff balance the requirements of this manual with the innovation necessary to move low-income Oregonians toward energy independence.

While the policies and procedures included in this manual are rules for determining eligibility, delivering benefits, and administering the programs, it is impossible to foresee and give examples for all situations; therefore, you are encouraged to use reason and apply good judgment in making decisions when rare and unusual situations are encountered. Decision-making based on the best information available, common sense, program knowledge, experience, and expertise in a particular situation is sometimes referred to as the Prudent Person Principle. Document the rationale used to make a decision along with any applicable Policy Manual references and policy interpretations.

This manual is the result of years of collaboration between OHCS and volunteer representatives from the state-wide network of energy assistance coordinators and intake staff, as well as ongoing discussions at the Oregon Energy Coordinators Association (OECA) Roundtables and the annual state-wide energy assistance meetings. Thanks to years of hard and often tedious work by the members of the manual committee, we now have a template to move us into the future.
SECTION ONE: APPLICATION PROCESS

This Section contains:
✓ Confidentiality
✓ Preliminary Household Assessment
✓ Verification of Identification
✓ During the Intake
✓ Avoiding Duplicate Applications
✓ Using Mail-In/Hard Copy Applications
✓ Energy Assistance Program Authorization Form
✓ ENERGY/WEATHERIZATION ASSISTANCE APPLICATION—Required Language for Applications
✓ Distribution of Authorization Copies
✓ Completed Files
✓ Pending Applications
✓ Denied Applications
✓ Voided Applications
✓ Data Entry of Forms
✓ Unusual Eligibility Situations
✓ Fraud and Determination of Fraud
✓ Identify Theft
✓ Declaration of Household Income (DHI)
✓ Self-Employed Clients

Confidentiality

Confidentiality of client information is essential and must be assured by the agency. The Master Grant Agreement (MGA) between each agency and OHCS specifically addresses this responsibility. Please reference the current MGA for specific language.

Each agency must have in place policies and procedures to assure compliance with this grant requirement. Refer to local agency confidentiality forms and policies.

For the protection of applicants and recipients, you must not disclose or use the contents of records, files, papers or communications for purposes other than those directly connected with the administration of energy programs, whether on or off duty.
Preliminary Household Assessment

The purpose of a pre-assessment is to gather the necessary information to assure the intake process is effective, efficient, and poses minimal burden to low-income applicants.

Below is a list of a few sample questions:

➢ Where does the client live? (Must be in local service area.)
➢ Has the applicant received assistance before? (If possible, check history in OPUS or client files.)
➢ What type of heating or cooling does the client have?
➢ How many people reside in the household? How many adults? How many children?
➢ What is the source and amount of gross income for the household? (Except income earned by minors.)
➢ Is the household in a crisis situation? (See section Four)
➢ For OEAP, do they have an account with Portland General Electric (PGE) or Pacific Power?

Schedule an appointment. Emphasize appointment date, time and location. Explain that they will need to bring the following:

➢ Income verification for all household members except for income earned by minors.
➢ Identification for all adult members. (See following section for examples of Identification Verification.)
➢ Utility/Vendor bill(s), statement, invoice or receipt (must be in the name of applicant or adult HH member). All households are required to bring both their heating and electricity bills, and account information for both must be updated in OPUS.
➢ To receive a LIHEAP benefit they are also required to provide Social Security number(s) and birthdates for everyone in the household. For OEAP, Social Security Numbers are strongly encouraged.
➢ Landlord/Renter Documentation (where applicable).

The following forms may need to be sent to the applicant prior to appointment, please refer to your local agency form(s):

➢ Landlord/Renter Verification Forms.
➢ Declaration of Household Income Form (DHI) and/or other local agency form(s).
➢ Self-Employment Form.
➢ Other form(s) as determined by local agency policy.
Verification of Identification

At a minimum, all adult household members must provide proof of identity once per program year. Agencies are strongly encouraged to keep copies of identification documents.

Below are examples of documentation that can be provided to establish identity:

- Driver’s License
- Passport
- Military Identification
- State Identification/ Government issued identification
- Birth Certificate
- School Records/ID
- Insurance Card
- Tax Records
- Insurance Records
- DHS Printout
- Court Documents
- Utility Bills
- Government Records
- Pay Stub
- Social Security Records
- Other paperwork identifying household member

During the Intake

Verifying, entering / updating all necessary information provided by the applicant helps to ensure that the household is eligible for energy assistance, and that the intake worker has all documentation required to process the application and make an energy assistance commitment.

During each intake the intake worker should document the following information:

- Names, birthdates, and Social Security numbers for every household member (for LIHEAP a Social Security number issued by the SSA is required. For OEAP, it is strongly encouraged, but not required). In cases where issues inhibit applicants from providing a social security number, OPUS will issue a unique client identification number (OPUS System ID) to assure non-duplication of services. When an OPUS system ID number is used, and the client meets the exception criteria, it must be noted in the client file which exception criteria have been met (See exception criteria on page 1.5). (Confidential/sensitive information should never be entered into OPUS)
- Contact information (phone number, mailing address, and physical address).
- Residence information (type of dwelling).
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➢ Demographic information (intake workers must ask, however services will not be denied for refusal to provide information).

➢ Gross income documentation for all household members. (may include Declaration of Household Income (DHI), Social Security calculator worksheet, and/or local agency forms).

➢ Vendor/account information (Primary heat bill, electric bill (if not primary heat source) and bulk fuel receipt, if applicable).

Intake workers must include copies of all relevant documentation that the applicant provides in order to produce a finalized application (See page 1.13 of Intake Manual for further explanation of documents required for a completed application).

Depending on local resources available to the client, intake workers should also provide additional information and contact numbers to the client during (or at the end of) an intake. This should include, but is not limited to weatherization assistance, energy education workshops, case management, interagency services and local community programs.

Domestic Violence

If an applicant is experiencing an abusive situation, we still need to create a record in OPUS but most of the client/household information must only be documented in the paper file. You may use the agency address as the household address in OPUS and/or process it as an agency pay. Once the intake report/fiscal documents are printed, actual household information (account number, name on account, physical address etc.) will need to be filled in for fiscal processing/record retention.

Avoiding Duplicate Applications

To avoid duplicate applications, client information must be entered into the OPUS database.

Using Mail-In/Hard Copy Applications

If a client qualifies for multiple programs, you may use the one application submitted by the client to create multiple applications if it is done so A: before any specific program information is added to the application/mail-in; and B: if it is being done so at the same intake. All completed file requirements as outlined later in this manual still apply.

Energy Assistance Program Authorization Form

The following are general steps and information for completing either an OPUS intake or filling out a hard copy application.

1. Authorization Number: Preprinted or computer generated number.

2. Applicant’s Legal Name: Print applicant’s full legal name as listed on the most current documentation from the Social Security Administration (SSA) or state issued photo ID.
3. Household type: Circle household type

Client Information Section (Begin with the applicant.)

4. Legal Name: Print full legal name as listed on the most current documentation from the SSA or state issued photo ID, for each member of the household.

5. Birthdate: Enter date of birth for each household member (Month/Day/Year).

6. SSN/SYSID: Enter the social security number (SSN) issued by the SSA for each household member.

   LIHEAP: Social Security Numbers are required for LIHEAP and agencies are strongly encouraged to retain a copy of the Social Security Card for the client file. Agencies may require copies of the card from all clients.

   OEAP: SSNs ARE STRONGLY ENCOURAGED BUT NOT REQUIRED.

   In those cases where circumstances prevent applicants from providing a social security number, OPUS will issue a unique client identification number to prevent duplication of services.

Links to:

- The Social Security Administration website
- SSA info about SSNs here and here

Note: A valid SSN will not begin with 000, 666, or 900-999.

7. Social Security Number Code: (See SSN code on reverse side of the application.) When an OPUS system ID number is used and the client meets the exception criteria, it must be noted in the client file which exception criteria have been met. Examples of exceptions for not providing a social security number include:

   - Unavailable to custodial guardian/parent
   - Domestic Violence (DV) (any information regarding DV should only be documented in/on the paper file, not in OPUS
   - Children under the age of one
   - Adult applying for SSN with letter of SSN application

8. Adult Identification Verified: Select if adult household members’ identification has been verified and documented. If adult ID has not been verified and documented the household member will not be counted for the purposes of benefit, however their income will be counted.

ALL DEMOGRAPHIC DATA MUST BE REQUESTED FOR EACH HOUSEHOLD MEMBER—(However, services will not be denied for refusal to provide demographic information)

9. Language: Enter the applicable language acronym for each household member.
10. **Gender**: Enter gender code.

11. **Ethnicity**: Enter ethnicity code.

12. **Race**: Enter the applicable race acronym for each household member.

13. **Oregon Tribes**: Enter Oregon Tribes code.
14. Education: Enter the acronym of the highest level of education completed for all Household Members.

15. Disability: Enter disability code.


17. Homebound: Enter homebound code.

18. Non-Cash Benefits: Enter the non-cash benefit(s) code, select all non-cash benefits that apply.

19. Phone: Enter a primary telephone number for the household. When available enter secondary phone number(s).

20. Mailing Address: Enter the household’s mailing address.

21. Physical Address: Document the household’s physical address. (Please note if different from the mailing address) The physical address on the application must match the service address on the utility bill/vendor receipt. If physical address is not on standardized utility bill, vendor receipt or landlord letter, alternate documentation of physical address must be provided.

22. Dwelling Type: Circle the correct dwelling type.

23. Residence Status: Circle the correct residence type.

24. Energy Sources: Circle the correct energy sources type. Under “Enter Primary Energy Source” indicate the letter beside your energy selection.

25. Applicant’s Legal Name: Print applicant’s full legal name as listed on Social Security card, or state issued photo ID.

26. Agency Name: Print agency name.

27. Income Source/Income Reported: Insert letter that corresponds to the client who receives income. Enter specific income source

28. Income Type: Enter income type code.

29. Income Verification: Enter income verification code.

   Required documentation may vary across agencies. Staff should verify guidelines and policies with their local energy assistance coordinator.

30. Comments: Any and all special circumstances must be documented.

31. Calculating Income: Determination of income is based on all household income before any deductions (this is known as gross income). (See “What Is Income and What Is Not Income” chart in Section Two.)
Income must be calculated/entered exactly; do not round up or down, do not project or average income.

Income must be calculated using data from one of the following three time periods: one (1) month, three (3) months, or twelve (12) months. Within a household, if using monthly income, you must consistently use either one calendar month or previous thirty days. Count past income, do not project forward.

These time periods also apply to applicants who are self-employed.

Amount: Household income must be documented and verified. If the household has more than one income source, list each source individually and total the income in the Annual Amount column. Income documents must be addressed with a household member with either a name or social security number.

Frequency: At a minimum, verification must be collected for at least one consecutive month or 30 days of income, but may be collected for the quarter or year.

Income verification timelines may vary across agencies. Staff should verify policies and procedures with their local agency.

Annual amount: Total calculated income for the year (i.e. monthly amount multiplied by twelve (12) for annual income, quarterly amount multiplied by four for annual income).

NOTE: Income that exchanges hands within a household is not counted.

Income certification: Household income must be certified at the time of intake (excluding supplemental payments). That certification is valid for a maximum of 60 days. Agencies may require income certification from all households more often. Certification timelines must be consistent for all households and all completed file requirements (as outlined on page 1.12) must be followed.

32. **Program Payment Type:** Circle the correct payment type out of the following options:

- Regular (Standard)
- Roomer/Boarder
- Fuel
- Crisis
- Combo
- Heating and Cooling Equipment
- Supplemental
- Health & Safety
- Other

33. **Account Status:** Circle the utility account status at the time of application. For “Bulk Fuels” (Oil, Wood, Pellets, and Propane): If an applicant has an inadequate supply of bulk fuel, the “Bulk Fuel” option should be selected. If they are out of fuel, the “Bulk Fuel Out” option should be selected.
Please note: The “Disconnected” option should only be used when utility service is actually disconnected.

➢ Current
➢ Past Due
➢ Shutoff 1-5 days
➢ Shutoff 0-24 hours
➢ Disconnected
➢ Bulk Fuel
➢ Bulk Fuel Out

34. Energy Education: Check the appropriate response.

35. Intake Date:

➢ In-person interview: This is the date the interview process takes place.
➢ Mailouts: This is the date the application is received and or completed by the local agency

36. Referral to Weatherization: Check box if applicant is referred to Weatherization.

37. Referral to Non-Energy Service: Check box if applicant is referred for Non-Energy Service (examples include: prescription assistance, rental assistance, food box, etc.).

38. Energy Advocacy: Check box if applicant is provided Energy Advocacy (examples include: assisting with payment plan, arrearage forgiveness, medical certification).

39. Vendor/Utility: List each vendor/utility separately. Always list the primary vendor first.

40. Account Number: Account number on the most recent vendor/utility bills provided. If a standardized account number is not utilized by utility/vendor, at a minimum, a client name must be listed in lieu of account number. Leaving the account number box blank or putting “cash account” is not acceptable.

41. Name on Account: The utility/vendor account holder must be the applicant or an adult member of the household.

Every effort should be made to place the applicant or an adult household member on the utility bill/account. In cases where this is not feasible, justification must be well documented. Examples include:

➢ Domestic Violence (DV)/Safety Concerns (any information regarding DV should only be documented in/on the paper file, not in OPUS)
➢ Military Deployment of the Account Holder
➢ “Payee” or “Power of Attorney” Arrangement
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➢ Incarcerated Account Holder

42. Account Status: Enter the status of the account for each account.

43. Authorized Amount: The calculated energy assistance benefit amount for the household. (*See Benefit Matrix in Section Five.*)

44. Vendor Amount: The benefit amount committed and paid to each vendor.

45. Payment Comment Box: This section must be used to describe special circumstances. This includes, but is not limited to:

- Direct Payments
- Reason for denial or void
- Justification for Crisis Payment or Combo payment
- Justification for Crisis Benefit Amount (*particularly when the benefit exceeds documented need or may result in a credit on a utility/vendor account.*)

46. Direct Pay (For LIHEAP only.): Used when the applicant household is receiving all or part of the LIHEAP benefit amount. Insert the authorized amount to be paid directly to the client.

*In general, agencies are encouraged to make payments to the utility or fuel vendor wherever possible. If a direct payment is made, the comment box must include the reason the authorized amount is being paid directly to the client. For more information, please see Section Three.*

47. Matrix Energy Type: Enter the energy source type of payment if energy assistance benefit was applied to alternate energy source.

48. Program Type: Select the appropriate program type.

49. Approved/Denied: Mark approved or denied box.

50. Signatures: The applicant signs and dates the application after they have reviewed the information and have read the applicant disclaimer. The intake worker then signs and dates the application; a copy of the application must be provided to the client upon request.

Regarding electronic signatures, for those circumstances where obtaining a traditional original signature is either not possible or presents an unreasonable hardship for the client and emailed, faxed, or electronically transmitted document can be accepted. However, the document(s) must be printed and either stamped or marked as “Original.”

ENERGY/WEATHERIZATION ASSISTANCE APPLICATION—Required Language for Applications
ENERGY/WEATHERIZATION ASSISTANCE APPLICATION---REQUIRED APPLICANT DISCLOSURES AND APPROVALS

PART 1: APPLICANT NOTICE, PROGRAM DISCLAIMERS, AND APPLICANT RESPONSIBILITIES, WAIVER & RELEASE

❖ I, Applicant, understand that the government energy and weatherization assistance programs are voluntary and my application is subject to a review process to determine my household’s eligibility.

❖ I understand that in order for my household’s application to be considered, I must submit a complete application that provides all required information.

❖ I understand that I may be required to provide additional information or documentation to determine my household’s eligibility.

❖ I understand that my household’s application and additional information or documentation materials will all become part of my household’s application (“Application”).

❖ I understand that determinations on assistance eligibility are made by the state’s Oregon Housing and Community Services (OHCS) department in conjunction with contracted subgrantee agencies (“Subgrantees”).

❖ In the event that my household’s Application is denied, I may be entitled to a review of my Application under applicable Oregon Administrative Rules.

❖ Upon successful enrollment in the LIHEAP/OEAP programs, I further authorize OHCS and the State of Oregon, including designated subcontractors, and OHCS Subgrantees to release my Application and ongoing LIHEAP/OEAP program benefit information held by OHCS (including its subcontractors and OHCS Subgrantees) to the Energy Services Provider (as defined below) for the purposes of administering, monitoring, researching, and evaluating LIHEAP/OEAP program delivery and efficiency.

❖ I declare that the information I provide to complete my Application is true and correct.

❖ I agree to comply with the government energy and weatherization assistance program requirements for eligible households.

❖ Should I receive any heating and or/cooling equipment as result of my eligibility to these programs, I agree to hold OHCS, its sub-grantees and/or contractors harmless.

❖ I agree that I am responsible to return ineligible funds or funds used improperly.

❖ I authorize and hold harmless OHCS (including its subcontractors and OHCS Subgrantees) to release my Application and ongoing LIHEAP/OEAP program benefit information up and until one (1) program year following my participation in the LIHEAP/OEAP programs.

PART 2: APPLICANT NOTICE, WAIVER & RELEASE RELATED TO ENERGY SERVICE PROVIDERS AND APPLICATIONS ENERGY SERVICE ACCOUNT INFORMATION

❖ I understand that the State of Oregon, including OHCS, its designated subcontractors, and Subgrantees, may request information related to my energy services account(s) (“Account”) from my energy service provider(s), including utility, fuel supplier, vendor, or other similar entity.
providing similar services ("Energy Services Provider"), once my household applies for energy assistance through one of the energy assistance programs, including but not limited to the Low Income Home Energy Assistance Program (LIHEAP) and Oregon Energy Assistance Program (OEAP).

❖ I understand that information related to my Account may be requested by the State of Oregon, OHCS, its designated subcontractors, and Subgrantees for the purposes of, including but not limited to, determining my household’s energy assistance eligibility, and administering, monitoring, researching, and evaluating the energy assistance programs (all of which as determined by OHCS in its sole discretion).

With my signature,
❖ I acknowledge that I am the account holder (or the account holder’s authorized agent) for the Energy Services Provider Account(s) identified in this Application.

❖ I hereby authorize and hold harmless my Energy Services Provider(s) to release and provide any and all information relating to my account, including but not limited to account number, account name, service address, billing dates and amounts charged, information related to collections actions, other miscellaneous account charges and information, or other similar account data as may be requested by OHCS or its designated subcontractor (hereinafter “Account Information”) to the State of Oregon, OHCS, its designated subcontractors, and Subgrantees. I understand and agree, should I receive any heating and/or cooling equipment as a result of any of these programs, I agree to hold OHCS, its sub grantees and/or contractors harmless.

❖ I hereby authorize and hold harmless my Energy Services Provider(s) for such release of my Account Information for up to two (2) energy assistance program years (10/1 to 9/30) prior to my Application and for three (3) program years (10/1 to 9/30) after my Application is submitted.

❖ I hereby authorize and hold harmless the State of Oregon, OHCS, its designated subcontractors, and Subgrantees in the use (as authorized by OHCS in its sole discretion) of my released Account Information.

**PART 3: APPLICANT SIGNATURE**

With my signature I hereby provide the required authorization, approval and acknowledgments to both PART 1 and PART 2 of the ENERGY/WEATHERIZATION ASSISTANCE APPLICATION REQUIRED APPLICANT DISCLOSURES AND APPROVALS.

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Solicitud de Asistencia de Energía/Climatización—Divulgación y aprobación requerida de solicitante

PARTE 1: AVISO AL SOLICITANTE, DESCARGOS DE RESPONSABILIDAD DEL PROGRAMA Y RESPONSABILIDADES DEL SOLICITANTE, RENUNCIAs Y EXENCIÓN

Vigente a partir del 10/01/2022

- Yo, el solicitante, comprendo que los programas gubernamentales de asistencia de energía y climatización son voluntarios y mi solicitud está sujeta a un proceso de revisión para determinar la elegibilidad de mi hogar.

- Comprendo que para que se considere la solicitud de mi hogar, debo presentar una solicitud completa que proporcione toda la información requerida.

- Comprendo que es posible que se me solicite que proporcione información o documentación adicional para determinar la elegibilidad de mi hogar.

- Comprendo que la solicitud de mi hogar y la información adicional o los materiales de documentación pasarán a formar parte de la solicitud de mi hogar (“Solicitud”).

- Comprendo que las determinaciones sobre la elegibilidad para recibir asistencia son tomadas por el Departamento de Servicios Comunitarios y de Vivienda de Oregón (Oregon Housing and Community Services, OHCS) del estado junto con las agencias subcesionarias contratadas (“Subcesionarias”).

- En caso de que se rechace la Solicitud de mi hogar, es posible que tenga derecho a una revisión de mi Solicitud en virtud de las Reglas Administrativas de Oregon aplicables.

- Tras la inscripción exitosa en los programas LIHEAP/OEAP, autorizo además a OHCS y al estado de Oregón, incluidos los subcontratistas designados, y las Subcesionarias de OHCS a divulgar mi Solicitud y la información de beneficios del programa LIHEAP/OEAP en curso en poder de OHCS (incluidos sus subcontratistas y Subcesionarias de OHCS) al Proveedor de servicios de energía (según se define continuación) con el fin de administrar, monitorear, investigar y evaluar la entrega y eficiencia del programa LIHEAP/OEAP.

- Declaro que la información que proporciono para completar mi solicitud es verdadera y correcta.

- Acepto cumplir con los requisitos del programa de asistencia de energía y climatización del gobierno para los hogares elegibles.

- En caso de recibir cualquier equipo de calefacción y/o refrigeración como resultado de mi elegibilidad para estos programas, acepto eximir de responsabilidad a OHCS, sus subcesionarias y/o contratistas.

- Acepto que soy responsable de devolver los fondos no elegibles o los fondos utilizados indebidamente.

- Autorizo y eximo de responsabilidad a OHCS (incluidos sus subcontratistas y Subcesionarias de OHCS) a divulgar mi Solicitud y la información de beneficios del programa LIHEAP/OEAP en curso hasta un (1) año del programa después de mi participación en los programas LIHEAP/OEAP.

PARTE 2: AVISO, EXENCIÓN Y LIBERACIÓN DEL SOLICITANTE RELACIONADOS CON LOS PROVEEDORES DE SERVICIOS DE ENERGÍA Y LA INFORMACIÓN DE LA CUENTA DE SERVICIOS DE ENERGÍA DEL SOLICITANTE

- Entiendo que el estado de Oregon, incluidos OHCS, sus subcontratistas designados, y Subcesionarias, puede solicitar información relacionada con mi cuenta (o cuentas) de servicios de energía (“Cuenta”) a mi proveedor (o proveedores) de servicios de energía, incluidos la empresa de servicios, el proveedor de
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combustible u otra entidad similar que preste servicios similares (“Proveedor de servicios de energía”), una
vez que mi hogar solicite asistencia energética a través de uno de los programas de asistencia energética,
incluidos, entre otros, el Programa de Asistencia Energética para Hogares de Bajos Ingresos (Low Income
Home Energy Assistance Program, LIHEAP) y el Programa de Asistencia de Energía de Oregón (OEAP).

- Comprendo que la información relacionada con mi Cuenta puede ser solicitada por el Estado de Oregon,
OHCS, sus subcontratistas designados y Subcesionarias a fin de, entre otras cosas, determinar la
elegibilidad para la asistencia energética de mi hogar, y administrar, monitorear, investigar y evaluar los
programas de asistencia energética (todo ello según lo determine OHCS a su entera discreción).

Con mi firma,

- Reconozco que soy el titular de la cuenta (o el agente autorizado del titular de la cuenta) para la cuenta (o
cuentas) del proveedor de servicios de energía identificada en esta solicitud.
- Por el presente, autorizo y eximo de responsabilidad a mi proveedor(es) de servicios de energía a divulgar
y proporcionar toda la información relacionada con mi cuenta, incluidos, entre otros, el número de cuenta,
el nombre de cuenta, la dirección de servicio, las fechas de facturación y los montos cobrados, la
información relacionada con acciones de cobro, otros cargos e información varios de la cuenta, u otros
datos similares de la cuenta que puedan solicitar OHCS o su subcontratista designado (en adelante,
“Información de la cuenta”) al estado de Oregón, OHCS, sus subcontratistas designados, y Subcesionarias.
Comprendo y acepto que, en caso de recibir cualquier equipo de calefacción y/o refrigeración como
resultado de cualquiera de estos programas, acepto eximir de responsabilidad a OHCS, sus Subcesionarias
y/o contratistas.
- Por el presente, autorizo y eximo de responsabilidad a mi(s) Proveedor(es) de Servicios de Energía por
dicha divulgación de la Información de mi Cuenta durante un máximo de dos (2) años del programa de
asistencia energética (10/1 al 9/30) antes de mi Solicitud y durante tres (3) años del programa (10/1 al
9/30) después de que se presente mi Solicitud.
- Por el presente, autorizo y eximo de responsabilidad al Estado de Oregon, OHCS, sus subcontratistas
designados y Subcesionarias en el uso (según lo autorice OHCS a su entera discreción) de mi Información
de cuenta divulgada.

<table>
<thead>
<tr>
<th>PARTE 3: FIRMA DEL SOLICITANTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Con mi firma, por el presente, doy la autorización, aprobación y reconocimientos requeridos tanto a la PARTE 1 como a la PARTE 2 de esta SOLICITUD DE ASISTENCIA ENERGÉTICA/DE CLIMATIZACIÓN: DIVULGACIONES Y APROBACIONES REQUERIDAS DEL SOLICITANTE.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FIRME AQUÍ</th>
</tr>
</thead>
</table>
| Firma del solicitante_________________________________________________________
| Fecha______________________ |
Distribution of Authorization Copies

Once the applicant and intake worker have signed the energy assistance application, the authorization form is now complete and ready to be turned in for approval, data entry and payment. Intake and application processes may vary across agencies; staff should verify policies and procedures with their local energy assistance coordinator.

The Original document must be maintained for agency records and should also be the document used for data entry. After the information from the form is entered into OPUS, it should be kept as part of an official agency file. It is not necessary to maintain separate number and alpha files. All official program files must comply with standard records management principals. There must be a date recorded on all authorizations for audit purposes.

The Original document should be kept in the sub-grantee or sub-recipient’s official program files. All documentation used to establish household eligibility must be attached. The file should contain all copies of correspondence pertaining to the application and should be considered as the official program file.

Upon request, the Client Copy must be given to the client to retain for future reference.

In accordance with the Federal LIHEAP Statute, the Oregon LIHEAP State Plan indicates that: “Households are notified regarding the amount of assistance committed at the time of their intake. Applicants who apply by mail will receive a notice by mail or may be notified by telephone.”

Each agency must have a process in place to assure compliance with this program guideline. Staff should verify policies and procedures with their local agency.

Completed Files

A completed file must have the following:

- File is defined as an original application with all supporting documentation for a single payment, from a single funding source including original signatures. “Signature-on-file” is not acceptable.
- The completed application and OPUS must match.

1. The file must contain one of the following with all required signatures and dates in addition to current year disclaimer:
   - Local Application
   - OHCS Authorization Form
   - OPUS Authorization Form

Local applications and/or OPUS Authorization Forms must be signed and dated by the applicant, the
intake worker, data entry worker if applicable and an authorizing agency representative. If a non-household member is signing the application/OPUS Authorization Form, a Power of Attorney form or a “permission to sign” form, with a justification must be included in the file.

An intake worker is generally defined as the person who gathers information, conducts the interview with the applicant via phone, mail, or in person and determines eligibility.

A data entry signature is required from the person who enters the application information into OPUS. If the same person is completing the intake and the data entry, an intake signature alone is sufficient.

An authorizing agency representative is generally defined as the person who reviews the application for accuracy and signs the application for processing.

For internal control purposes, the person completing the intake and the person authorizing the file (and their corresponding signatures) may not be the same.

For monitoring and quality assurance purposes, all applications must be reviewed for accuracy and contain an authorizing signature prior to being authorized in OPUS.

In addition to the things listed above, all pages of the intake report/application must have matching dates and times.

2. Income documentation for all household members, excluding income earned by minors. This could include, but is not limited to:

- Wage Slips
- Employer Statement
- Official State and/or Court documents
- Benefit Verification Letters
- Self-employment form
- Bank Statements

If any adult member(s) of the household do not have income, this must be accounted for on a Declaration of Household Income form (DHI). The Food Stamps screen should only be used as last resort for income verification and is only accepted as a last resort for limited types of income.

3. Supporting Documentation for account/utility/vendor includes, but is not limited to:

- Receipts, Bills or Invoices from Home Energy Supplier/Vendor
- Landlord letter/lease/rental agreement for heating/cooling included in rent
- Other documentation necessary to explain extreme/unusual circumstances

4. Copy of a current utility bill (no more than three months old) or most recent fuel vendor bill (no more than 12 months old). The service address on the bill must match the client’s physical address. If standardized
documentation is not available, documentation must be provided to show that a cash account has been established.

Contact with utilities/vendors must be documented and included in the client file. If contact is made by phone or through utility portal, the following information must be included on a Utility Verification Form: A printout of the client’s information obtained via a utility portal may be used in place of a utility verification form.

Name(s) of utilities/vendors
➢ Person(s) contacted (if verifying via a log-in required utility portal, make note)
➢ Date(s) of contact
➢ Utility/vendor account number(s) (if this is a cash account, how is the account verified by the utility/vendor?)
➢ Verification of name and address on account(s)
➢ Account balance
➢ Signature of agency representative completing form (clients may not fill out the Utility Verification Form for themselves, it must be done by agency staff)

5. Justification for any benefit other than a regular payment as described in Section Three. This includes:
➢ Direct Payment
➢ Crisis/Combo – reason for crisis and amount of payment
➢ Heating or Cooling Equipment Repair/Replacement – (See Section Three)
➢ Roomer/Boarder Payment
➢ Health & Safety
➢ Fuel Payment

6. Copy of all correspondence/documentation such as:
➢ Notice of Action (NOA)
   A NOA is required when an application is pended or when a benefit amount changes. A NOA may be required by the local agency for other changes or modifications.
➢ Declaration of Household Income Form (DHI) and/or other local agency form(s)
➢ Self-Employment Form
➢ General Release of Information Form
➢ Subsidy Verification— verification is only required if the household is not receiving a utility allowance.

Please Note:
➢ Any local forms with signature lines must be signed.
Additional file/documentation may be required by agency. Staff should verify policies and guidelines with their local energy assistance coordinator.

If changes are made to the client record/payment in OPUS after the initial intake, the household must be “re-qualified” in the OPUS system for these changes to be reflected.

Pending Applications

Applications that need additional eligibility verification may be placed in a pending file or placed on “Hold” in OPUS. Applicants should be informed that it is their responsibility to provide the additional information promptly.

Pending applications or applications on Hold must be held a minimum of fifteen (15) calendar days and a “Notice of Action” (NOA) containing the following information must be provided to the applicant:

- Reason the application has been pended
- Information needed to complete the application
- Date by which the information is to be provided
- Result if information is not received by deadline (including denial of application)

Applicants may be denied after the appropriate pending period as detailed above.

Denied Applications

An application is denied if the applicant fails to meet program eligibility requirements at the time of application.

Applicants must be provided a copy of the application, or a notice of action which outlines the reason for their denial. For households whose applications were pended then denied due to non-completion, the original pending notice (see above section, Pending Applications) is sufficient notice of denial.

All notices of denial (including pending notices) must include information regarding fair hearings. Any individual whose claim for LIHEAP or OEAP assistance is denied, or not processed with reasonable promptness, is entitled to ask for a fair hearing at the local agency level. The reason for denial must be documented.

All denied applications must be kept on file and have an intake and authorizing signature. Unless a client refuses, a client signature is required on all denied applications. If refused, please note “Refused” in place of the client signature.

Clients may contact Oregon Housing and Community Services (OHCS) within 30 days of the hearing decision to request that OHCS review the hearing decision for material deficiencies. The request for OHCS review must be in writing and delivered or mailed to OHCS at 725 Summer St NE Suite B, Salem OR 97301, or by email to energyservices@oregon.gov. Review by OHCS, and the manner thereof, is at the sole discretion of OHCS.
Voided Applications

An application is **voided** when it is found to be in error or when it is withdrawn by the applicant after it has been signed by an intake worker but not batched in OPUS. Applications already batched in OPUS can only be voided by OHCS.

Voided applications do not need to be printed but the reason for voiding an application must be documented in OPUS.

Data Entry of Forms

Accurate data entry is very important. Data entry errors can lead to duplicate or denied applications. Inaccurate entry of address or account number(s) could result in checks being mailed to the wrong address, or applied to the wrong account.

Unusual Eligibility Situations

The following section provides some basic guidance regarding eligibility determination in unusual situations. This information is not intended to be comprehensive, and discretion should be used in circumstances that do not fall neatly into the categories listed below.

- **Dwellings with a Shared Meter:** Many applicants reside in a dwelling that utilizes a single or master meter. These may include, but are not limited to:
  
  a) **Roomer/Boarder:** A roomer/boarder is a person who rents a room from the building owner. A roomer/boarder does not have a separate site address from other occupants of the building—however, a roomer/boarder does not share in providing, or being provided for, the necessities of life (e.g. food, living costs) with other residents of the structure. A roomer in a single family structure must verify he or she is not part of the economic unit of the other tenants of the structure (e.g. rental agreement).
  
  b) **Co-Habitants/Roommates:** Persons living in a housing arrangement with their own room and sharing common spaces (such as kitchens, living rooms, TV rooms, recreation rooms) are generally **not** considered roomers. Persons sharing common spaces are part of a household with other members and eligibility must be assessed for the whole group as an economic unit (household).
  
  c) **Neighbors/Land Sharing:** Applicants who obtain their primary heat or cooling from an extension cord to a neighboring residence are not eligible to receive LIHEAP for their electricity costs. However, they may apply as part of the neighboring household. If the household utilizes an alternate source of energy as their heating source (e.g. propane) they may be eligible for a LIHEAP benefit.
  
  d) **Hotels/Motels:** Applicants may be eligible for LIHEAP if they've resided in a hotel/motel for 30+ days **OR** if they are paying a “rental” (long-term) rate. Applicant is responsible for verifying length of stay and/or special rate.
**Section One: Application Process**

**Intake Manual**

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e) **Group Homes**: The Income of all residents must be considered in determining eligibility. “Group Home” examples may include Adult Foster Care, Oxford Houses or Homes for Adults with Developmental Disabilities. Group homes administered under a contract with, or administered by a government unit are considered an “institution” and are not eligible to receive LIHEAP services (e.g. most nursing home facilities).

f) **Institutions**: Applicants living in institutions are not eligible to apply for energy assistance. Institutions include, but are not limited to: correctional facilities, nursing homes, alcohol/drug rehabilitation centers, treatment programs, dormitories, fraternities, sororities, domestic violence shelters and homeless shelters.

g) **Commercial Utility Account**: Applicants with a commercial utility account are not eligible to receive energy assistance.

- **Companion/Attendant/Caregiver (C/A)**: Some applicants may have someone living with them who provide health/supportive services. If the caregiver lives with the applicant and that is their only residence they will be counted as part of the household and their income will be included. If the caregiver provides documentation that they have their own residence they will not be included as part of the household and income will not be included. If the live-in caregiver is paid solely by the applicant and no other money is paid from outside of the household the income of the caregiver will not be counted as income. If the live-in caregiver is paid from a source outside of the residence that amount shall be counted as income.

- **Household Separation**: If a previously served household separates, none of the adults may receive another standard payment during the current program year. Each new household may still be eligible for a crisis payment.

- **Counting Children in more than one household**: Children can be counted in more than one household based on local agency decision and policy. Both households may qualify for a standard payment.

- **Agency Staff as Applicants**: Eligible agency staff may apply for LIHEAP or OEAP assistance. Employee applications must be approved and signed by the Executive Director or their designee. **A list of agency staff receiving LIHEAP or OEAP must be retained for auditing purposes, and supplied to OHCS upon request.**

- **Family and Friends as Applicants**: Eligible family members and friends may apply for LIHEAP or OEAP assistance; however, a staff person other than a family member or friend should conduct the interview. In agencies where it is otherwise not possible to meet this criteria, the staff person **must** record the relationship in OPUS and on the application. **All applications of family and friends must be approved and signed by the agency Executive Director or their designee.**

- When friends or family members are assisted at the agency, a list of those served and the relationship must be retained for auditing purposes and supplied to OHCS upon request.
Please note that these are minimum requirements and that the definition of “friend” is not always clear. For further guidance staff should verify policies and procedures with their local agency.

- **Tribal Members** The following Tribes receive LIHEAP funds directly from HHS:
  - Confederated Tribes of Coos, Lower Umpqua, and Siuslaw Indians
  - Confederated Tribes of Grand Ronde
  - Confederated Tribes of Siletz Indians
  - Confederated Tribes of Warm Springs
  - Cow Creek Band of Umpqua Tribe of Indians
  - The Klamath Tribe

For those agencies with the above tribes in their service territory: If a member from one of the above listed tribes lives on a reservation or on tribal trust lands, they should be referred back to their tribal LIHEAP program for energy assistance services. If for any reason an eligible tribal member is unable to access their tribal LIHEAP program (e.g. out of funds, geographically inaccessible, unanticipated hardship) they should be served as any other eligible household; however, their local tribal office must be contacted to inquire about LIHEAP assistance already received for the current program year. If the household has received LIHEAP assistance from their tribe, they would only be eligible to receive a LIHEAP Crisis payment (assuming they meet the crisis criteria for each agency). Please work with the OPUS HelpDesk to edit payments as necessary to reflect crisis assistance after initial tribal assistance has been received.

Households affiliated with Oregon tribes not listed above should be treated as any other applicant. Tribal LIHEAP funding should not affect eligibility criteria for the Oregon Energy Assistance Program or other leveraged funding sources.

Any deviation from these policies must be approved by the State LIHEAP Coordinator within local agency work plans.

**Fraud and Determination of Fraud**

Fraud can involve applicants, employees or vendors. In all cases of actual or suspected fraud the sub-grantee shall take necessary action to recover the funds and must inform OHCS. Fraud occurs when a household or business takes any of the following actions knowingly, willfully, and with deceitful intent by:

- Making false statements, or knowingly assisting applicants to make a false statement(s) to the agency or its agent(s), either orally or in writing, to receive benefits, services, or payments, for which the household/business are not eligible.

- Concealing information that would change or disallow benefits for the household;

- Violating provisions set forth in the program regulations, vendor contracts, or other documents pertaining to LIHEAP or OEAP.
Identity Theft

Oregon Housing and Community Services is committed to mitigating identity theft amongst low-income Oregonians who receive LIHEAP/OEAP funding. In addition to protecting the privacy and confidentiality of applicants, agencies should also be making efforts to ensure that day-to-day program practices guard against identity theft.

Some households may self-report establishing accounts in other household members’ names to avoid large arrearages or maintain utility service. In these situations, agencies are advised to work with the applicant, utility and OHCS to re-establish an account in the proper name including arranging for additional energy assistance and/or alternative payment options if necessary.

Recovery of Ineligible Assistance

The local agency is responsible for recovering duplicate payments, overpayments and forgeries. Agencies should first determine if the ineligible assistance is due to agency error, or applicant error. *If assistance has been provided due to agency error, the agency is responsible for repayment and/or recovery of ineligible benefits.*

If ineligible benefits are due to applicant error or fraud, agencies should follow the recovery procedure as outlined below:

- Notify the vendor with information about the problem, and request return of the funds. If entire amount is returned from the vendor, the case is closed.
- If funds have already been applied to the applicant’s account by the vendor, the applicant is responsible for repaying the full benefit amount to the local agency. Send a certified letter to the applicant requesting reimbursement, and providing a specific date for response. If fraud is suspected, include the fact that no response to the letter will result in the case being turned over to appropriate authorities for fraud investigation.
  1. Send a copy to OHCS, and keep all related documents in applicant file. The applicant’s Authorization Number must appear on all correspondence.
  2. If there is no response within thirty days from initial applicant contact, send a second letter to the applicant by certified mail, return receipt requested, with a copy to OHCS. This letter shall state that the matter is being turned over to OHCS, as of a specific date (use seven days from date certified letter was received), for fraud investigation.

All cases of actual or potential fraud must be reported to the state Energy Assistance Coordinator at OHCS. Additionally, all attempts to recover energy assistance funds by an agency must be reported *in writing* to OHCS.

Should the applicant not complete their obligation to repay all ineligible funds received, notify OHCS.
Declaration of Household Income (DHI)

Each household applying for assistance must provide documentation of income. Household members claiming no income or irregular income must sign a DHI).

This form must be used for the following circumstances:

- A household member has no income
- A household member whose irregular income is the result of occasional work such as mowing lawns, child care, donating blood, collecting cans/bottles, or a household whose income is from an informal child support agreement
- Regular cash gifts—gifts given three consecutive months or more will be counted as income

At a minimum the form must contain:

- Applicant’s name
- Name of adult HH member(s) claiming zero or irregular income
- Amount and type of income (if applicable)
- The month/time period for which information is being collected
- A brief description of how basic needs (shelter, utilities, food) is being met
- A statement certifying accuracy of information
- An applicant’s signature and the date signed

Multiple members of the household may be listed on one (DHI) form and/or other local agency form(s)—and the applicant may sign the form for all household members.

Local agencies may require applicants and/or households claiming zero income to submit additional information. Staff should verify policies and procedures with their local agency.

Self-Employed Clients

For applicants who are Self-Employed, income should be based upon the adjusted gross income remaining after the cost of doing business. Business expenses include all costs necessary to maintain the business.

Previous year’s losses or expenses are not allowed to be carried forward.

All self-employed applicants (including those landlords who own rental properties) should complete the self-employment form.

Additional supporting documentation may be required at the local level. Staff should verify policies and procedures with their local agency.
SECTION TWO: INCOME

This Section contains:

✓ Income Definition and Determining Income Eligibility
✓ Income and Income Exclusion Chart
✓ Proof of Income
✓ What Is Not Income
✓ Private Disability Insurance and Gross Income
✓ Social Security Retirement Calculator

Income Definition and Determining Income Eligibility

To be eligible for assistance, a household’s gross income (total household income from all sources before any deductions) must be within the income guidelines provided by OHCS for each program year (See Section Five).

Eligibility for LIHEAP/OEAP is based on the following:

- All household income before any deductions (gross income).
- Number of household members.

Households must provide documentation of their gross income for the eligibility period determined by their local agency (in compliance with the timelines expressed in this manual). Declaration of household income (DHI) forms must be used for the households or household members claiming zero income (local agencies may require that applicants and/or households claiming zero income to submit additional information).

Please Note:

- **Income that exchanges hands within a household is not counted.**
  
  Example: Bill lives with Mary and pays her cash for rent; the money he gives her would not be counted as income for Mary.

- **If the name listed on the income documents differs from the legal name(s), the reason must be documented in the comment section. All income documents must have the client name on them, or be linked to a specific client in some form (SSN#, etc.)**
## Income and Income Exclusion Chart

<table>
<thead>
<tr>
<th>Income types</th>
<th>Definition</th>
<th>Considered Income?</th>
<th>Proof of Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adoption Assistance</td>
<td>Financial assistance and medical coverage granted to an adoptive family to offset the short- and long-term costs of adopting an eligible child</td>
<td>X</td>
<td>Official state and/or court documents</td>
</tr>
<tr>
<td>Alimony</td>
<td>An allowance paid to a person by that person's spouse or former spouse for living expenses</td>
<td>X</td>
<td>Court documents, written statement from person paying support, DHI form</td>
</tr>
<tr>
<td>Annuities</td>
<td>A specified income payable at stated intervals for a fixed or a contingent period, often for the recipient's life</td>
<td>X</td>
<td>Statement from investment firm or bank statement (as a last resort)</td>
</tr>
<tr>
<td>Cash Gifts - Irregular</td>
<td>Irregular cash gifts or payment on behalf of the household also includes loans and cash draw down on credit cards. (Gifts given for three consecutive months or more will be counted as income)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Cash gifts - Regular</td>
<td>Must provide regular support for an individual or for the household, paid directly to the household. (Gifts given for three consecutive months or more will be counted as income)</td>
<td>X</td>
<td>Written statement from person providing support, DHI form</td>
</tr>
<tr>
<td>Child Tax Credit (CTC)</td>
<td>A tax credit for parents with dependent children</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Child Support</td>
<td>Money paid for the care of one's minor child. Include Child Support income that is provided to minors</td>
<td>X</td>
<td>Court documents, written statement from person paying support, DHI form, Reliacard statement or bank statement (as a last resort)</td>
</tr>
<tr>
<td>Contract for Deed</td>
<td>A land contract is a contract between a seller and buyer of real property in which the seller provides financing to buy the property for an agreed-upon purchase price and the buyer repays the loan in installments</td>
<td>X</td>
<td>Contract documents, receipts</td>
</tr>
<tr>
<td>Income types</td>
<td>Definition</td>
<td>Considered Income?</td>
<td>Proof of Income</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>--------------------</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>DHS Cash Assistance (SNAP in the form of cash assistance instead of food stamps)</td>
<td>Cash assistance deposited directly into household bank account</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Disability Insurance (Private)</td>
<td>Income payable at stated intervals for a fixed or a contingent period</td>
<td>X</td>
<td>Official documentation such as an award letter or benefit verification letter (see addendum at the end of Section Two for additional information)</td>
</tr>
<tr>
<td>Dividends</td>
<td>A sum of money paid to shareholders of a corporation out of earnings</td>
<td>X</td>
<td>Letter from corporation listing amount or a bank statement</td>
</tr>
<tr>
<td>Earned Income</td>
<td>Wages, Salaries, Commissions, Bonuses, Profit Sharing, Tips, Vacation Pay, Overtime Pay, Severance Pay, Sick Leave</td>
<td>X</td>
<td>Wage Stubs or statement from employer</td>
</tr>
<tr>
<td>Earned Income Credit (EIC)</td>
<td>A tax credit for low income households</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Employers paid fringe benefits</td>
<td>Health Insurance, retirement, etc.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Energy Grants</td>
<td>Money received under last year’s LIHEAP, OEAP or from private utility energy assistance programs</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Federal Disaster Payments</td>
<td>Payments made by federal agencies under a presidential declaration of disaster</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Food Stamps (see SNAP)</td>
<td>Assistance given under a federal program to eligible persons for food at designated grocery stores or markets</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

(See also Food Stamps)
(See also DHS Cash Assistance)
<table>
<thead>
<tr>
<th>Income types</th>
<th>Definition</th>
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<th>Proof of Income</th>
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</thead>
<tbody>
<tr>
<td>Foster Care</td>
<td>Payments made to foster families. Types of foster care: Family Foster Care, Special Rate Foster Care, Family Shelter Care, Relative Foster Care, Independent Living Program</td>
<td>X</td>
<td>Official state and/or court documents</td>
</tr>
<tr>
<td>Foster Grandparents Program</td>
<td>A program for limited income people age 60 and older to serve as a role model, mentor and friend for a small stipend</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>GI Bill</td>
<td>Any of various Congressional bills enacted to provide funds for college educational cost, which may include tuition, fees, books and housing costs</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Home Ownership Voucher Program</td>
<td>Section 8 home ownership program</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>ICP – Independent Choices Program</td>
<td>The Independent Choices Program (ICP) provides Medicaid recipients with monthly cash payments and to manage or self-direct their own care instead of receiving care services managed by the state. These monies are not to be considered income for the Medicaid recipient, but are considered wages for the person the Medicaid recipient is paying for their care</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Income Earned by household members still enrolled in high school</td>
<td>Income Earned by household members eighteen (18) and over, who are enrolled in high school</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Income Earned by minors</td>
<td>Income Earned by household members under the age of eighteen (18)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Income Not Counted By Law- Domestic Volunteer Service Act</td>
<td>Title I: Volunteers In Service To America (VISTA), AmeriCorps, University for Action (UYA), Urban Crime Prevention Program</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Income Not Counted By Law- Domestic Volunteer Service Act</td>
<td>Title II: Retired Senior Volunteer Program (RSVP), Foster Grandparent Program (FGP), Older Americans Service Program (Senior Health Aides, Senior Companions)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Income types</td>
<td>Definition</td>
<td>Considered Income?</td>
<td>Proof of Income</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>--------------------</td>
<td>------------------------------------------------------</td>
</tr>
<tr>
<td>Income Not Counted By Law - Domestic Volunteer Service Act</td>
<td>Title III: Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Income Not Counted By Law - Title V of the Older Americans Act</td>
<td>Experience Works, Senior Health Aides, Senior Companions, Volunteer Respite care</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Income Not Counted By Law - Title I of the Workforce Investment Act of 1998 (WIA)</td>
<td>Supportive services to WIA participants. Services include transportation, health care, child care, handicapped assistance, meals, temporary shelter, counseling, etc.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Indian Per Capita Judgment Payments</td>
<td>Payments made to any tribe or group whose trust relationship with the Federal Government has been terminated and for which Legislation in effect before October 12, 1973 authorized the disposition of its judgment funds</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Informal income</td>
<td>Income resulting from occasional sources such as yard work, child care, collecting bottles/cans, donating blood and/or plasma, etc.</td>
<td>X</td>
<td>Receipts, DHI</td>
</tr>
<tr>
<td>Inheritance</td>
<td>Property, monetary passing at owner’s death to the heir(s) on a regular basis (not counted if one time, lump sum payment)</td>
<td>X</td>
<td>Letter, Statement from lawyer, Bank Statement</td>
</tr>
<tr>
<td>In-kind Income</td>
<td>Food or rent received in lieu of wages</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Interest</td>
<td>The sum of money paid to one for the use of their money</td>
<td>X</td>
<td>Bank statement (only if amount is over $200, and is withdrawn)</td>
</tr>
<tr>
<td>Job-related expenses for non-self-employed applicants</td>
<td>Business expenses comparable to self-employment, such as a sales person, truck driver, cab driver, or mechanic</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Income types</td>
<td>Definition</td>
<td>Considered Income?</td>
<td>Proof of Income</td>
</tr>
<tr>
<td>------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>--------------------</td>
<td>------------------------------------------------------</td>
</tr>
<tr>
<td>Job related Reimbursements</td>
<td>Job related expenses such as mileage, meals, uniforms, medical expenses, etc.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Lump Sum – Non-recurring</td>
<td>Income considered of a nature not likely to occur or happen again (i.e. lump sum insurance payments, workers compensation settlements, lottery winnings, sale of property, house or car, etc.)</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Lump Sum – Recurring</td>
<td>Income received annually from the same source (i.e. wages, trust funds, etc.) Use OPUS income frequency “one time”</td>
<td>Yes</td>
<td>See definition of type of income received</td>
</tr>
<tr>
<td>Military Pay</td>
<td>Benefits paid to a person who is serving in a military force</td>
<td>Yes</td>
<td>Official document(s) stating amount (e.g. leave and earnings statement)</td>
</tr>
<tr>
<td>Pensions</td>
<td>Assistance, paid at regular intervals to a person or to the person’s surviving dependents in consideration of past services, age, merit, poverty, injury or loss sustained, etc.</td>
<td>Yes</td>
<td>Statement from source, bank statement as a last resort, only if supported with client statement/documentation about any deductions (1099R is a good back-up for bank statement)</td>
</tr>
<tr>
<td>Rebates &amp; Refunds</td>
<td>Income Tax rebates and refunds</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Rental Income</td>
<td>Income received from rental properties</td>
<td>Yes</td>
<td>Receipts, DHI, Self-Employment form</td>
</tr>
<tr>
<td>Retirement</td>
<td>A monthly payment made to someone who is retired from work</td>
<td>Yes</td>
<td>Statement from source, bank statement- as a last resort only and must include written justification</td>
</tr>
<tr>
<td>Reverse Mortgage</td>
<td>A mortgage in which a homeowner, usually an elderly or retired person, borrows money in the form of annual payments which are charged against the equity of the home</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Income types</td>
<td>Definition</td>
<td>Considered Income?</td>
<td>Proof of Income</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>---------------------------------------------------------------------------</td>
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<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Royalties</td>
<td>A compensation or portion of the proceeds paid to an owner of a right, as a patent, oil or mineral right, for the use of it or an agreed portion of the income from a work paid to its author, composer, etc.</td>
<td>X</td>
<td>Statement from source, bank statement.</td>
</tr>
<tr>
<td>Self-Employment Income</td>
<td>Income from a business, less business expenses</td>
<td>X</td>
<td>Agency developed Self-employment form and any supporting documentation that local agency may require.</td>
</tr>
<tr>
<td>Senior Companion Program</td>
<td>A program which offers an opportunity for volunteers aged 60 and over to provide companionship and support to homebound adults, most of whom are also seniors</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>SNAP (formerly Food Stamps)</td>
<td>Supplemental Nutrition Assistance Program. (J)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Social Security Disability Insurance (SSDI)</td>
<td>Social Security pays benefits to people who can't work because they have a medical condition that’s expected to last at least one year or result in death. Federal law requires this very strict definition of disability. While some programs give money to people with partial disability or short-term disability, Social Security does not. Certain family members of disabled workers can also receive money from Social Security. NOTE: Deductions CAN be taken from SSDI.</td>
<td>X</td>
<td>Official documentation for the current year such as the benefit verification letter from Social Security Administration (SSA) For more information about benefit verification, see My Social Security or use this link.</td>
</tr>
<tr>
<td>Social Security retirement benefits</td>
<td>The Social Security Retirement Insurance Benefits are a federally funded program administered by the U.S. Social Security Administration (SSA). These are benefits that apply to individuals who have earned enough Social Security credits and are at least age 62.</td>
<td>X</td>
<td>Official documentation for the current year such as the benefit verification letter from Social Security Administration (SSA) For more information about benefit verification, see My Social Security or use this link.</td>
</tr>
<tr>
<td>Income types</td>
<td>Definition</td>
<td>Considered Income?</td>
<td>Proof of Income</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>---------------------------------------------------------------------------------------------</td>
<td>--------------------</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| **Supplemental Security Income (SSI)** | Supplemental Security Income (SSI) is a Federal income supplement program funded by general tax revenues (not Social Security taxes):  
• It is designed to help aged, blind, and disabled people, who have little or no income; and  
• It provides cash to meet basic needs for food, clothing, and shelter.  
(Note: no deductions are taken from SSI) | Yes                | Official documentation for the current year such as benefit verification letter from SSA, bank statement or as a last resort, SNAP documents may be used. |
| **Strike Benefits**              | Benefit from Union Action                                                                     | Yes                | Copy of check, statement from Union                                               |
| **Student Aid**                  | The full amount of all financial assistance paid directly to the student or to the educational institution. This includes: scholarships, grants, or loans, or GI Bill funds |                        |                                                                                  |
| **Temporary Assistance For Needy Families (TANF)** | A program which provides assistance to needy families so that children may be cared for in their own homes or in the home of relatives | Yes                | Official documentation from TANF/DHS/SNAP office showing amount of assistance     |
| **Third Party Payments**         | Payment that goes directly to landlord, utility bill, etc. on behalf of the household           | Yes                |                                                                                  |
| **Tribal General Assistance (Tribal TANF)** | A program that provides assistance to tribal families                                           | Yes                | Official documentation from a tribal office showing the amount of assistance      |
| **Tribal per capita payments from casinos** | Casino profits paid by a tribe directly, including payments made to minors                     | Yes                | Statement from tribe regarding payment amounts                                    |
| **Trust Fund**                   | Money, securities, property, etc. held in trust and received on a regular basis (not counted if one time, lump sum payment) | Yes                | Letter, statement from lawyer, bank statement                                    |
| **Unemployment Insurance**       | An allowance of money, usually weekly, to an unemployed worker by a state or federal agency     | Yes                | Printout or statement from the employment office.  
(ensure that gross weekly benefit amount is used)                                  |
<table>
<thead>
<tr>
<th>Income types</th>
<th>Definition</th>
<th>Considered Income?</th>
<th>Proof of Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utility Allowance</td>
<td>An allowance of money, usually monthly, used to subsidize a person’s utility costs.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Veterans Benefits</td>
<td>Benefits paid directly to a person who has served in a military force or a surviving family member</td>
<td>X</td>
<td>Benefit award letter, correspondence from the VA office, benefit payment check, bank statement</td>
</tr>
<tr>
<td>Women, Infant, and children (WIC) Program</td>
<td>Women, Infants, and children (supplemental food program)</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Workers Compensation</td>
<td>Compensation for time lost due to a work related illness or injury</td>
<td>X</td>
<td>Check stubs, statement from Workers Compensation, bank statement (as a last resort)</td>
</tr>
<tr>
<td>Work Study (See Student Aid)</td>
<td>The Work-Study program helps to provide graduates and undergraduates with part-time employment during the school year by paying a portion of the student’s salary</td>
<td>X</td>
<td>Pay stubs</td>
</tr>
</tbody>
</table>
Proof of Income

Count income for all household residents. The following items are acceptable as proof (verification) of income. If other items are submitted, please check with your supervisor for approval.

All income that comes to the head of household or adult household member, in the name of a minor household member, must be counted as income.

- **Adoption Assistance** – Official state and/or court documents.
- **Alimony** – Court order stating amount of support paid or received, written statement from person paying support, or if client is receiving support as part of an informal agreement and obtaining documentation creates a hardship on the client, a Declaration of Household Income (DHI) Form must be completed and signed.
- **Annuities** – Statement from the investment firm listing amount and frequency or bank statement (as a last resort).
- **Cash Gifts: Regular** – Written statement from person providing support, (DHI) form, and/or other local agency form(s). Gifts given for three consecutive months or more will be counted as income.
- **Child Support** – Court order stating amount of support paid or received, documentation from the Department of Child Support, bank statement (as a last resort), Reliacard statement, written statement from person paying support; or if the client receiving support as part of an informal agreement and obtaining documentation creates a hardship on the client, a (DHI) and/or other local agency form(s) must be completed and signed.
- **Contract for Deed** – Contract documents, receipts.
- **Disability Insurance (private)** – see “Private Disability Insurance and Gross Income” at the end of Section Two
- **Dividends** – Letter from corporation listing amount, bank statement.
- **Declaration of Household Income (DHI) and/or other local agency form(s)** – Must be completed and signed.
- **Earned Income** – Wages, Salaries, Commissions, Bonuses, Profit Sharing, Tips, Vacation Pay, Overtime Pay, Severance Pay, Sick Leave – Wage stubs or statement from employer specifying gross wages for one of the following time periods; one (1) month, three (3) months or twelve (12) months. (Wages earned through an employer.) Local agencies will establish additional policies or documentation requirements to ensure accuracy and consistency.
- **Foster Care** – Official state and/or court documents.
- **Informal Income** – Receipts, Declaration of Household Income (DHI).
- **Inheritance**– Letter, statement from lawyer, bank statement.
**ENERGY ASSISTANCE PROGRAMS**

**Section Two: Income Intake Manual**

- **Interest** – Bank statement(s). Only to be counted if over $200.00 per year and is withdrawn.

- **Lump Sum Recurring** – See definition of type of income received for proof required if it is income received annually from the same source (e.g. wages, trust fund, etc.) Use OPUS income frequency “one time”

- **Military Pay** – Official document(s) stating amount (e.g. leave and earnings statement, bank statement). When a household member is deployed, that person remains a household member. The deployed person’s gross income is counted as household income.

- **Pensions** – Statement from source, bank statement as last resort with documentation.

- **Rental Income** – Receipts, DHI, or self-employment form.

- **Retirement** – Statement from source or bank statement as a last resort with written justification.


- **Self-Employment Income** – Agency developed self-employment form and any supporting documentation that local agency may require.

- **Social Security Disability Insurance** – Official documentation for the current year such as the benefit verification letter from Social Security Administration (SSA). For more information about benefit verification, see My Social Security or use this link. Note that deductions CAN be taken from SSDI.

  1. **Social Security retirement benefits** – The following list is acceptable benefit verification if the applicant reports receipt of Social Security (SS) retirement benefits SSA Benefit Verification letter for the current year. For more information about benefit verification, see My Social Security or use this link.

  2. **SS Calculator** (Follow this link to an Excel version of the calculator and refer to the addendum at the end of this section for policies around using the calculator.)

- **Supplemental Security Income (SSI)** – SSI Benefit verification letter for the current year, or bank statement as a last resort (because no deductions are taken from SSI).

- **Strike Benefits** – Copy of check, statement from Union.

- **Temporary Assistance For Needy Families (TANF)** – Documentation showing amount of assistance.

- **Tribal per capita payments from casinos** – Statement from tribe regarding payment amounts.

- **Trust Fund** – Letter, statement from lawyer, bank statement.

- **Unemployment** – Printout or statement from the employment office; ensure that gross weekly benefits amount is used to calculate income.

- **Veterans Benefits** – Benefit award letter, correspondence from the VA office, benefit payment check, bank statement.
• **Workers Compensation** – Benefit Statement, check stub or bank statement (as a last resort).

• **Work Study** – Pay stubs.

### What Is Not Income:

• **Cash Gifts: Irregular** – Irregular cash gifts or payment on behalf of the household, includes loans and cash draw down on credit cards. Gifts given for three consecutive months or more will be counted as income.

• **Child Tax Credit (CTC)** – A tax credit for parents with dependent children.

• **DHS cash assistance** – SNAP in the form of cash instead of food stamps.

• **Earned Income Credit (EIC)** – A tax credit for low income households.

• **Employers paid fringe benefits** – Health insurance, retirement, etc.

• **Energy Grant(s)** – Money received under last year’s Low-Income Energy Assistance Program (LIHEAP), Oregon Energy Assistance Program (OEAP), or from private utility energy assistance programs.

• **Federal Disaster Payments** - Payments made by federal agencies under a residential declaration of disaster including, but not limited to, individual family grants from the Federal Emergency Management Agency (FEMA).

• **Food Stamps (SNAP)** – See SNAP.

• **Foster Grandparents Program** – A program for limited income people age 60 and older to serve as extended family members.

• **GI Bill**- Any of various Congressional bills, enacted to provide funds for college educational cost, which may include tuition, fees, books, and housing costs.

• **Home Ownership Voucher Program** – Section 8 Program. Payments may be cash payments or payments made on behalf of the household.

• **Income Earned by household members still enrolled in high school** – Income earned by household members eighteen (18) and over who are enrolled in high school.

• **Income Earned by minors** – Income earned by household members under the age of eighteen (18).

• **Income Not Counted By Law** – Income paid within the following programs:

  **Domestic Volunteer Service Act of 1973 (P.L. 93113)**

  **Title I**: Volunteers in Service to America (VISTA), AmeriCorps, University Year for Action (UYA), Urban Crime Prevention Program.

  **Title II**: Retired Senior Volunteer Program (RSVP), Foster Grandparent Program (FGP), Older Americans Community Service Program (Senior Health Aides, Senior Companions).
Title III: Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE).

Title V of the Older American Act: Experience Works, Senior Health Aides, Senior Companions, Volunteer respite care providers.

Title I of the Workforce Investment Act of 1998 (WIA): Supportive services to participants. Supportive services include assistance that enables people to participate in the program, e.g., transportation, health care, child care, handicapped assistance, meals, temporary shelter, counseling, and other reasonable expenses or participation in the program. Exclude all WIA-supported income received by dependent household members who are 18 years old or younger or attending school K-12.

- Indian Per Capita Judgment Payments – Payments made to any tribe or group whose trust relationship with the Federal Government has been terminated and for which Legislation in effect before October 12, 1973 authorized the disposition of its judgment funds.

- In-kind Income – Food or rent received in lieu of wages.

- Job Related Expenses for Non Self Employed Applicants – Business expenses comparable to self-employment, such as a sales person, truck driver, cab driver, or mechanic.

- Job Related Reimbursements – Job related expenses such as mileage, meals, uniforms, medical expenses, etc.

- Lump Sum: Non-recurring – Income considered of a nature not likely to occur or happen again (i.e. lump sum insurance settlements, workers compensation settlements, lottery winnings, sale of property, house or car, etc.).

- Rebates and Refunds – Income tax refunds, Property tax refunds, renters’ refunds, security deposits of utilities and rentals.

- Reverse Mortgage – A mortgage in which a homeowner, usually an elderly or retired person, borrows money in the form of annual payments which are charged against the equity of the home.

- Senior Companion Program – A program which offers an opportunity for volunteers aged 60 and over to provide companionship and support to homebound adults, most of whom are also seniors.

- SNAP – Supplemental Nutrition Assistance Program – Formerly known as Food Stamps. Assistance given under a federal entitlement program to eligible persons for food at designated grocery stores or markets.

- Student Aid (see Work Study) – The full amount of all financial assistance paid directly to the student or to the educational institution. This includes: scholarships, grants, or loans.

Private Disability Insurance and Gross Income

Gross income is defined as “total household income from all sources before any deductions.

An exception to this definition is with regard to certain private disability insurance payments. While the terminology and the format of the document(s) will vary between insurance companies, if we count the gross amount from the insurance company and we also count the Social Security benefit, we may be counting the Social Security benefit twice.

In some insurance documents the maximum amount the client can receive may be referred to as the “gross amount” or “gross benefit” or “total benefit.” There may also be a deduction for a Social Security amount referred to as an “offset” or “deduction” and then an “adjusted net” or “net benefit amount.”

In these specific cases, the only way to get the correct gross income amount may be to use what’s often referred to as the “net” amount by some insurance companies. However, clear documentation is essential in determining accurate income for the household. It is also important to note that the amount of the “offset” or “deduction” in the insurance documents must match the amount in the SSA benefit verification letter.

The examples below were taken from actual client files:

Example A

Client A receives a gross monthly benefit of $1,166.39, less a Social Security offset in the amount of $847.00 resulting in a net monthly benefit of $319.39. Client A also presents a benefit verification letter from the Social Security Administration showing a benefit of $847.00.

Under the current policy, we would use the gross amount of $1,166.39 and add the SS income of $847.00 for a total gross income amount of $2,013.39.

In this case however, the maximum the client will ever receive from both sources is $1,166.39. This is the amount that should be used to calculate the appropriate energy assistance benefit.

Example B

The disability insurance benefit for Client B is determined as follows:

$1,786.15 Gross Monthly Benefit
-$825.00 Deduction for Social Security Disability
-$414.00 Deduction for Dependent Social Security Disability
+$162.18 Cost of Living Adjustment

=$709.33 Monthly Benefit Paid

In this example and under the current policy, we would add the gross amount of $1,786.15 and the $162.18 Cost of Living Adjustment for a total of $1,948.33. Because we also have Social Security benefit verification letters, we would add the Social Security benefits of $825.00 and $414.00 for a total gross income from both sources of
$3,187.33.

Here again, the maximum the client will ever receive from both sources is $1,948.33 ($1,786.15 + $162.18). This is the amount that should be used to calculate the appropriate energy assistance benefit.

**Calculator for Social Security Retirement Benefits**

- This calculator is for use only between December and January when:
  - An applicant does not have a current Benefit Verification Letter AND
  - It would be an unreasonable hardship to obtain a current Benefit Verification Letter AND
  - [My Social Security](https://my和社会security) is not an option AND
  - The automated SSA telephone system 800-772-1213 is also not an option.

- SSA Cost of Living information for the next calendar year is generally released in October.

- Cost of living increases take effect on January 1 for both Social Security Retirement and SSI recipients. If the applicant’s current benefit amount (January 1 through December 31) is known and the amount of the cost of living increase is known, the previous calendar year monthly benefit amount can be estimated.

- Benefit Verification Letters were generally released in January but are now available electronically in December.

- The calculator may not be used in two consecutive years for any client.

- If the calculator is used, a copy of the calculator must be printed and included in the client file in addition to whichever benefit verification letter was provided by the client. In OPUS, the income verification drop down box must show that the calculator was used and must also include a brief description as to why it was necessary.

- Use of this calculator is optional. However, if an agency decides to use it, the calculator must be used consistently for all clients in similar circumstances.

**October – January**

Ideally, the Benefit Verification Letter from the previous program year would be available from the client file from that year.

**December**

Now that SSA is moving away from mailing Benefit Verification Letters, it may be more likely that a client may come in with a new letter for CY23 when documentation is needed for November. If the letter used for the previous PY is not available or accessible from the old client file, the calculator may be used.
January

Client comes in, has a new benefit verification letter for CY23 but we need income documentation for December, which is the previous year for SSA. Here again, if the letter used for the previous PY is either unavailable or inaccessible, the calculator may be used.

Social Security Income Calculation Worksheet

Social Security Retirement & Supplemental Security Income (SSI) recipients received a cost of living increase of 2.8% for Calendar Year 2019. The standard 2019 Medicare Part B Premium is $135.50 for 2019. For 2020 the COLA is 1.6% and the Part B Premium is $144.60.

Social Security Retirement

To calculate 2019 (prior year) Social Security income amount from a 2020 benefit verification letter:

1. ENTER the Social Security benefit amount for 2020, minus the medicare premium.
   - a.

   if the 2020 benefit verification letter shows something other than the standard Medicare Part B amount and/or other deductions are shown, put the total amount in b. The standard Medicare Part B premium for 2020 is $144.60. The 2019 premium was $135.50.

2. b.

3. CALCULATION: Adds lines a and b (Results in estimated 2020 gross benefit).
   - c. $ -

4. Cost of living adjustment (COLA) factor =COLA % increase/100=1=factor entered
   - d. 1.016
   - e. 1.6%

5. Divide line d by line c. The result is the estimated monthly gross 2019 income.
   - e. $ -

This estimated gross income calculator may only be used in December and January when:

- An applicant does not have a current Benefit Verification Letter AND
- It would be an unreasonable hardship to obtain a current Benefit Verification Letter AND
- My Social Security ([https://www.ssa.gov/myaccount/](https://www.ssa.gov/myaccount/)) is not an option AND
- The automated SSA telephone system 800-772-1213 is also not an option.

To calculate 2020 Social Security income amount from a 2019 benefit verification letter:

1. ENTER the Social Security benefit amount for 2019, minus the medicare premium.
   - a.

   The standard 2019 Medicare Part B premium is $135.50. If 2019 benefit verification letter shows something other than the standard Medicare Part B amount and/or other deductions are shown, put the total amount in b. The standard Medicare Part B premium for 2020 is $144.60.

2. b.

3. CALCULATION: Adds lines a and b (Results in estimated 2019 gross benefit).
   - c. $ -

4. 2020 Cost of Living Adjustment (COLA) factor =COLA % increase/100=1=factor entered
   - d. 1.016
   - e. 1.6%

5. This is the estimated monthly gross 2020 income.
   - e. $ -

This estimated gross income calculator may only be used in December and January when:

- An applicant does not have a current Benefit Verification Letter AND
- It would be an unreasonable hardship to obtain a current Benefit Verification Letter AND
- My Social Security ([https://www.ssa.gov/myaccount/](https://www.ssa.gov/myaccount/)) is not an option AND
- The automated SSA telephone system 800-772-1213 is also not an option.

A bank statement may not be used because it will not show other deductions.

Part B is not mandatory so this could be zero.

Estimated monthly gross is what we will use for income eligibility, reporting, and determining energy burden.

Click here to go to the fillable [2020 Social Security Calculation Worksheet](#) posted on OHCS website.
SECTION THREE: PAYMENT TYPES

This Section contains:

✓ Payment Types:
  - Regular/Standard
  - Roomer/Boarder/Owner
  - Crisis
  - Combo
  - Fuel (LIHEAP Only)
  - Heating and Cooling Installation, Repair/Replacement (LIHEAP Only)
  - Health & Safety (LIHEAP Only)
  - Supplemental
  - Agency Pay

✓ Standard Benefits and Primary Heating Source (LIHEAP Only)
✓ Direct Pays

Payment Types

The following are the different types of payments for energy assistance and their definitions:

- **Regular/Standard Payment** – The standard energy assistance payment determined by the LIHEAP/OEAP Benefits Matrix provided by OHCS each program year. Households who receive a regular payment are not required to have a past due notice, shut-off notice, nor do they have to have an empty (or almost empty) tank.

  All households must demonstrate an energy burden using acceptable forms of documentation. Applicants residing in subsidized housing with energy costs included in rent are not considered vulnerable to rising energy costs, and are therefore not typically eligible.

- **Roomer/Boarder/Owner Payment** – If everyone in the household is not interested in applying, the Roomer/Boarder or Owner may each apply separately, as an individual household. In these types of situations, the applicant would be eligible to receive 50% of a regular payment based on the Benefit Matrix (See Roomer/Boarder definition on page 1.16).

- **Crisis Payment** – An amount of up to $750, based on actual need, may be paid to help alleviate an existing crisis. Households must have received a Regular Payment prior to receiving crisis payment (See Section Four on Crisis Services.). A Crisis payment should not be used to supplement the cost of delivered fuels and/or delivery costs.

- **Combo Payment** – A payment made on behalf of a household to prevent disconnection, facilitate reconnection or replenish fuel supply. A combo payment is issued as a regular and a crisis payment at the same intake appointment. The amount may not exceed the total of a regular payment plus the maximum
crisis payment. Like a crisis payment, a combo payment should reflect actual need and should not be used to supplement the cost of delivered fuels and/or delivery costs.

- **Fuel Payment (LIHEAP Only)** - For those households where a Standard benefit will not cover minimum delivery requirements (oil, propane, wood), a Fuel Payment may be issued for up to $650. This type of payment is an alternative to Regular/Standard benefits, and should only be used when circumstances require. Households who receive a Fuel Payment are still eligible for a Crisis Payment. A fuel payment cannot be split between vendors (*Compare this amount to the standard benefit amount to ensure that the household is receiving the highest amount*).

- **Heating/Cooling Equipment Repair/Replacement (LIHEAP only)** - A maximum of $6,000 may be used to install, repair or replace unsafe or dysfunctional heating/cooling equipment. In certain cases, the amount to install, repair or replace this equipment may cost more than $6,000, in these cases, approval from OHCS must be obtained prior to work. This includes heating and cooling systems, or other equipment necessary to alleviate crises or to resolve a health and safety risk. Wherever possible, LIHEAP agencies should partner with the Weatherization provider in their area to audit and inspect installation, repair/replacement work and considerable effort should be made to supplement LIHEAP funds with other leveraged resources. Please note that LIHEAP is not to be used for efficiency upgrades or for other appliances such as water heaters.

- **Portable/Window Air Conditioning Units:**
  The purchase of portable/window air conditioning units with LIHEAP is allowable. Purchase of portable/window AC units is intended only for those without existing cooling equipment in the household and is limited to one unit per every three program years (unless extenuating circumstances are demonstrated to warrant replacement/more frequent access).

  A *portable unit* is generally defined as a self-contained, portable system ideal for cooling a targeted area of a home. Typically, portable units sit on the floor inside the home, have an exhaust tube that sits in the window and plug into a traditional electrical outlet (example below).

  A *window air conditioning unit* is generally defined as a self-contained semi-portable unit ideal for cooling a targeted area of a home. These units sit inside the window and plug into a traditional electrical outlet (example below).

  To be deemed a portable/window unit, the item should not require fixed installation, hard wiring, duct work, additional electrical etc. If these more detailed items are required, traditional rules for heating/cooling equipment repair/replacement as outlined above, must be followed.
Unlike permanent cooling/heating equipment, these types of cooling equipment do not require professional installation, inspection, homeowner authorization etc. However, agencies are encouraged to have options available to assist qualified clients in installing said items should they be incapable/unsure of doing so themselves. Typically, agencies will purchase these items with unrestricted funds and reimburse themselves via the agency pay payment type as they are given to individual clients. In addition to the routine requirements for a completed file, a receipt of purchase of the equipment and/or a tracking sheet showing a bulk purchase must be included in the file. The receipt/tracking sheet must at a minimum, include the date of purchase, cost and clearly identify what the item was.

Please note: Portable/window AC units become the property of the client, agencies are prohibited from “loaning” AC units to clients if purchased with LIHEAP dollars.

Agencies must have contracts in place with HVAC vendors for installation, repairs or replacements. In cases where no such contract is in place, 3 proposals must be obtained. The winning proposal must at a minimum include: address of residence, amount of proposal, equipment specifications, date of proposal, and hardware to be installed.

Please note: The applicant does not need to be the homeowner. However; in the case of a rental household, every attempt must be made to have the equipment replaced by the homeowner. Repairs/replacements on rentals still require homeowner authorization. Repairs/replacements for renters must be treated equitably to those of homeowners.

In some situations, a fuel conversion may be necessary to alleviate a crisis or resolve a health and safety risk pertaining to a heating/cooling system repair/replacement. Fuel conversions should be carefully weighed against other options and although it is not required, it is recommended to get OHCS approval prior to proceeding.

In addition to the standard, required information that must be included in any energy assistance file, each heating/cooling equipment repair/replacement must have the following:

1. **Homeowner authorization**: This will be a locally developed form that must be signed by the homeowner authorizing installation, replacement and/or repair of the existing equipment. This form must be signed even if the applicant is the homeowner. In addition, proof of homeownership must be provided via
printout from local tax assessor’s website/office. (Please contact OHCS if there is difficulty obtaining these documents).

2. **Pre-Inspection**: A pre-inspection must be completed to make sure the equipment or system is unsafe or dysfunctional.

3. **Proposal**: A proposal from HVAC vendor outlining details regarding all recommended work to be completed, and price. The proposal must be approved by an authorized agency staff member (usually via signature).

4. **Change order**: If the cost of the repair/replacement changes for any reason, a change order must be documented in the file and must include an authorized agency staff member approval.

5. **Carbon monoxide alarm**: A carbon monoxide alarm must be installed (according to manufactures recommendation) in all homes receiving a heating/cooling equipment repair/replacement. If there is an existing carbon monoxide alarm, it must be tested/certified as functioning according to manufacturer’s standards. Installation of alarm, or testing/certification of existing alarm must be documented in the file.

6. **Combustion testing**: In homes with combustion appliances, combustion testing must be completed by a qualified technician (e.g. weatherization inspector, HVAC technician, staff person trained in the use of testing equipment). At a minimum, this testing must include ambient carbon monoxide testing and be documented in the file. Combustion appliances include but are not limited to: natural gas, propane, wood, pellet, oil, kerosene, etc.

7. **Post inspection**: A post inspection must be completed by an agency representative or a designated third party (e.g. weatherization inspector, HVAC technician (other than the one who completed the installation of the work) or a staff person trained in the use of equipment). The equipment must be run through one cycle to verify work was completed in a workmanlike manner and according to the manufactures recommendations.

8. **Invoice**: Each heating/cooling equipment repair/replacement must include an invoice for all work completed. At a minimum, the invoice must indicate the site address of the work, date, include details regarding work completed, and a total amount due. The invoice must be approved by an authorized agency staff member.

9. **Data Entry**: It must be indicated in OPUS, in the payment screen if this payment was a “Restoration” or “prevention” of the home heating system.

In some cases, a fuel conversion may be necessary to alleviate crisis or to resolve a health and safety risk. Fuel Conversions should be carefully weighed against other options when assessing a crisis situation.

**Please note: This payment type may never be made as a direct pay.**

- **Health & Safety (LIHEAP Only)** – A maximum of $1,000 may be used for energy related household supplies or equipment necessary to alleviate a crisis or to resolve a health & safety risk (excluding heating or cooling equipment installation, repair/replacements). This payment type is not intended to be used for bill payment assistance, general household repairs or construction, energy efficiency measures, or for
water/sewer costs. It is also not to be used for other household appliances such as water heaters, stoves, or refrigerators. Considerable effort should be made to supplement LIHEAP funds with other leveraged resources. **Please note: This payment type may never be made as a direct pay.**

- **Supplemental Payments** - Some agencies may opt to provide payments to households in addition to the benefits listed above. These could include, but are not limited to incentives, co-payments, emergency relief, or targeted assistance. Agencies wishing to utilize this payment option must have approval from OHCS within their local work-plan.

- **Agency Pay** - A reimbursement to your agency for goods and/or services purchased for a client. Example: Pre-purchased space heaters and/or fans etc. This is not to be used to circumvent the policies outlined in this manual or the vendor contracts.

**Standard Benefits and Primary Heating Source (LIHEAP Only)**

In cases where none of the energy assistance benefit will be directed toward the primary heating source (indicated in OPUS): The standard benefit must be based on the energy type where the majority of assistance will be applied. If splitting the payment equally, the payment must be based on the primary heat source.

Examples of circumstances where this may occur:

- A household’s primary heat source is oil—however, they were able to pre-purchase a full tank during the summer, and need electricity to utilize heating systems.

- A household is on a time payment plan with their primary heating source, and need a secondary energy source paid in order to heat their home.

- The account for the primary heat source is current and the secondary source is at risk of disconnection.

**Direct Pays**

Direct payments are allowable in LIHEAP only. OEAP is always paid to either Portland General Electric (PGE) or Pacific Power (PAC) on behalf of their customers.

Wherever possible, energy assistance benefits should be provided directly to the utility or vendor. However, in some cases, energy assistance benefits must be paid directly to the household.

Direct household payments should only be used in the following cases:

1. Payments to renters who’s heating or cooling cost are included in rent or who pay heating or cooling costs directly to their landlord. A Landlord letter, rental agreement or lease must be provided for verification. Applicants residing in subsidized housing **with heating or cooling costs included in rent** are not considered vulnerable to rising energy costs, and are therefore generally not eligible.

2. For certain bulk fuel (e.g. oil, wood, pellets, and propane) situations and for Households who utilize home energy suppliers without a current, signed vendor agreement are eligible for Direct Payment:
   a) All effort must be made to pay a contracted bulk fuel vendor. This may be a vendor contract that is modified or pared down from the State Provided Template.
b) If there is no vendor contract in place, all effort should be made to use standardized receipts/documentation for Direct Payments for Bulk Fuels. This includes Name of purchaser, items to be purchased, cost of items, and vendor information (Name, phone, date of sale, and address). This “receipt” could be completed prior to or after purchase, depending on local agency policy.

c) If a client has pre-purchased bulk fuels, and has difficulty obtaining/completing the above documentation, a Direct Payment can be made if current or previous one heating season receipts are provided. Using prior heating season’s receipts as documentation— if a client resides at a different address than is noted on the receipt or reported in a prior year, proof of heating fuel at the current residence will be required.

d) If a client is unable to pre-purchase bulk fuel for reimbursement, a quote will suffice for documentation. Quotes must be from the vendor and/or verified by the intake worker. Quotes must include at a minimum: name of vendor, name of vendor rep. providing quote, date, name of client, delivery or service address, amount of goods to be purchased and cost. It is recommended that agencies use a standardized ‘quote’ form.

e) Agencies are encouraged to only pay for the amount of bulk fuel listed on the receipts up to the standard payment benefit, and apply any remaining benefit toward an alternate energy source. If no alternate energy source is available, a direct payment must be issued for the entire benefit.
SECTION FOUR: CRISIS PAYMENTS

This Section contains:

✓ Crisis Payments
✓ Crisis Services
✓ Life Threatening Crisis

Crisis Payments

A crisis exists when a household faces a sudden or unexpected event beyond their control resulting in the inability to pay household heating or cooling costs.

A crisis may be caused by, or defined as:

- Medical conditions - high costs or essential equipment
- Sudden loss of job, public benefits, or other income
- Malfunction of heating or cooling equipment
- Domestic violence
- Other circumstances that may pose a potential health and/or safety threat.

Circumstances which do not necessarily qualify as a crisis include:

- Chronic non-payment of utility/fuel costs
- Unexplained or excessively high utility/fuel costs
- Other situations which are not sudden, unexpected, or beyond the control of the household

While a household must have exhausted a regular benefit prior to receiving a crisis benefit, an agency may provide both simultaneously (See Combo Payment page 3.2).

Crisis payments should reflect actual need and, with the exception of prepaid accounts, should only result in a credit if well justified. (For prepaid accounts, it is understood that any payment will result in a credit.) Justification for the crisis benefit and amount must be documented, particularly when the payment will result in a credit on a non-prepaid vendor/utility account. If the crisis payment is to a prepaid account, please include that information in the comments.

Also note that Crisis Payments should not be utilized to fulfill high pricing or delivery charges for bulk fuels. Please use a Fuel Payment for these situations.

As with standard benefits, coordinators are encouraged to contact the state Energy Assistance Coordinator or Compliance Officer if they feel extreme circumstances warrant an exception to the maximum benefit guidelines.

All Crisis Payments must be approved by the local energy assistance coordinator, or their designee, with a description of the situation written in the Comments Section of the Authorization form and in OPUS.
Crisis Services

LIHEAP agencies must ensure that energy crises are responded to from December 1st through March 15. If funds are exhausted before March 15, staff must be available to assist households in crisis by providing information, referral, advocacy, and/or case management services.

Life-Threatening Crisis

A life-threatening crisis exists when a household member(s) health and/or well-being would likely be endangered by the interruption of heating or cooling/energy services. Generally, this would require an active medical certificate but may be deemed a life-threatening crisis by the local service provider if extreme circumstances are present. Example: Extreme cold or heat, supply shortage of deliverable fuels, etc.

In addition to the above, the household must either be disconnected or at imminent risk of disconnection (within 5 days of application) to be considered as having a life-threatening crisis situation. Households with deliverable fuels must either be out of fuel or at imminent risk of being out of fuel.

Life-threatening crisis situations must be addressed within either 18 (if already disconnected) or 48 (at risk of disconnection) hours of application. These timeframes must be documented to ensure compliance with the federal requirement and must include comments outlining how the situation was addressed.

Agencies are authorized to provide any of the following forms of assistance, or a combination thereof which best resolves a given emergency situation:

- **Bill Payment Assistance**
- **Heating or cooling system installation, repair, or replacement**—includes repair, replacement, or conversion of inoperative, non-functional, or unsafe household heating or cooling equipment necessary to alleviate a potential energy crisis. When considering equipment installation, repair, or replacement, considerable effort should be made to supplement LIHEAP funds with other leveraged resources
- **Other Equipment Repair/Replacement**—includes repair or replacement of inoperative, non-functional or unsafe household appliances/equipment necessary to alleviate home energy crises. When considering equipment repair or replacement, considerable effort should be made to supplement LIHEAP funds with other leveraged resources
- **Other Emergency Services**—including, but not limited to information, referral, coordination of benefits, advocacy, case management and/or other goods and services necessary to relieve immediate threat to health and safety

The maximum benefits payments for crisis assistance are:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year-Round Crisis Energy Assistance</td>
<td>$750</td>
</tr>
<tr>
<td>Non-Furnace Health and Safety</td>
<td>$1000</td>
</tr>
<tr>
<td>Heating or Cooling Equipment Installation, Replacement, or Repair</td>
<td>$6000</td>
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</table>
In the event of household energy-related emergencies, in-kind benefits may be used to augment crisis assistance. These include, but are not limited to sleeping bags, clothing, blankets, and emergency disaster kits.

*These are minimum requirements; individual agencies may have additional requirements.*  *Staff should verify crisis-related policies and procedures with their local energy assistance coordinator.*
SECTION FIVE: ELIGIBILITY GUIDELINES AND BENEFIT MATRICES

This Section contains:

✓ Eligibility Income Guidelines
✓ Standard Benefits and Primary Heating Source Matrices
  o Benefit Matrix – Region 1
  o Benefit Matrix – Region 2

Eligibility Income Guidelines

60% of State Median Income by Household Size
For Use in Federal Fiscal Year 2023

Estimated State Median by Household Size-Source HHS

<table>
<thead>
<tr>
<th>Household Unit Size</th>
<th>Annual Gross Income*</th>
<th>Monthly Gross Income*</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>$31,266</td>
<td>$2,605.50</td>
</tr>
<tr>
<td>2</td>
<td>$40,886</td>
<td>$3,407.17</td>
</tr>
<tr>
<td>3</td>
<td>$50,506</td>
<td>$4,208.83</td>
</tr>
<tr>
<td>4</td>
<td>$60,126</td>
<td>$5,010.50</td>
</tr>
<tr>
<td>5</td>
<td>$69,747</td>
<td>$5,812.25</td>
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<tr>
<td>6</td>
<td>$79,367</td>
<td>$6,613.92</td>
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<tr>
<td>7</td>
<td>$81,171</td>
<td>$6,764.25</td>
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<tr>
<td>8</td>
<td>$82,974</td>
<td>$6,914.50</td>
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<tr>
<td>9</td>
<td>$84,778</td>
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<td>10</td>
<td>$86,582</td>
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<tr>
<td>11</td>
<td>$88,386</td>
<td>$7,365.50</td>
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<tr>
<td>12</td>
<td>$90,189</td>
<td>$7,515.75</td>
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<tr>
<td>Each Additional Member</td>
<td>$1,803</td>
<td>$150.25</td>
</tr>
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</table>

* Gross income means all household income before any deductions
**2023 Benefit Matrix for Region 1** – Benton, Clackamas, Clatsop, Columbia, Coos, Curry, Douglas, Jackson, Josephine, Lane, Lincoln, Linn, Marion, Multnomah, Polk, Tillamook, Washington and Yamhill Counties

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<tr>
<th>Income Range</th>
<th>HEATING</th>
<th>COOLING</th>
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<tbody>
<tr>
<td></td>
<td>Electricity</td>
<td>Heating Oil</td>
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<tr>
<td><strong>REGION 1</strong></td>
<td>$450</td>
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<td>$0 - $7,817</td>
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<tr>
<td>$7,817 - $15,633</td>
<td>$290</td>
<td>$600</td>
</tr>
<tr>
<td>$15,634 - $23,450</td>
<td>$250</td>
<td>$430</td>
</tr>
<tr>
<td>$23,451 - $31,266</td>
<td>$580</td>
<td>$750</td>
</tr>
<tr>
<td>$30,664 - $40,886</td>
<td>$375</td>
<td>$750</td>
</tr>
<tr>
<td>$45,096 - $60,126</td>
<td>$270</td>
<td>$560</td>
</tr>
<tr>
<td>$10,222 - $12,627</td>
<td>$580</td>
<td>$750</td>
</tr>
<tr>
<td>$12,628 - $15,032</td>
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</tr>
<tr>
<td>$15,033 - $30,064</td>
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<td>$30,666 - $40,886</td>
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</tr>
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<td>$23,451 - $31,266</td>
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<tr>
<td>$300,000 - $350,000</td>
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**2023 Benefit Matrix – Region 2**


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<th>Natural Gas</th>
<th>Wood/Pellets</th>
<th>Electricity</th>
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SECTION SIX: AGENCY NETWORK INFORMATION

This Section contains:
✓ Oregon Contacts for Community Action Agencies
✓ Energy Assistance Referral Listing by County

Oregon Contacts for Community Action Agencies

These low-income energy and housing resources include:

Link to Oregon Housing and Community Services Energy Assistance and Weatherization Programs:
https://www.oregon.gov/ohcs/Pages/energy-weatherization-programs-oregon.aspx

Oregon Energy Coordinators Association
http://www.warmandsafenow.com

Community Action Partnership of Oregon
http://www.caporegon.org

Community-based organizations that provide energy assistance programs in Oregon include:

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<tr>
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<tbody>
<tr>
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<td>CAPECO</td>
<td>Community Action Program of East Central Oregon</td>
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<td>CAT</td>
<td>Community Action Team, Inc.</td>
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<tr>
<td>CCNO</td>
<td>Community Connection of NE Oregon</td>
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<td>CCSSD</td>
<td>Clackamas County Social Services Division</td>
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<tr>
<td>CinA</td>
<td>Community In Action</td>
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<tr>
<td>CSC</td>
<td>Community Services Consortium</td>
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<td>KLCAS</td>
<td>Klamath-Lake Community Action Services</td>
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<tr>
<td>LCHSD</td>
<td>Lane County Human Services Division</td>
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<tr>
<td>MCCAC</td>
<td>Mid-Columbia Community Action Council</td>
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<tr>
<td>MULTCO</td>
<td>Multnomah County Department of County Human Services</td>
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<tr>
<td>MWVCAA</td>
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<tr>
<td>NI</td>
<td>NeighborImpact</td>
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<tr>
<td>ORCCA</td>
<td>Oregon Coast Community Action Agency</td>
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<tr>
<td>UCAN</td>
<td>United Community Action Network</td>
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<tr>
<td>YCAP</td>
<td>Yamhill Community Action Partnership</td>
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# Energy Assistance Referral Listing By County

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<th>PHONE</th>
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<tr>
<td>Baker</td>
<td>Community Connection of Northeast Oregon Inc.</td>
<td>(541) 523-6591</td>
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<td>Benton</td>
<td>Community Services Consortium</td>
<td>(541) 752-2840</td>
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<tr>
<td>Clackamas</td>
<td>Clackamas County Social Services Division</td>
<td>(503) 650-5640</td>
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<td>Clatsop</td>
<td>Community Action Team</td>
<td>(503) 325-1400</td>
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<td>Columbia</td>
<td>Community Action Team</td>
<td>(503) 397-3511</td>
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<tr>
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<tr>
<td>Crook</td>
<td>NeighborImpact</td>
<td>(541) 504-2155</td>
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<tr>
<td>Curry</td>
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<td>Deschutes</td>
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<td>Douglas</td>
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<td>Gilliam</td>
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<td>Grant</td>
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<td>(541) 265-3293</td>
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<td>(541) 889-9555</td>
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<td>Marion</td>
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<td>(503) 588-9016</td>
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<td>Morrow</td>
<td>Community Action Programs of Eastern-Central Oregon</td>
<td>(800) 752-1139</td>
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<td>Multnomah</td>
<td>Multnomah County Department of County Human Services</td>
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<td>Sherman</td>
<td>Mid-Columbia Community Action Council</td>
<td>(541) 298-5131</td>
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<td>Tillamook</td>
<td>Community Action Team</td>
<td>(503) 842-5261 x203</td>
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<td>Umatilla</td>
<td>Community Action Programs of eastern-Central Oregon</td>
<td>(541) 276-1926</td>
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<td>Wasco</td>
<td>Mid-Columbia Community Action Council</td>
<td>(541) 298-5131</td>
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<td>Washington</td>
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<td>(503) 615-0771</td>
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<td>Wheeler</td>
<td>Community Action Programs of Eastern-Central Oregon</td>
<td>1-800-752-1139</td>
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<td>Yamhill</td>
<td>Yamhill Community Action Partnership</td>
<td>(503) 687-1480</td>
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<td>(855) 216-5289 ext. 1480</td>
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SECTION SEVEN: ACRONYMS AND DEFINITIONS

This Section contains:
✓ Acronyms
✓ Definitions
✓ Energy Burden Table

Acronyms

Acronyms are a fact of life for many service programs, so we begin with some of the most commonly used abbreviations that you will find throughout this manual. In addition, others have been added that are commonly used in the energy assistance field.

2P Two Parent
AAA Area Agency on Aging
ACE Active Corps of Executives
ACF Administration for Children and Family
AGR Agency Grant Request
APC Agency/Program/County/Grant
BPA Bonneville Power Administration
C/A Companion/Attendants/Caregiver
CAA Community Action Agency
CAF Children, Adults and Families – DHS-State
CAPO Community Action Partnership of Oregon
CAPS Community Action Programs
COH Co-Habitants
COU Customer/Consumer Owned Utility
CR Crisis Payment
CRD Community Resource Division
CSBG Community Services Block Grant
CUB Citizens Utility Board
DHI Declaration of Household Income
DHS Department of Human Services
DOE Department of Energy
ECHO Energy Conservation Helping Oregon
EIC Earned Income Credit
ETO Energy Trust of Oregon
EXF Extended Family
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<td>NOA</td>
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<td>ROMA</td>
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**Definitions**

**Authorization Form** – The official term for an energy assistance application. The term may be used interchangeably with energy assistance application form.

**Boarder** – A roomer/boarder is a person who rents a room from the building owner. A roomer/boarder does not have a separate site address from other occupants of the building—however, a roomer/boarder does not share in providing, or being provided for, the necessities of life (e.g. food, living costs) with other residents of the structure.

**Caregiver/Personal Care Attendant** – An attendant is a person who works during the day and/or lives at the residence. Both types of attendants may be paid for by any of the following: applicant, relatives, State or company providing home assistance payments. An attendant (regardless of who pays) is an independent employee.

**Completed Application** – An application is completed when responses to all application questions have been verified, appropriate documentation has been provided, and both the applicant and intake worker have signed the application.

**Commitment Date** – The date a utility or fuel vendor has been notified of an agency commitment.

**Crisis Assistance Payment** – The assistance provided to help low-income households resolve crisis situations, including but not limited to, supply shortages, loss of household heating or cooling, minor fuel source repairs, heating or cooling equipment repairs and other situations as described in the manual.

**Declaration of Household Income Form (DHI)** – A form required for households claiming no income, or irregular/personal income (See Personal Income definition.).

**Denied Application** – An application is denied when it has been completed and signed, but the applicant fails to meet program eligibility requirements.

**Direct Payment** – Wherever possible, payments should be made directly to the utility or vendor. However, in some cases, a LIHEAP benefit must be paid directly to the household. (See Section Three).

**Disabled** – Persons who are unable to engage in any substantial paid activity by reason of any medically determinable physical or mental impairment.

**Eligible** – Households whose verified income is in accordance with the LIHEAP/OEAP Benefits Matrix Form and are partially or fully responsible for their home heating or cooling expenses.

**Employed** – Having a job that pays wages or a salary on a regular basis.

**Energy Assistance Payment** – A payment made under the LIHEAP/OEAP programs to or on behalf of an eligible household.

**Energy costs included in rent**– heating costs are included as an undifferentiated part of their rent payment.

**Energy or Client Education** – An activity intended to help program participants effectively and measurably lower energy usage and home energy bills for program participants.
Heating or Cooling Equipment Installation, Repair, or Replacement – Installation, repair, or replacement of a household furnace, primary heating system, or cooling equipment for an inoperative, unsafe, or substantially non-functional home heating or cooling system. A maximum amount of $5000 may be used for this purpose.

Gross Income – Total Household income from all sources before any deductions.

Home Energy – The type of energy or fuel supply that is the major portion of a household’s heating or cooling source.

Home Energy Supplier – Companies who deliver fuel in bulk, such as oil, propane, wood, pellet, etc., or provide electricity or natural gas continuously via wire or pipes. Home Energy Supplier and Vendor are used interchangeably.

Home Heating Costs – Expenses incurred by a household for their home heating or cooling costs.

Homeless – An individual, family, or household that lacks a fixed, regular residence, or has a nighttime residence that is an emergency shelter or institution, and that is without the means to secure and/or maintain affordable, safe shelter.

Household – Any individual, or group of individuals who are living together as one economic unit, for whom residential energy is customarily provided in common or who make undesignated payments for energy in the form of rent, and share a common account.

Incidental Fees – Reconnection charges, deposits, late fees, and other charges from home energy suppliers. This does not include actual cost of energy or fuel.

Indian Per Capita Judgment Payments – Payments made to any tribe or group whose trust relationship with the Federal Government has been terminated and for which Legislation in effect before October 12, 1973 authorized the disposition of its judgment funds.

Intake Date – This is the date the application is received and or completed by the local agency pending available funding (As determined by agency).

Life-Threatening – Conditions where there is likelihood of death.

Net Income – Total household income after deductions, from all sources.

Notice of Action – A notice sent to a client and/or vendor that informs of any change or adjustment to the client’s application after it was submitted.

OPUS – The web-based data collection system used by energy assistance providers to process client data and calculate energy assistance benefits.

Outreach – Any energy assistance, education, or public information efforts that do not require an in-office visit (i.e. Energy assistance or education taking place at temporary or seasonal facilities, in-home efforts, mailings, advertising, and interpretive/translation services).

Payment Receipt – An OPUS generated report that provides important information to an applicant who receives energy assistance.

Payment Type – The category of energy assistance based on eligibility conditions including: Regular, Roomer Boarder, Crisis, Combo, Fuel, Heating or Cooling Equipment Installation, Repair, or Replacement, and Supplemental
Payments.

**Personal Income** – Irregular income from occasional sources such as yard work, child care, collecting cans/bottles, and donating blood.

**Program Year** – Program year for LIHEAP and OEAP refers to the funding period beginning on October 1st and ending on September 30th of the following year.

**Regular Assistance** – The standard energy assistance payment determined by OPUS or from the payment matrix for an eligible household.

**Reverse Mortgage** – A mortgage in which a homeowner, usually an elderly or retired person, borrows money in the form of annual payments which are charged against the equity of the home.

**Roomer** – A roomer/boarder is a person who rents a room from the building owner. A roomer/boarder does not have a separate site address from other occupants of the building—however, a roomer/boarder does not share in providing, or being provided for, the necessities of life (e.g. food, living costs) with other residents of the structure.

**Tribal per capita payments from casinos** – Casino profits paid by a tribe directly to enrolled tribal members.

**Vendor** – A company who delivers fuel in bulk, such as oil, propane, wood, pellet, etc., or provides electricity or natural gas continuously via wire or pipes. The terms Home Energy Supplier and vendor are used interchangeably.

**Voided Application** – An application that has been determined to be incomplete, in error, or withdrawn after it has been signed by an intake worker.
### Energy Burden Table

<table>
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<tr>
<th>Applicant Heat Situation</th>
<th>Energy Burden?</th>
<th>Rationale</th>
<th>Type of Payment</th>
<th>Documentation</th>
</tr>
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<tr>
<td>Applicant pays a vendor directly for utilities</td>
<td>Yes</td>
<td><strong>HH Energy bills will rise and fall with market.</strong></td>
<td>Regular, Paid to Vendor(s)</td>
<td>Utility Bill</td>
</tr>
<tr>
<td>Energy Costs included in rent (non-subsidized)</td>
<td>Yes</td>
<td><strong>HH Rent may increase with an increase in Energy Costs</strong></td>
<td>Regular, Paid to Applicant(s) or Landlord</td>
<td>Landlord Letter or Rental Agreement</td>
</tr>
<tr>
<td>Applicant lives in Subsidized Housing and heat is included in rent.</td>
<td>No</td>
<td><strong>HH Rent and HH Energy Bill will not increase with an increase in Energy Costs</strong></td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Applicant lives in Subsidized Housing and pays a vendor directly for utility costs (receives a utility allowance).</td>
<td>Yes</td>
<td><strong>HH energy costs will rise with market</strong></td>
<td>Regular Paid to Vendor(s)</td>
<td>Utility Bill, Subsidized Housing Contract</td>
</tr>
<tr>
<td>Applicant lives in Subsidized Housing and pays a landlord for utility costs (receives a utility allowance).</td>
<td>Yes</td>
<td><strong>HH energy costs will rise with market</strong></td>
<td>Regular, Paid to Applicant(s) or Landlord under Contract</td>
<td>Landlord Letter, Subsidized Housing Contract</td>
</tr>
<tr>
<td>Applicant lives in Subsidized Housing and pays a vendor directly for all utility costs and does not receive a utility allowance.</td>
<td>Yes</td>
<td><strong>HH Energy bills will rise and fall with market</strong></td>
<td>Regular, Paid to Vendor(s)</td>
<td>Utility Bill, Subsidized Housing Contract</td>
</tr>
<tr>
<td>Applicant lives in Subsidized Housing and pays the landlord for all utility costs based on usage and does not receive a utility allowance (this is rare).</td>
<td>Yes</td>
<td><strong>HH Energy bills will rise and fall with market</strong></td>
<td>Regular, Paid to Applicant(s) or Landlord under Contract</td>
<td>Landlord Letter, Subsidized Housing Contract</td>
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