



DEPARTMENT OF HUMAN SERVICES

2018-2019 County MFIP Biennial Service Agreement January 1, 2018 - December 31, 2019

Enter the county's unique ID number 47MEE792

Contact Information

COUNTY/CONSORTIUM NAME

Meeker

PLAN YEAR

2018-2019

CONTACT PERSON

Paul Bukovich

TITLE

Director

ADDRESS

114 N Holcombe Ave., Ste 180

CITY

Litchfield

STATE

MN

ZIP CODE

55355

PHONE NUMBER

320-693-5300

EMAIL ADDRESS (where correspondence related to this form will be sent)

paul.bukovich@co.meeker.mn.us

CONFIRM EMAIL ADDRESS

paul.bukovich@co.meeker.mn.us

Note: Please review the 2018-2019 MFIP Biennial Service Agreement Bulletin for more details before you complete this document.

## A. Needs Statement

### 1. Besides funding, what is the single biggest challenge you are facing in financial assistance services?

Lack of viable transportation options significantly impacts financial assistance services.

Lack of viable transportation impacts clients' abilities to access employment opportunities. While Meeker County has an on-call bus service and scheduled bus runs between Litchfield and Willmar, hours of service are 7:00 am-6:00 pm. If a client lives outside of the Highway 12 corridor or is offered a second or third shift position and does not have a vehicle of their own, they often are not able to arrange reliable transportation to accept the job.

Lack of viable transportation options impacts clients' abilities to access mental health and chemical dependency services. Until mental health and chemical dependency issues are addressed, clients have significant barriers to achieving self-sufficiency. While the costs of transportation to these services is usually covered by Medical Assistance, there are a limited number of providers in the immediate area and a limited number of volunteer drivers to take clients to out-of-area providers. Recent changes in application of tax laws on volunteer driver reimbursement is expected to further decrease the availability of volunteer drivers, and enhance the difficulties clients face in accessing mental health and chemical dependency services.

6703 characters remaining

### 2. Besides funding, what is the single biggest challenge you are facing in employment services?

Besides funding, but this challenge is due to lack of funding, the biggest challenge is caseload size with the requirement to have daily supervision for many of the customers enrolled. When caseloads continue to grow and the inability to hire employment counselors due to the lack of funding it gets to the point that all the employment counselor is able to do is process. The employment counselor doesn't have the time needed to work one on one with the customers on their barriers or build on their strengths.

Besides the caseload size being a challenge the amount of paperwork required is a challenge because it takes away from the time an employment counselor can spend working face to face with the customer.

Additionally, overall when the medical professionals do not understand what MFIP really does and how it can support and help enrolled customers to move forward and they provide medical opinion forms with zero hours of participation it does not help those customers who could do something. Educating the medical professionals on how MFIP is a benefit would be of great service.

6899 characters remaining

**County MFIP Biennial Service Agreement**

**A. Needs Statement** (continued)

**3. What strengths and resources do you have available to address the needs of your participants?**

Please **check all** the resources available to participants in your service area and check whether the resource is available within MFIP financial or employment services "in-house" or from a partner organization (county resources with developed connections to MFIP), and/or an external community resource or both. If you lack sufficient resources in your area, check the Resource Gaps column, even if there are some resource sources. Add any "other" resources that you consider necessary.

MFIP Resources	Partner Resources	Community Resources	Resource Gaps	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ABE/GED
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Adult/elder services
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Career planning
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Childcare funds
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Chemical health services
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Computer lab access
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Credit counseling/financial literacy
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	English Language Learner (ELL)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food shelf
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Housing assistance
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job club
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job development
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job placement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job retention
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job search workshops
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Mental health services
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	On-the-job training program
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post-secondary education planning
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Short-term training
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supported work
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paid work experience
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transportation assistance (gas cards, bus cards)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle repair funds
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Volunteer opportunities
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Youth program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other

**4. County Program Contact Information**

Please name contacts for the following programs if different from the contact on the cover page. You only need to give a person's phone and email once.

<b>MFIP STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
LoAnn Shepard	320-693-5311	loann.shepard@co.meeker.mn.us

<b>DWP STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
LoAnn Shepard	320-693-5311	loann.shepard@co.meeker.mn.us

<b>FINANCIAL ASSISTANCE SERVICES STAFF CONTACT NAME</b>	<b>PHONE NUMBER</b>	<b>EMAIL ADDRESS</b>
LoAnn Shepard	320-693-5311	loann.shepard@co.meeker.mn.us

**A. Needs Statement** (continued)

**Employment Services Provider(s) Information**

Statute 256J.50, subdivision 8: Each county, or group of counties working cooperatively, shall make available to participants the choice of at least two employment and training service providers as defined under Minnesota Statutes, section 256J.49, subdivision 4, except in counties contracting with workforce centers that use multiple employment and training services or that offer multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs.

List your current employment services provider(s) and check the respective box to indicate which population served. If a Workforce Center is the only employment services provider, list the multiple employment and training services among which participants can choose. Section G of this form addresses provider choice.

NAME	ADDRESS	CONTACT PERSON	PHONE NUMBER
Central Minnesota Jobs & Training	406 7th St E., Monticello MN 55362	Twylla Wozniak	612-867-0785

**Population Served**  
 MFIP ES  
 DWP ES  
 FSS  
 Teen Parents  
 200% FPG

**B. Service Models****Minnesota Family Investment Program (MFIP) and the Diversionary Work Program (DWP)**

1. Do you have culturally specific employment services for different racial/ethnic groups?

No  Yes

African American

African immigrant

Asian American

Asian immigrant

American Indian

Hispanic/Latino

Other

2. What strategies do you use for hard-to-engage participants? *Check all that apply.*

Home visits  Sanction outreach services  Incentives

Off-site meeting opportunities  Other

3. What types of job development do you do? *Check all that apply.*

Sector job development  Individual job development  Other

4. Do you have an ongoing job development partnership or sector based job development with community employers to help participants with employment?

No  Yes *Check all activities employers provide.*

Interview opportunities  Job skills training  Job placement  Job shadowing  On-site job training

Work experience  Helps plan training programs  Other

5. Do you provide job retention services to employed participants while they are receiving MFIP?

No  Yes *Check all that apply.*

Available to assist with issues that develop on the job  Financial planning  Soft skills training

Mentoring  Transportation  Personal contact with the employee HOW OFTEN? upon obtaining employment,

Other

How long do you provide job retention services?

Less than 3 months  3-6 months  7-12 months  More than one year

6. Do you provide job advancement services to employed participants?

No  Yes *Check all that apply.*

Career laddering  Networking  Coaching/mentoring  Ongoing job search

Education/training  Other

7. Do you utilize any career pathways programs or skill assessment and credentialing programs for your participants?

No  Yes *Check all that apply.*

Pathways to Prosperity (P2P)  Work Keys  National Career Readiness Certificate (NCRC)

Other

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**B. Service Models** (continued)**Family Stabilization Services (FSS)**

1. Do you have professionals available to assist with FSS cases?

 No  Yes *Check all that apply*

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Adult Mental Health professional      | <input checked="" type="checkbox"/> Psychologist                     | <input checked="" type="checkbox"/> Adult Rehabilitation Mental Health Services (ARMHS) worker |
| <input checked="" type="checkbox"/> Public Health Nurse                   | <input checked="" type="checkbox"/> Chemical Health professional     | <input checked="" type="checkbox"/> Social Worker  |
| <input checked="" type="checkbox"/> Children's Mental Health professional | <input checked="" type="checkbox"/> Vocational Rehabilitation worker | <input type="checkbox"/> Other   |

2. Do you make referrals for children of FSS participants?

 No  Yes *Check all that apply*

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Children's Mental Health Services         | <input checked="" type="checkbox"/> Public Health Nurse home visiting services | <input checked="" type="checkbox"/> Child Wellness Check-ups |
| <input checked="" type="checkbox"/> Women, Infants and Children Program (WIC) | <input type="checkbox"/> Other   |  |

3. Are any of these services for children offered to non-FSS families?

 No  Yes**Services for families no longer on MFIP/DWP but under 200% of Federal Poverty Guideline**

1. Do you provide services to families who are not receiving DWP or MFIP assistance but are under 200% of the Federal Poverty Guideline (FPG)?

 No  Yes *Check all the services that apply*

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> ABE/ELL Classes     | <input type="checkbox"/> Job retention services | <input type="checkbox"/> Child care     | <input checked="" type="checkbox"/> Referral to other programs  |
| <input checked="" type="checkbox"/> Computer Lab Access | <input type="checkbox"/> Support Services       | <input checked="" type="checkbox"/> GED | <input checked="" type="checkbox"/> Training/Job Skills Classes |
| <input checked="" type="checkbox"/> Job postings        | <input type="checkbox"/> Other                  |   |   |

**B. Service Models** (continued)**Minnesota Family Investment Program (MFIP) Services for Teen Parents**

1. Are there specialized workers who work primarily with teens (for example, child care worker provides child care resources to teens only)?

No  Yes *Check all that apply for each age group*

Minors (under age 18)	Age 18/19	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Financial worker
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Employment service worker
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Social worker (Social Services)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Public health nurse
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Child care worker
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other job role

2. Is there a single point of contact for teens, that is, one staff with primary responsibility for keeping in contact with the teen, working with the teen, and making connections to other services? Respond for each age group separately. If yes for an age group, check the one position that serves this function within that age group.

No  Yes

Minors (under age 18)	Age 18/19
<input type="radio"/> Financial worker	<input type="radio"/> Financial worker
<input type="radio"/> Employment service worker	<input checked="" type="radio"/> Employment service worker
<input checked="" type="radio"/> Social worker (Social Services)	<input type="radio"/> Social worker (Social Services)
<input type="radio"/> Public health nurse	<input type="radio"/> Public health nurse
<input type="radio"/> Child care worker	<input type="radio"/> Child care worker
<input type="radio"/> Other job role	<input type="radio"/> Other job role

3. Does your county have an active partnership with the local public health agency to get teen parents enrolled and engaged in public health nurse home visiting services? *Check one for each age group.*

Minors (under age 18)	Age 18/19
<input checked="" type="radio"/> Yes, mandatory	<input type="radio"/> Yes, mandatory
<input type="radio"/> Yes, voluntary	<input checked="" type="radio"/> Yes, voluntary
<input type="radio"/> No	<input type="radio"/> No

## C. Measures

### Performance Measures

1. Performance-based funding is determined by a service area's annualized Self-Support Index value. Review the information and report links in this section to see the effect of performance on funding and reporting, based on Statute 256J.626, subdivision 7.

Starting for calendar year 2016, each service area funding allocation starts at 100 percent. Each year starting with the 2016 allocation, a bonus to a service area's Consolidated Fund allocation will be based on its performance on the Self-Support Index in the previous April to March year.

The **three-year Self-Support Index (S-SI)**: This measure starts with all adults receiving MFIP or DWP cash assistance in a quarter and tracks what percentage of them, three years later, are no longer receiving family cash assistance or are working an average of 30 hours a week if still receiving cash assistance. Those who left MFIP after reaching 60 counted months and those who left due to 100 percent sanction are only counted as a success if they worked an average of 30 hours per week in their last month of eligibility or if they began receiving Supplemental Security Income (SSI) after family cash assistance ended. To provide fair comparisons across service areas, DHS calculates a "Range of Expected Performance" for the S-SI that is based on local caseload characteristics and economic conditions. The service area's Self-Support Index value is whether the service area was above, within, or below its expected Range.

The S-SI and Range are annualized for the four quarters in the April through March year ending in the reporting year before the funding year. See the MFIP Annualized S-SI and WPR report for 2017 on the MFIP Reports page on the DHS website. A service area with an annualized S-SI "above" its customized Range of Expected Performance for 2017 will receive a 2.5 percent bonus added to its Consolidated Fund allocation for calendar year 2018.

[MFIP Annualized S-SI and WPR report \(PDF\)](#)

If your service area is receiving a bonus, congratulations! Please share a success strategy here:

Meeker County is not receiving a performance bonus.

7949 characters remaining

In the future, if your service area has an annualized S-SI below its range for two consecutive years, you will have to **negotiate a multi-year improvement plan** with the commissioner. If no improvement is shown by the end of the second year of the multi-year plan, the next year's allocation must be decreased by 2.5 percent, to remain in effect until the service area performs within or above its Range of Expected Performance. For example, a service area scoring "below" for 2016 and 2017 would need to put in place a multi-year improvement plan. If continuing "below" for 2018 and 2019, there would be a 2.5 percent decrease for the 2020 Consolidated Fund allocation which would continue until an annualized S-SI above or within its Range. Then the service area would receive 100 percent of the allocation.

Supplemental information about the Performance Management System and Performance Improvement Plans can be found on CountyLink: [www.dhs.state.mn.us/HSPM](http://www.dhs.state.mn.us/HSPM). If you would like additional information, contact the DHS Performance Management team at [DHS.HSPM@state.mn.us](mailto:DHS.HSPM@state.mn.us) or 651-431-5780.



**C. Measures** (continued)

**Racial/Ethnic Disparities**

- 2. A **racial/ethnic disparity** for a service area is defined as a **one-year Self-Support Index** that is five or more percentage points lower for a non-white racial/ethnic group than for the white group of MFIP/DWP-eligible adults in that area. Access the report "Two-Year Performance Trends of Racial/Ethnic and Immigrant Group". This report lists (1) service areas that have any racial/ethnic disparities requiring action and (2) the table of differences for all service areas.

[Performance Measures by Racial/Ethnic or Immigrant Group \(PDF\)](#)

**If your service area is in the disparity list, please answer the following question:**

DHS will work with you to reduce these disparities.

What strategies and action steps for each of the groups with disparities do you plan for the coming biennium?

Meeker County is not on the disparity list.

7957 characters remaining

**D. Program Monitoring/Compliance**

1. What procedures do you have in place to ensure that program funds are being used appropriately as directed in law? *Check all that apply.*

- Budget control procedures for approving expenditures  
 Cash management procedures for ensuring program income is used for permitted activities  
 Internal policies around use of funds, i.e. participant support services  
 Other

2. What procedures do you have in place to ensure program policies are followed and applied accurately? *Check all that apply.*

- Case consultation                       Sample case review by workers                       Sample case review by supervisors  
 Other

**If your service area has not made changes to your random drug testing policy since the last BSA, go to Section E.**

3. What procedures/policies do you have in place for administering random drug tests of convicted drug felons on MFIP as required by Minnesota Statutes, section 256J.26, subdivision 1?

- Written policy within the MFIP unit                       Coordination with Corrections  
 Currently establishing new policy/procedure(s)                       Other

**If your random drug testing policy has changed since the last BSA, please submit a copy to Tria Chang at [Tria.Chang@state.mn.us](mailto:Tria.Chang@state.mn.us)**

**E. Collaboration and Communication with Others**

1. How many employment services front-line staff are employed in your county or consortium?

2

How many employment services front-line staff in your county or consortium have MAXIS access?

1

How many managers/supervisors have MAXIS access?

0

2. Describe the process your service area uses to identify and resolve discrepancies between MAXIS and WF1 data in areas such as Family Stabilization Services coding, employment/hours, sanction status, etc.

1. Employment and training provider staff, manager, or supervisor meet with the Eligibility Supervisor or designated Eligibility Worker monthly using the preliminary data report provided to review and make corrections in coding, employment hours, sanction status, etc. The Eligibility Supervisor then meets or communicates with the Eligibility Worker assigned to the case to make and needed adjustments in Maxis.
2. Frequent written status updates and verbal communication between Eligibility Workers and Employment Specialists.
3. Employment Specialist meets with Eligibility Worker at least monthly to go over all shared cases for accuracy.

7358 characters remaining

### F. Emergency Services

1. Does your county provide emergency or crisis services from your Consolidated Fund?

- No  Yes

If yes, enter your most up-to-date emergency/crisis services plan

Please see attached Emergency Assistance plan.

9953 characters remaining

**G. Other**

**Administrative Cap Waiver**

Minnesota Family Investment Program (MFIP) allows counties to request a waiver of the MFIP administrative cap (currently at 7.5%) for providing supported employment, uncompensated work or community work experience program for a major segment of the county's MFIP population. Counties that are operating such a program may request up to 15% administrative costs.

If your county is interested in applying for the waiver for the coming biennium, please complete the following four questions. Email [Tria.Change@state.mn.us](mailto:Tria.Change@state.mn.us) if you need assistance with the waiver.

1. Describe the activity(s) you will provide.

4000 characters remaining

2. Explain the reasons for the increased administrative cost.

4000 characters remaining

3. Describe the target population and number of people expected to be served.

4000 characters remaining

4. Describe how the unpaid work experience is designed to impart skills and what steps are taken to help participants move from unpaid work to paid work.

4000 characters remaining

**G. Other** (continued)**Addendum for Unpaid Work Experience Activities**

If your county is providing unpaid work experience activities for MFIP participants and you don't already have an Injury Protection Plan (IPP) in place, please fill out the IPP form. Email the completed form to [Tria.Chang@state.mn.us](mailto:Tria.Chang@state.mn.us).

**Provider Choice**

Does your county:

- Have at least two employment and training services providers. Go to Section H.
- Have a workforce center that provides multiple employment and training services, offers multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs. Go to Section H.
- Intend to submit a financial hardship request.

G. Other (continued)

Financial Hardship Request

FINANCIAL HARDSHIP - Exception to Choice of Employment Service Providers Requirement

MFIP provisions require counties to make a choice of at least two employment service providers available to participants unless a workforce center is being utilized (Minnesota Statutes, section 256J.50, subdivision 8). Counties may request an exception if meeting this requirement results in a financial hardship (Minnesota Statutes, section 256J.50, subdivision 9).

A financial hardship is defined as a county's inability to provide the minimum level of service for all programs if a disproportionate amount of the MFIP consolidated fund must be used to cover the costs of purchasing employment services from two providers or the cost of contracting with a workforce center.

To request approval of a financial hardship exception from the choice of provider requirement, please provide the following information.

- 1. If the county had a choice of providers in calendar year 2015, describe:
  - factors that have changed which indicate a financial hardship
  - why the hardship is expected to persist in the near future and
  - the magnitude of the hardship, which makes limiting delivery of employment services the best financial option for the county.

2000 characters remaining

- 2. Summarize options explored by the county, including use of other partners in a workforce center or other community agencies, such as a Community Action Program or a technical college. The summary should also include:
  - major factors which prevent the county from utilizing these options and include a cost analysis of each option considered; and
  - the process used to determine the cost of other options (RFP or other county process).

2000 characters remaining

- 3. If the county proposes to directly deliver MFIP employment services, provide a budget and staffing plan that clearly indicates consolidated funds will not be used to supplant county funds. The description should include information about what steps will be taken to ensure that county staff have the experience and skills to deliver employment services.

2000 characters remaining

The Department of Human Services (DHS) and the Department of Employment and Economic (DEED) will also review the amount budgeted by the county for employment and training during calendar year 2015 and use this amount as a guide to determine whether the amount budgeted by the county for calendar year 2016 is reasonable.

If a financial hardship is approved, DHS and DEED will closely monitor county programs to ensure outcomes are achieved and services are being delivered consistent with state law.

**County MFIP Biennial Service Agreement**

**H. Budget**

Click on the link below to review your service area's 2018 MFIP allocations:

[MFIP Consolidated Fund \(PDF\)](#)

In the budget table, indicate the amount and percentage for each item listed for the budget line items for calendar years 2018-2019. Also note:

- Total percent must equal 100.
- MFIP administration is capped at 7.5 percent unless the county is applying for an administrative cap waiver. To apply for the administrative cap waiver, respond to the questions in Section G under Administrative Cap Waiver.
- If "other" is used, briefly describe the line item.

**2018 Budget**

Budgeted Amount	Percent	Line Items
28,201.00	14.11%	Employment Services (DWP)
112,607.00	56.34%	Employment Services (MFIP)
15,000.00	7.50%	Emergency Services/Crisis Fund
14,990.00	7.50%	Administration (cap at 7.5%)
29,072.00	14.55%	Income Maintenance Administration
	0.00%	Other 1 <input type="text"/>
	0.00%	Other 2 <input type="text"/>
<b>\$199,870.00</b>	<b>100.00%</b>	<b>Total</b>

**2019 Budget**

Budgeted Amount	Percent	Line Items
28,201.00	14.11%	Employment Services (DWP)
112,607.00	56.34%	Employment Services (MFIP)
15,000.00	7.50%	Emergency Services/Crisis Fund
14,990.00	7.50%	Administration (cap at 7.5%)
29,072.00	14.55%	Income Maintenance Administration
	0.00%	Other 1 <input type="text"/>
	0.00%	Other 2 <input type="text"/>
<b>\$199,870.00</b>	<b>100.00%</b>	<b>Total</b>

Email [Brandon.Riley@state.mn.us](mailto:Brandon.Riley@state.mn.us) if you need assistance with this section.



County MFIP Biennial Service Agreement

Certifications and Assurances

Public Input

Prior to submission, did the county solicit public input for at least 30 days on the contents of the agreement?

No  Yes

Was public input received?

No  Yes

If received but not used, please explain.

[Empty text box for explanation]

4000 characters remaining

Assurances

It is understood and agreed by the county board that funds granted pursuant to this service agreement will be expended for the purposes outlined in Minnesota Statutes, section 256J; that the commissioner of the Minnesota Department of Human Services (hereafter department) has the authority to review and monitor compliance with the service agreement, that documentation of compliance will be available for audit; that the county shall make reasonable efforts to comply with all MFIP requirements, including efforts to identify and apply for available state and federal funding for services within the limits of available funding; and that the county agrees to operate MFIP in accordance with state law and federal law and guidance from the department.

Federal Funding Sources

The catalog of Federal Domestic Assistance (CDFA) Number is 93.558 - Temporary Assistance for Needy Families (TANF) The Award number for the period of January 1, 2018 - December 31, 2019 is 2014G996115.

Service Agreement Certification

Checking this box certifies that this 2018-2019 MFIP Biennial Service Agreement has been prepared as required and approved by the county board(s) under the provisions of Minnesota Statutes, section 256J. In the box below, state the name of the chair of the county board of commissioners or authorized designee, their mailing address and the name of the county.

<b>DATE OF CERTIFICATION</b>	<b>NAME (CHAIR OR DESIGNEE)</b>	<b>COUNTY</b>
		Meeker
<b>MAILING ADDRESS</b>	<b>CITY</b>	<b>STATE</b> <b>ZIP CODE</b>
325 N Sibley Ave	Litchfield	MN    55355

Save or Submit

To save your work, select the 'Save Form for Later' choice, then click the SUBMIT button. Your information will be saved, and you can come back to the form later.

To submit your information to DHS, select the 'Submit Final Form' choice, then click the SUBMIT button.

Save Form for Later

Submit Final Form

**Emergency Assistance for Families/Crisis Funds**  
**Meeker County Eligibility Guidelines**  
**12/31/2013**

**I. BASIC ELIGIBILITY FACTORS**

1. The household must meet one of the definitions below of family:
  - a. A minor child (under the age of 18) or a group of minor children related to each other as siblings, half-siblings, or adopted siblings, along with their natural, step or adoptive parent(s) or other caregiver(s); or
  - b. A pregnant woman who is not a minor and has no other eligible children and her spouse, if living with her; or
  - c. A minor caregiver's parent(s) who has no other minor children; or
  - d. A minor caregiver and child.
2. At least one member of the household must have resided in Minnesota for at least thirty days..
3. At least one child or pregnant woman in the household must meet the MFIP citizenship requirements.
4. At least one caregiver and one child must not have used the following in the past 18 months:
  - a. Emergency Assistance
  - b. County Crisis Funds
  - c. Emergency General Assistance
5. A household member's refusing or quitting employment without good cause must not have caused or contributed to the emergency.
6. The household must be in compliance with all Human Services requirement; including, but not limited to MFIP/FSET employment services and child support within last 60 days.
7. The household's gross income must be at or below 200% FPG at the time of application.
8. Must complete CAF and in-person interview and provide requested documentation

**II. POLICY COMPONENTS**

1. County Crisis Funds (CCF) are a capped county allocation: when allocated money is spent, all further requests will be denied and referred to other possible sources. No waiting list will be maintained.
2. CCF (included with other available funds) must resolve the crisis, not postpone it.
3. CCF will be approved for the most cost-effective solution to the emergency.
4. CCF eligibility will be determined from the applicant's initial date of approval and will not be available again until at least 18 months have passed from the date of prior approval.
5. Additional assistance will not be authorized once an application is approved.
6. When a determination is made that the household's mismanagement of money caused the crisis, the county may require the assistance unit to cooperate with vendor, protective, or two-party payments for an indefinite period of time.

Money mismanagement is defined as:

  - a. Repeated inability to plan the use of income to meet necessary expenditures;
  - b. Repeated observation that the recipient is not properly fed or clothed,
  - c. Repeated failure to meet obligations for rent, utilities, food, and other essentials,
  - d. Evictions or a repeated incurrence of debts.
7. CCF are not available for a crisis resulting from fraud or misrepresentation on the part of any household member.
8. For shelter emergency, the household must have paid 50% of net available income toward basic needs in the past 60 days.
9. The household must have paid 10% of net available income toward utility bills in the current and previous 11 months or as long as they've had the current utility service, whichever is less, to be eligible for payment of utility bill.

### **III. DEFINITION OF BASIC NEEDS**

The household must be in an emergency situation in which it is without or will lose within thirty days after the date of application a basic need item which would threaten the household's health or safety. Basic needs are defined as:

#### **A. Housing:**

First month's rent, and/or up to one month deposit

Past due monthly rent (including lot rent)

Past due mortgage/contract for deed

#### **B. Utilities:**

Utility disconnects, deposits, and reconnect fees

Heating fuel, including delivery and hook-up fees

Water services.

Phone for verifiable medical need

#### **C. Home repairs – wiring, heating, water, roof, sewer**

#### **D. Food:**

Up to thrifty food plan (combination of FS & client money)

To resolve the emergency the minimum will be issued.

Expenses for items other than basic needs listed above are not eligible for payment

### **IV. DETERMINING APPLICANT'S PORTION OF PAYMENT**

Within the time necessary to resolve the crisis, all members of the household must be unable to resolve the emergency by combining:

Liquid assets or any other assets that can be liquidated; and

Income they anticipate to receive; and

Other funds the household is eligible to receive.

### **V. LIMITATIONS**

Shelter – up to \$1,000, no court fees or balloon payments, late fees may be paid on a case to case basis

Electricity – up to \$1,000

Heating fuel – up to \$1,000; minimum to resolve emergency for heating fuel

Natural gas – up to \$1,000

Water and sewer – up to \$1,000

Phone – (medical emergency only)

Hook up charges for local service only

Prepaid cellular phone – minimum phone and \$20.00 calling card

County Crisis Funds cannot exceed \$1,000.00

### **VI. DOCUMENTED NEED FOR COUNTY CRISIS FUND PAYMENT**

The household must have experienced a documented, verifiable change in circumstances resulting in the crisis, including but not limited to:

\* An event which prevents a household member from obtaining or retaining employment

\* Health conditions impairing the ability to work

\* Other unexpected occurrences.

The household must provide proof of their emergency by remitting an eviction notice, utility, or water shut off notice; statement of refusal of service from fuel provider. Eviction notices written by parties other than bona fide property managers will not be considered sufficient proof that a housing crisis exists.

Eviction notices may be waived in the following circumstances;

- Persons leaving treatment facilities must show proof of successfully completing the program verification of why the housing they left is no longer available
- Persons leaving the penal system must show verification of why the housing they left is no longer available.
- Persons leaving the military must have lived in Minnesota prior to leaving for military duty and must have returned to Minnesota within 30 days of discharge.
- Persons fleeing domestic abuse must be working and cooperating with law enforcement and/or victims advocate to confirm the claim of abuse.
- Persons who lack a fixed and regular night time residence, or a person whose primary residence is: a supervised shelter designed for temporary accommodations; a half-way house or similar facility that provides temporary residence; a place not designed for sleeping accommodations (bridge, lobby, etc.)
- Persons living on a temporary basis in the home of another person (not to have exceeded 90 days.)

Household must provide at least 1 estimate of home repair cost.

- Household must provide at least one proof of refinancing denial.

Vendor must complete work before payment

Documentation must be received within 30 days of the application or assistance will be denied.

## **VII. PROCESSING**

Within 7 days of receiving the application, or sooner if the immediacy and severity of the situation warrants it, notify units in writing whether their application was approved, denied, or pending. Do not delay issuing CCF pending county board action.

## **VIII. APPEALS**

Clients must request an appeal hearing in writing within 30 days of receiving notice of proposed action, or show good cause for not making a request within that time

- No County Crisis Funds benefits issued while appeal is pending
- Send the written request for appeal and appeal summary to the Appeals Office within two working days of receiving it
- Issue correct payments within 7 days of receiving the appeal decision.