

**The Low-Income Home Energy  
Assistance Program (LIHEAP)**

**Pennsylvania Advocates Manual  
2018-2019 Edition**

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## **Preface**

We are pleased to provide you with the 2018-2019 electronic edition of *The Low-Income Home Energy Assistance Program (LIHEAP) Pennsylvania Advocates Manual*. The manual is developed and produced by the Pennsylvania Utility Law Project (PULP) for use by members of the Pennsylvania Legal Aid Network and others who assist low-income individuals. We hope that you find it to be of value to you and the members of your staff. Please feel free to copy as needed, circulate, and maintain a copy in your reference library.

**The updated 2018-2019 Manual is different from earlier editions circulated in prior years. Please replace any older version.** This year's edition reflects program changes, current forms, references, website links, as well as additional issues and advocacy suggestions. The footnotes contain citations to the 18-19 LIHEAP State Plan<sup>1</sup> and relevant legal authority for your reference. In the Appendices, you will find contact lists and resources to assist in your advocacy.

The different aspects and components of LIHEAP often change from year to year and can be confusing to advocates and applicants. Many eligible consumers do not apply, and those who do apply often receive less than their full potential benefits. We intend this Manual to be a working reference that aids understanding of and access to the benefits provided by Pennsylvania's LIHEAP. We value and request your input regarding the success of the Manual in meeting your needs and welcome any suggestions for modification.

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<sup>1</sup> All references to the State Plan in this manual refer to the Final 2018-2019 State Plan. PA. DEP'T OF HUMAN SERVICES, LIHEAP STATE PLAN (FY 2018-2019) (hereinafter 18-19 LIHEAP STATE PLAN), available at [http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c\\_279179.pdf](http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_279179.pdf).

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**2018-2019 LIHEAP PROGRAM IN BRIEF****Summary of Updates and Changes for the 2018-2019 LIHEAP Program Year<sup>2</sup>**Program Dates:<sup>3</sup>

- |                    |                    |                        |
|--------------------|--------------------|------------------------|
| • Cash Grant       | opens Nov. 1, 2018 | closes April 12, 2019; |
| • Crisis Grant     | opens Nov. 1, 2018 | closes April 12, 2019; |
| • Crisis Interface | opens Nov. 1, 2018 | closes April 12, 2019; |

The Department of Human Services (DHS)<sup>4</sup> may extend or shorten program dates depending on availability of funds.<sup>5</sup>

Eligibility: Eligibility is set at 150% of the Federal Poverty Income Guidelines for Cash Grants, Crisis Grants, and the Crisis Interface Program.<sup>6</sup>

FY 18-19 LIHEAP Household Income Limits<sup>7</sup>

Household Size	150% FPL for Cash & Crisis
1	\$ 18,210
2	\$ 24,690
3	\$ 31,170
4	\$ 37,650
5	\$ 44,130
6	\$ 50,610
7	\$ 57,090
8	\$ 63,570
9	\$ 70,050

<sup>2</sup> There may be modifications made during the 2018-2019 LIHEAP program year. Please be alert for any changes.

<sup>3</sup> 18-19 LIHEAP STATE PLAN AT ii.

<sup>4</sup> The Department of Public Welfare changed its name to the Department of Human Services in November 2014.

<sup>5</sup> 18-19 LIHEAP STATE PLAN at ii.

<sup>6</sup> 18-19 LIHEAP STATE PLAN AT § 601.31. Also, households may be eligible for additional assistance through the Weatherization Assistance Program, some of which is funded by LIHEAP, run through the Pennsylvania Department of Community and Economic Development (DCED). This program provides comprehensive energy efficiency and weatherization for households with income up to 200% of the federal poverty income guidelines. More information about WAP can be found here: <https://dced.pa.gov/programs/weatherization-assistance-program-wx/>

<sup>7</sup> *Id.* at iv.

**Grant Amounts:**<sup>8</sup>**CASH**

- o Minimum Cash grant will be \$200.
- o Maximum Cash grant will be \$1,000.

**CRISIS**

- o Minimum Crisis grant will be \$25.
- o Maximum Crisis grant will be \$600.

**Changes to LIHEAP in 2018-2019**

**Increase in the Maximum Crisis Grant:** DHS has increased the maximum Crisis grant amount from \$500 to \$600.<sup>9</sup>

**Longer Program Year:** The end date for the 2018-2019 LIHEAP program year has been extended to April 12, 2019.<sup>10</sup>

**Additional Money from FY 17-18 will help households this fall**

**Supplemental Grants to Vulnerable Households:** Supplemental grants in the amount of \$75 were issued to all LIHEAP Cash households (from FY 17-18 season) categorized as a vulnerable household (household member under 5, over age 60, or disabled). The approximate number of households who received a supplement is 265,000 households. Each household will only receive one supplement, even if they have multiple vulnerable members, and the supplement will be issued to the vendor that received the household's LIHEAP Cash benefit last season. The supplements were issued on 8/20/18 with payment to the utility on 8/30/18. Please consider using this as an available resource when negotiating with utilities to prevent termination of service or when seeking to restore service.

**Fall Turn On Supplement:** DHS will be running a Supplemental Turn On Program in advance of the start of the LIHEAP season and during the season. Since the money for this program is from the 17-18 LIHEAP season, to be eligible, a household must have received a LIHEAP grant (cash or crisis) during the 17-18 season.

**Phase 1:**

All utilities provided DHS with a list of customers on September 19, 2018, who received a 17-18 LIHEAP grant to that utility and who had an active termination notice or were already terminated between July 27 and August 28<sup>th</sup> and who owed \$500 or less (or for whom the utility would accept \$500 to resolve the crisis). DHS required a fixed period of time in order to determine whether a crisis existed. Households who are on this list will receive an extraordinary Crisis payment of up

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<sup>8</sup> 18-19 LIHEAP STATE PLAN at vi - viii.

<sup>9</sup> *Id.* at vii.

<sup>10</sup>*Id.* at iii.

to \$500 that will be sent to the utility company to have the emergency resolved. Service must remain connected through March 31, 2019. Notices to eligible households began to be sent October 15, 2018. Payments were issued directly to the utilities on October 24, 2018.

Households who received LIHEAP grants during the 2017-18 season to two different utilities can potentially receive two extraordinary Crisis payments of up to \$500 each if they meet the criteria for both.

In order to receive a Phase 1 grant, households have to be residing at the same address that they resided at during FY 17-18 LIHEAP year.

A Fall Fill supplemental grant will be issued for 2017-18 LIHEAP recipients who received a LIHEAP grant to a participating deliverable fuel vendor. These households will receive an extraordinary Cash payment of \$100 sent to their vendor to assist with a fuel delivery. Notices to eligible households were sent starting September 29, 2018, and payments were issued directly to the deliverable fuel vendors on October 10, 2018. Households who received LIHEAP grants during the 2017-18 season to both a deliverable fuel vendor and an electric utility could also potentially receive up to \$500 for their utility and the \$100 extraordinary Cash payment sent to their deliverable fuel vendor.

**Households who do not qualify for Phase 1 grants, may qualify for Phase 2 grants.**

Phase 2: DHS is setting aside extra funds for households who received LIHEAP in 2017-18 and who are experiencing a home-heating emergency with their utility company, but who did not receive a 2017-18 Turn-On Crisis payment during Phase 1, either because the amount needed to resolve the crisis exceeded \$500 or because they were not in crisis at the time of Phase 1 was run.

Beginning November 1, 2018, these households may be eligible for a Phase 2 supplemental grant up to \$500 to resolve their emergency with their natural gas or electric company. This is in addition to their 2018-19 Cash and Crisis grants. Households who received a Fall Fill payment only to their deliverable fuel vendor are eligible for a Phase 2 grant to their secondary heating source.

In order to receive a Phase 2 grant, a household must apply for LIHEAP Crisis grant for FY 18-19. Assistance office staff will evaluate households for Phase 2 eligibility when the household applies for LIHEAP Crisis. A household is eligible for a Phase 2 supplemental Crisis payment if they:

- received LIHEAP in 2017-18;
- are experiencing a home-heating emergency with a utility company;
- have not yet received a Turn-On issuance;
- are eligible for a 2018-19 LIHEAP Cash and/or Crisis grant (need not be residing at the same residence as where the 2017-18 grant was received)

If all criteria are met, these funds will be used first towards the resolution of the household's utility emergency, followed by available funds from the 2018-19 Cash grant, and finally, any remaining funds from the household's 2018-19 Crisis grant. This will allow households who do not initially need their FY 18-19 funds to retain them to resolve crisis later in the season.

### Clarifications that Continue to Require Attention

**Public utilities that operate Customer Assistance Program (CAPs) are required to apply the LIHEAP cash component benefits only to the CAP customer’s monthly ‘Asked to Pay’ or ‘CAP Payment’ amount.** Specifically, it must be applied only to resolve past due CAP payments, then to current CAP payments. Any remaining funds must be applied to future CAP payments.<sup>11</sup> No LIHEAP funds may be applied to a CAP customer’s pre-program arrearages or unbilled usage amounts.<sup>12</sup> DHS makes no distinction between a Percentage of Income Payment Plan (PIP or PIPP) CAP program or a Rate Discount CAP program. The purpose of LIHEAP is to help low income households meet their home heating needs. The LIHEAP Federal statute, regulations and Pennsylvania’s approved state plan all require that LIHEAP funds be applied in full to the account of those households determined LIHEAP eligible. A fuller discussion of this issue is found at pages 30 - 31 of this Manual.

DHS is obligated to provide assistance that would resolve a home-heating crisis within 48 hours, but has clarified that a **life-threatening crisis that is a documented medical emergency must be resolved within 18 hours**.<sup>13</sup> DHS has not provided guidance as to how or if this documentation requirement will affect Crisis applicants with a life-threatening crisis situation. Please advise PULP if you have a client who has been negatively affected.

**Furnace replacement** is specifically designated as an appropriate activity within the Crisis Interface Program.<sup>14</sup> However, the Crisis Interface Policy of the State Plan states that **if the furnace has not been operating within past two heating seasons, it may not be eligible for Crisis services**, as a furnace that has not been working for that long of a period of time may not be considered to be a weather-related emergency. The applicant must provide proof of a home heating emergency to be eligible for Crisis Interface.<sup>15</sup> The State Plan allows for some consideration on a case by case basis.

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<sup>11</sup>18-19 LIHEAP STATE PLAN at app. B § 601.45

<sup>12</sup> *Id.*

<sup>13</sup> See *id.* at app. B § 601.4.

<sup>14</sup> 18-19 LIHEAP STATE PLAN, at app. C § II.

<sup>15</sup> *Id.* at app. C § II.



**LIHEAP: PA ADVOCATES MANUAL 2018-2019 EDITION***Prepared by the Pennsylvania Utility Law Project***Introduction**

This Manual is produced by the Pennsylvania Utility Law Project (PULP) for members of the Pennsylvania Legal Aid Network and others who assist low-income individuals. It is intended as a general reference guide, and is not intended to be a substitute for direct legal advice in individual cases. The footnotes contain citations for your reference. The Appendices contain additional resources and contact information. Website references can be found throughout. The authors welcome your questions and comments on this manual.

**LIHEAP in Brief**

The Low-Income Home Energy Assistance Program (LIHEAP) provides low-income households with assistance to help pay the costs of home energy consumption. In Pennsylvania, LIHEAP supplements are intended primarily to assist with paying the cost of heating a residence during the cold weather months.

LIHEAP is funded by the Federal Government through a block grant administered by the states. In Pennsylvania, the Department of Human Services (DHS) administers the LIHEAP program through local County Assistance Offices and other agencies.

In 2018-2019 LIHEAP assistance can take three different forms. A particular household may be eligible for more than one of these different forms of assistance, and advocates should consider each LIHEAP component for every household:

- **Cash Component:** a single grant, to assist a household in meeting heating costs. It is paid directly to either a heating fuel vendor/utility company or paid to an individual. The amount of the LIHEAP Cash grant to the household differs depending on various factors at the time of application including household size and income.<sup>16</sup> The set formula for the grant amount is discussed below. This year, a household may apply for the LIHEAP Cash component from November 1, 2018 until April 12, 2019.<sup>17</sup> The grant amount will range from a minimum of \$200 to a maximum of \$1000.<sup>18</sup>
- **Crisis Component:** In 2018-2019, cash grants of up to \$600 will be available to help qualified households resolve a home heating crisis caused by a lack of heating-related utility service, a pending utility termination notice, an actual or imminent (less than 15 days of fuel) lack of a deliverable fuel (such as home heating oil, propane, etc.) or a problem with a heating system

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<sup>16</sup> *Id.* at app. B § 601.41.

<sup>17</sup> *Id.* at iii.

<sup>18</sup> *Id.* at vi.

(i.e., furnace), or a weather-related event.<sup>19</sup> Any household requiring less than \$25 to resolve a home heating emergency will not be eligible to receive a Crisis grant.<sup>20</sup>

In addition, this year, households may be eligible for a supplemental Turn On Grant of up to \$500 if they received LIHEAP last year and face a home heating emergency. See Section “Summary of Updates and Changes for the 2018-2019 LIHEAP Program Year”, above.

- Crisis Interface/Weatherization Assistance Component:<sup>21</sup> provides for the repair or replacement of the heating system or furnace for households with a heating system breakdown. Traditional weatherization and conservation services may supplement the repairs.<sup>22</sup>

The same application form may be used to apply for each of the LIHEAP components.

An individual may be able to designate a different vendor to receive different types of grant payments; for example, a Cash grant may be designated to an oil vendor and a Crisis grant to the electricity provider.

An individual may receive more than one Crisis benefit during the program year, subject to the maximum Crisis grant amount allowed and the amount of available federal funding.<sup>23</sup>

LIHEAP is available to both renters and homeowners.<sup>24</sup> Renters who pay for heat for their residence indirectly (rather than directly to a fuel vendor or utility) as a part of rent will receive only 50% of the Cash benefit for which they would otherwise be eligible.<sup>25</sup> This benefit is **not** available to renters who pay for their heat indirectly **and** whose rent is based on a percentage of the household income. The LIHEAP State Plan says that these households do not have home heating responsibility and, thus, are not eligible for LIHEAP cash grants. There are however, circumstances where they would be eligible for LIHEAP crisis grants. Specifically, if they pay for a secondary heating source directly (typically, electricity) and that heating source is needed to run their primary heating source.

Eligible households may reapply for and receive Cash and Crisis assistance each program year.

No lien will attach to a home as a result of receiving any LIHEAP assistance.

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<sup>19</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.62.

<sup>20</sup> *See* 18-19 LIHEAP STATE PLAN, at vii.

<sup>21</sup> This component is the only component not administered completely within DHS. DHS makes the Crisis eligibility determination, but the Department of Community and Economic Development (DCED) administers the repair and replacement segment. *See* 18-19 LIHEAP STATE PLAN, at app. C § I.

<sup>22</sup> *See id.*

<sup>23</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.63.

<sup>24</sup> *See id.* at app. B § 601.3.

<sup>25</sup> *Id.* at app. B § 601.42.

## Resources and Authority

DHS maintains a Heating Assistance/LIHEAP website.<sup>26</sup>

Every year, DHS must update the LIHEAP State Plan with program guidelines and parameters, such as program opening and closing dates, funding levels, and eligibility criteria. DHS publishes a Proposed State Plan during the summer months which is subject to public comments and public hearings in which anyone may participate. After comments are received and reviewed, DHS publishes a Final State Plan that governs the LIHEAP operation for that program year. The LIHEAP Cash and Crisis rules for the program year are found in Appendix B of the Final State Plan. Information regarding Crisis Interface and the Weatherization Assistance Program may be found in Appendix C of the Final Plan. The current State Plan is found online at this link.<sup>27</sup>



**Advocacy Tip:** Advocates should use rules found in Appendix B of the 18-19 LIHEAP STATE PLAN when making arguments to County Assistance Offices and LIHEAP administrators, as these are the most up to date.

DHS also provides a LIHEAP Policy Handbook for its caseworkers. The Handbook includes Operations Memoranda which are issued periodically and which indicate the most recent LIHEAP procedures and policies. The most recent publicly available Handbook is found online at: <http://services.dpw.state.pa.us/oimpolicymanuals/liheap/index.htm>.

The 2018-2019 Cash grant benefit tables, which indicate the amount of the Cash grant to which each household is entitled, may be found online at: <http://www.dhs.pa.gov/citizens/heatingassistanceliheap/liheapbenefitamounttable/index.htm>.

A LIHEAP application may be completed online through the COMPASS program at [www.compass.state.pa.us](http://www.compass.state.pa.us), or a paper application may be mailed or hand delivered to the local County Assistance Office.<sup>28</sup>

Application assistance is available.<sup>29</sup> Upon request, LIHEAP staff will mail an application form or take other steps such as referral to other agencies that make home visits to help homebound persons apply for LIHEAP benefits.<sup>30</sup>

Applicants may get an automated eligibility determination if they apply on COMPASS and the applicant if the income is already known to DHS because they receive other benefits, such as

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<sup>26</sup> The LIHEAP website address is: <http://www.dhs.pa.gov/citizens/heatingassistanceliheap/>

<sup>27</sup> The link address is: [http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c\\_279179.pdf](http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_279179.pdf)

<sup>28</sup> 18-19 LIHEAP STATE PLAN at app. B §§ 601.21, 601.22.

<sup>29</sup> See *id* at app. B § 601.24.

<sup>30</sup> *Id.*

SNAP (food stamps), medical assistance, or TANF (cash).<sup>31</sup> Even with automated eligibility, applicants may still have to verify their home heating responsibility.<sup>32</sup>

The English and Spanish versions of the paper application may be downloaded from the DHS website at: <http://www.dhs.pa.gov/citizens/heatingassistanceliheap/index.htm>. They are also appended to this manual at Appendix B.

The addresses and phone numbers of local County Assistance Offices can be found online at: [local county assistance offices](#). Also, appended to this manual as Appendix D is a list of the LIHEAP Supervisors for each county.

### Legal Authority

LIHEAP is a Federal block grant program through the U.S. Department of Health and Human Services.<sup>33</sup> It is authorized by the Low-Income Home Energy Assistance Act (Pub. L. 97- 35, 42 U.S.C.A. §§8621-8629) as amended by the Human Services Reauthorization Act (Pub. L. 98-558, 98 Stat. 2878), the Human Services Reauthorization Act of 1986 (Pub. L. 99-425, 100 Stat. 966), the Augustus F. Hawkins Human Services Reauthorization Act of 1990 (Pub. L. 101-501), the National Institutes of Health Revitalization Act of 1993 (Pub. L. 103-43), the Low-Income Home Energy Assistance Amendments of 1994 (Pub. L. 103-252), the Coats Human Services Reauthorization Act of 1998 (Pub. L. 105-285), and the Energy Policy Act of 2005 (Pub. L. 109-58).<sup>34</sup>

While Federal law forms the legislative basis for the LIHEAP program, the annual State Plan contains the policies governing implementation of the program each year. The State Plan includes Program Updates, DHS/DCED Crisis Interface, Assurances, and three appendices with rules governing the LIHEAP programs.

**Advocates should pay special attention to LIHEAP State Plan “Appendix B – Determination of Eligibility for LIHEAP Cash and Crisis Benefits.”** This section of the Plan provides guidelines for the Cash and Crisis grants, which are the most commonly accessed components of LIHEAP.

“Appendix C - Weatherization Assistance Program” contains information concerning both the Crisis Interface Program as well as the Department of Community and Economic Development (DCED) administered weatherization programs.

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<sup>31</sup> *Id.* at app. B § 601.22.

<sup>32</sup> *See id.*

<sup>33</sup> The U.S. Department of Health and Human Services website page dedicated to LIHEAP can be found at: <http://www.acf.hhs.gov/programs/ocs/programs/liheap>.

<sup>34</sup> 18-19 LIHEAP STATE PLAN, AT app. B § 601.1.

## Administration

The Department of Human Services (formerly the Department of Public Welfare) administers LIHEAP in Pennsylvania.<sup>35</sup>

*Cash Grants:* For the most part, DHS uses the County Assistance Office (CAO) as the administering agency for the Cash grant.<sup>36</sup> In some cases, DHS coordinates the activities of several counties and one CAO processes LIHEAP applications for several counties.

*Crisis Grants:* DHS uses several different agencies to assist in the delivery of the Crisis program.<sup>37</sup> These agencies include CAOs, community action agencies, the Department of Community and Economic Development, and other local organizations.

*Crisis Interface:* DHS and the Department of Community and Economic Development (DCED) jointly administer the Crisis Interface/Weatherization Assistance component.<sup>38</sup> DHS makes the Crisis eligibility determination, and DCED administers the heating system repairs, furnace replacements where warranted, and any appropriate weatherization treatments.<sup>39</sup>

***County staff members administering LIHEAP may not always be fully aware of the details of the current year's program.*** LIHEAP is only one of many programs the CAOs implement; it is available only part of the year; and its operations and guidelines are often modified within the course of a single year. In addition, many of the CAOs hire temporary energy assistance workers to staff the LIHEAP program, and these workers often become familiar with program guidelines at the same time the first applicants enter the system. Application delays beyond the mandated 30 day determination period are therefore not surprising.



**Advocacy Tip:** Although DHS has modified its training and monitoring process in order to expedite the processing of applications, advocates should encourage individuals to apply for Cash grants early in order to reduce any negative effect on applicants as a result of processing delays.

In the 18-19 Plan, DHS anticipates receiving \$214.8 million, based on the previous year's allocation.<sup>40</sup> At the time the State Plan was finalized, DHS anticipates carrying forward a balance of \$13 million. This results in a total anticipated budget of \$227.8 million. Approximately \$173.1 million of the \$227.1 million will be allocated to LIHEAP Grants.

<sup>35</sup> 18-19 LIHEAP STATE PLAN at i.

<sup>36</sup> *Id* at app. B § 601.5.

<sup>37</sup> *See id.*

<sup>38</sup> *Id* at app. C § I.

<sup>39</sup> *See id.*

<sup>40</sup> *Id.* at i.

An appeal process is available for individuals to challenge CAO decisions or failures to act on LIHEAP applications.<sup>41</sup> A Fair Hearing can be requested through the local LIHEAP office.<sup>42</sup> Individuals have 30 days to file an appeal with their local CAO in a process that is further detailed in the “Appeals” section of this manual.<sup>43</sup>

### Timetable

In 2018-2019, DHS’s opening date for both the Cash and Crisis components is on November 1, 2018 with a closing date estimated to be April 12, 2019.<sup>44</sup> The Crisis Interface program will also be open from November 1, 2018 until April 12, 2019.<sup>45</sup>

In addition, the length of the program is dependent on the availability of funds as the program year progresses, so DHS may shorten or extend the closing date.<sup>46</sup> In some previous years, DHS has often extended the program closing date several weeks into April, when funding was available.

## **General Eligibility**

To qualify for and receive Cash or Crisis benefits, an individual must meet several eligibility requirements: household income, home heating responsibility, Pennsylvania residency, and immigration status.<sup>47</sup> Crisis eligibility additionally requires that there be an actual or imminent home heating emergency that will be resolved through receipt of those grants.<sup>48</sup>

### Household Income

For 2018-2019, Pennsylvania has set the income eligibility level for both Cash and Crisis grants at 150% of the 2018 Federal Poverty Guidelines.<sup>49</sup> The income eligibility level for the Crisis Interface program is 150% of the Federal Poverty Income Guidelines.<sup>50</sup> However, the income eligibility level for the Weatherization Assistance Program is 200% of the 2018 Federal Poverty Income Guidelines.<sup>51</sup> Income eligibility levels for the 2018-2019 LIHEAP program year can be found in Appendix A of this Manual or DHS eligibility charts.<sup>52</sup>

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<sup>41</sup> 18-19 LIHEAP STATE PLAN AT app. B § 601.123.

<sup>42</sup> *See id.*

<sup>43</sup> *See* 55 PA. CODE § 275.3(b)(1) (1981); PA. DEP’T OF HUMAN SERVICES, SUPPLEMENTAL HANDBOOK § 870.12 (Sept. 27, 2012), <http://services.dpw.state.pa.us/oimpolicymanuals/supp/index.htm>.

<sup>44</sup> 18-19 LIHEAP STATE PLAN AT iii.

<sup>45</sup> *See id.*

<sup>46</sup> 18-19 LIHEAP STATE PLAN, AT app. B § 601.6(b).

<sup>47</sup> *See id.* AT app. B § 601.31.

<sup>48</sup> *See id.* at app. B § 601.32 (details regarding the specific eligibility requirements for Crisis grants).

<sup>49</sup> *Id.* at app. B § 601.31(1).

<sup>50</sup> 18-19 LIHEAP STATE PLAN, at 2.

<sup>51</sup> *Id.*

<sup>52</sup> PA. DEP’T OF HUMAN SERVICES, LIHEAP ELIGIBILITY INCOME CHART (2018-2019), <http://www.dhs.pa.gov/citizens/heatingassistanceliheap/homeheatingassistanceliheapeligibility/index.htm>.

## Income Calculation

Gross annual income is used to determine both a household’s eligibility and Cash grant amount.<sup>53</sup>

The **applicant** is given the discretion to choose between two time periods to be used in calculating their gross annual income.<sup>54</sup> **The applicant may choose to:**

- use their income from the previous 12 months or
- use their income from the calendar month immediately prior to the filing of the application, multiplied by 12 (monthly amounts are converted to a yearly figure).<sup>55</sup>



**Advocacy Tip:** Advocates should help the applicant determine which of the time frames (12 months or past calendar month) yields the income level most advantageous for the household.

In some cases, the selection of the time frame to be used, as well as the timing of the Cash grant application, may help lead to a determination of eligibility and may lead to significantly different benefit amounts.

Income for recipients of SNAP, Cash, or Medical benefits from DHS will be annualized based on the gross income on DHS’s Client Information System.<sup>56</sup> Applicants in this situation who would have a lower income based on the previous month’s income can appeal if the system automatically calculates a benefit amount and the applicant believes that it should be a higher amount because of lower income based on a different method.<sup>57</sup>

## Household Size

For the purposes of LIHEAP, a household is defined as an individual or a group of individuals, including related roomers,<sup>58</sup> who live together as one economic unit and customarily pay for home heating energy.<sup>59</sup> However, an individual who has previously received a LIHEAP cash benefit as a member of another household during the program year is not included in the household size.<sup>60</sup> Neither are temporary visitors, institutional residents, individuals who do not meet the immigration requirements, or individuals who are currently incarcerated or considered a fleeing felon.<sup>61</sup>

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<sup>53</sup> See 18-19 LIHEAP STATE PLAN at app. B §§ 601.81 – 84..

<sup>54</sup> See *id.* at app. B § 601.83(a).

<sup>55</sup> *Id.*

<sup>56</sup> *Id.*

<sup>57</sup> See *id.*

<sup>58</sup> 18-19 LIHEAP STATE PLAN at app. B §§ 601.3 and 601.81. Note that unrelated roomers are treated as a separate household, and may qualify for LIHEAP assistance separately – provided the other eligibility requirements (such as home heating responsibility) are met.

<sup>59</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.3.

<sup>60</sup> *Id.* at app. B § 601.41.

<sup>61</sup> See *id.*

Whose Income Counts?

Income level for an applicant household includes the gross annual income from **all** of the following people:

- all household members, regardless of relationship,<sup>62</sup>
- a roomer related by blood, marriage, or adoption to a household member,<sup>63</sup> and
- a person living with the applicant who, as a member of another household, has already received a LIHEAP Cash or Crisis grant during the present program year.<sup>64</sup>

Gross income is the total earned and unearned income of the household, including:

- employee earnings,
- profit from self-employment,
- income from roomers, boarders or apartment renters, and
- unearned income.<sup>65</sup>

*Note:* Each of these categories of earnings has multiple subcategories.<sup>66</sup> For example, DHS has specifically stated that funds withdrawn from Individual Retirement Accounts, Certificates of Deposit and proceeds from the sale of stock certificates are to be counted as unearned income.<sup>67</sup>

Some income sources, such as educational assistance, food stamps, and cash or in-kind heating assistance from public or private agencies, are **excluded** from the calculation of household income for the purposes of establishing eligibility for LIHEAP.<sup>68</sup> DHS has clarified that *all* students, not just undergraduate students, are able to exclude from household income educational assistance from scholarships, grants and loans.

Other income exclusions include:<sup>69</sup>

- Earned Income Tax Credits, even when paid throughout the year
- Wage earnings of a dependent child under 18

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<sup>62</sup> Same sex marriage became legal in the Commonwealth of Pennsylvania on May 20, 2014, when a decision rendered by the United States District Court for the Middle District of Pennsylvania struck down Pennsylvania's 1996 law banning the recognition of same gender marriage as unconstitutional. According to the Operations Memorandum (#14-10-02) dated on October 9, 2014, LIHEAP policy has not changed regarding mandatory household members. Spouses are mandatory household members and must be included in the same LIHEAP household. Compass has been updated and allows applicants to input same-sex spouses.

<sup>63</sup> Roomers who are not related to a household member should not be counted in the household, and are eligible on their own for a cash grant if they meet LIHEAP's eligibility requirement. 18-19 LIHEAP STATE PLAN, at app. B § 601.3.

<sup>64</sup> *Id.* at app. B § 601.81.

<sup>65</sup> *Id.* at app. B § 601.82.

<sup>66</sup> *See id.*

<sup>67</sup> *Id.* at app. B § 601.82(4)(xi).

<sup>68</sup> *Id.* at app. B § 601.84(1)-(25).

<sup>69</sup> *Id.* at app. B § 601.84



- Medicare premiums deducted from Social Security benefit payments
- Payments, including stipends, to volunteers for VISTA, Service Learning Programs, and Volunteer Programs under Title I of the Domestic Volunteer Service Act of 1973 (42 U.S.C.A. §§ 4951 – 4994)
- Loans **which can be verified with a statement from the lender or a loan document specifying the repayment plan**
  - *Note:* Since 2017, the exclusion of loans from gross annual income no longer requires that the loans be designated for a specific purpose, **or** be from an established financial institution.<sup>70</sup>

### Home Heating Responsibility

**Applicants must have a home heating responsibility** to receive LIHEAP. The following qualify as having a home heating responsibility:

- Homeowners or renters (including subsidized housing tenants) who pay for home heating fuel or utility service **directly to a vendor**.<sup>71</sup>
  - *Note:* If someone outside the household pays the bill because the household has zero/minimal income, the household is still considered to have a heating responsibility and is eligible to receive LIHEAP unless the bill is always paid by someone outside the household.<sup>72</sup>
- Renters who **pay for heat indirectly** as a part of their rent.<sup>73</sup>
  - *Note:* if a LIHEAP applicant pays for heat as an undesignated portion of the rent - provided the rent itself is not based on a fixed percentage of their income - they are considered to have a heating responsibility.<sup>74</sup>
- Roomers<sup>75</sup> who pay for their lodging in either a commercial establishment or in a private home which is their permanent and primary home.<sup>76</sup>

**Cash grant:** To establish home heating responsibility for a Cash grant, the household must show responsibility for paying for the **main source of heat** either directly to a vendor or to a landlord as a part of rent.<sup>77</sup>

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<sup>70</sup> *Id.* at app. B § 601.84(13).

<sup>71</sup> *Id.* at app. B § 601.31(2)(i)(A).

<sup>72</sup> *Id.*

<sup>73</sup> *Id.* at app. B § 601.31(2)(i)(B).

<sup>74</sup> *Id.*

<sup>75</sup> A roomer is defined as “[a]n individual who has an agreement with an **unrelated** landlord or property owner to rent a room whose payment for lodging includes heat and may include a private bathroom or one of the following: (i) Board. (ii) Kitchen or bathroom privileges on a shared basis. (iii) Light housekeeping facilities.” *Id.* at § 601.3 (emphasis added). DHS could request written verification from the property owner or landlord of the roomer’s occupancy. *Id.* at vi.

<sup>76</sup> *Id.* at app. B § 601.31(2)(i)(C).

<sup>77</sup> *Id.* at app. B § 601.31(2).

*Note:* Once it shows responsibility for the main source of heat, the household can choose to have the cash grant issued to its main **or** secondary heating source, and in certain circumstances, to a supplemental heating source.<sup>78</sup>

- A cash grant can only be directed to a supplemental heating source where the main source of heat is inoperable and the supplemental heat source is the source of energy used most by the household.<sup>79</sup>
- A **secondary** fuel type is the source of energy necessary to operate the main heating source, while a **supplemental** heat source is a source of energy used for heating in addition to the main heating source.<sup>80</sup>

Crisis grant: To establish home heating responsibility for Crisis, the household must show it pays for either its main **or** secondary source of heat either directly to a vendor or indirectly through a third-party as a part of rent.<sup>81</sup> For an important comparison of main and secondary fuel types, as well as supplemental fuel types, please see the Special Issues section of this manual.

Per DHS policy, the following individuals **do not** have a home heating responsibility and cannot receive LIHEAP:

- Renters are ineligible if their rental charge includes an undesignated amount for heat AND their rental charge is based on a fixed percentage of their income or on their source of income.<sup>82</sup> This would apply to subsidized-housing tenants whose heat is included in their rent.<sup>83</sup>
  - However, if a renter in this situation pays for their secondary heating source directly to a vendor AND that heating source is necessary for the operation of their primary heating source, then the household would be eligible for a crisis grant for their secondary heating source.
- A roomer is ineligible if the charge for room/room & board includes an undesignated amount for the main fuel AND the charge for room and board is based on a fixed percentage of their income or on their source of income.<sup>84</sup>
- A household is ineligible if some other person or agency is *always* responsible for the heating bill (for example, people in subsidized housing who have the bill paid by the housing agency; students).<sup>85</sup> However if the bill is paid by someone outside the household because the household has zero/minimal income, the household is still considered to have a heating responsibility and therefore eligible to receive LIHEAP.<sup>86</sup>

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<sup>78</sup> *Id.* at app. B § 601.41(4).

<sup>79</sup> *Id.*

<sup>80</sup> *Id.* at app. B § 601.3.

<sup>81</sup> *Id.* at app. B § 601.31(2).

<sup>82</sup> *Id.* at app. B § 601.31(2)(i)(B).

<sup>83</sup> *Id.*

<sup>84</sup> *Id.* at § 601.31(2)(i)(C).

<sup>85</sup> *Id.* at app. B § 601.31(2)(i)(A)..

<sup>86</sup> *Id.*

### Residency

Household members must permanently reside in Pennsylvania.<sup>87</sup>

### Temporary Living Arrangements

Individuals in a temporary living arrangement, such as a visit, vacation or education, generally do not qualify for LIHEAP. People living in institutions, dormitories, fraternity or sorority houses, or boarding homes are ineligible.<sup>88</sup>

College students can apply for and must not be denied LIHEAP eligibility solely on the basis of the temporary living arrangement section of the LIHEAP State Plan.<sup>89</sup> College students with year-round leases or for the school year only are considered residents of the county where they go to school and can qualify for LIHEAP. Generally, a temporary living arrangement is intended to last only for a few days or weeks, while a permanent living arrangement may last months or years.<sup>90</sup>



**Advocacy Tip:** Individuals who have temporarily left their permanent residence as a result of a home heating crisis *are* eligible for a grant for their permanent residence.<sup>91</sup>

### Recreational Vehicles

Persons living in recreational vehicles (Campers and RVs) are only eligible for LIHEAP if they provide verification that the recreational vehicle is permanently located in Pennsylvania and they have no other permanent residence.<sup>92</sup>

### Operators of a Licensed Business

Persons operating a licensed business out of the LIHEAP household's residence are ineligible for LIHEAP if they use the home's utilities as a deduction on their business' tax return **and** a majority (more than 50%) of the home is used for business.<sup>93</sup> DHS will use line 30 of Schedule C of IRS Form 1040 (Profit or Loss from Business) and block 7 of IRS Form 8829 (Expenses for Business Use of Your Home) to determine LIHEAP eligibility for household business owners.<sup>94</sup>

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<sup>87</sup> *Id.* at § 601.31(3).

<sup>88</sup> *Id.* at § 601.31(2)(ii).

<sup>89</sup> See PA. DEP'T OF HUMAN SERVICES, LIHEAP HANDBOOK § 601.41 (Feb. 8, 2013), <http://services.dpw.state.pa.us/oimpolicymanuals/liheap/index.htm>.

<sup>90</sup> See *id.* at § 601.42.

<sup>91</sup> See 18-19 LIHEAP STATE PLAN app. B § 601.105.

<sup>92</sup> *Id.* at app. B § 601.31(2) (iii).

<sup>93</sup> *Id.* at § 601.31(2)(iv).

<sup>94</sup> PA. DEP'T OF HUMAN SERVICES, POLICY CLARIFICATION OF LIHEAP ELIGIBILITY FOR HOUSEHOLD BUSINESS OWNERS (Nov. 7, 2011), [http://services.dpw.state.pa.us/oimpolicymanuals/liheap/PLA15989605\\_.pdf](http://services.dpw.state.pa.us/oimpolicymanuals/liheap/PLA15989605_.pdf).

### Fleeing Felon

Persons who are currently incarcerated or fleeing to avoid prosecution, custody or confinement after a felony conviction (or high misdemeanor in New Jersey) are ineligible for LIHEAP.<sup>95</sup>



**Advocacy Tip:** There is an open question as to whether it is DHS’s burden to demonstrate that the person is actually “fleeing.” Advocates should carefully scrutinize the facts and, if the situation merits it, file an appeal if the individual has an outstanding warrant for a reason other than fleeing prosecution, custody, or confinement.

### Operation of Heating Appliance

The heating appliance must be installed and operating based on the manufacturer’s specifications or current code requirements, whichever is more stringent.<sup>96</sup> If not, or if the household isn’t following all applicable building and fire codes, that household is not eligible for LIHEAP.<sup>97</sup>

### Non-Citizen Status

Lawfully admitted non-citizens are eligible to receive LIHEAP regardless of when they arrived in the United States, so long as they meet LIHEAP eligibility requirements.<sup>98</sup> Eligible non-citizens include: lawful permanent residents, asylees, refugees, Cuban/Haitian entrants, and non-citizens who have been battered or subjected to extreme cruelty in the United States.<sup>99</sup> Appendix B to the State Plan contains a full list of eligible statuses and acceptable documentation.<sup>100</sup>

### Household may still be eligible for LIHEAP even with household members who don’t qualify

The mere presence of non-eligible persons in the home does not disqualify the household from receiving LIHEAP. DHS has clarified that households with fleeing felons or members ineligible because of their immigration status, may still be eligible for LIHEAP if there are members of the household who meet the eligibility requirement. The caveat is that the income of all members of the household (even ineligible members) counts for income eligibility purposes, however, ineligible household members do not count for household size purposes. For example, if a household contains an undocumented father, a U.S. Citizen mother, and 2 U.S. citizen children, the income of all household members would count, but for determining whether the household meets the income eligibility guidelines, the household size would be three (3), not four (4).

### Social Security Numbers

An applicant **does not** need a Social Security number to be eligible for LIHEAP. However, each household member one year of age or older who does not provide a Social Security number must

<sup>95</sup> 18-19 LIHEAP STATE PLAN at app. B § 601.31(2)(v).

<sup>96</sup> *Id.* at app. B § 601.31(2)(vi).

<sup>97</sup> *Id.*

<sup>98</sup> *Id.* at app. B § 601.31(4).

<sup>99</sup> *See id.*

<sup>100</sup> *Id.* at B-26. The last category (battered or subject to extreme cruelty) can be shown through collateral contacts, affidavits, and eye witness accounts.

be listed on the Energy Assistance Affidavit.<sup>101</sup> This Affidavit is in the Certification section of the LIHEAP application.

*Note:* The Energy Assistance Affidavit has been more prominently highlighted in the Certification section on page 3 of the LIHEAP application, however the instructions are still somewhat confusing.

## Applications

An individual must complete and submit an application to receive LIHEAP.<sup>102</sup> All households that received a LIHEAP grant in 2018-2019 should have had either an application or a postcard informing them of how to apply on-line mailed to their home in October. Applications are generally available upon request from different sources in the community, such as CAOs, a LIHEAP administering agency, utility companies, or online at DHS's website.<sup>103</sup> They are also attached hereto at Appendix B.

*Note:* Because the income eligibility requirements for LIHEAP can differ from year to year and a household may have experienced changes (such as in income level or size), receipt of an application or postcard in the mail does not imply or indicate current eligibility.

An individual also may apply online through the COMPASS website.<sup>104</sup> DHS strongly encourages applicants to apply online through COMPASS. Households using COMPASS may receive an automated eligibility determination, if the income is already known to and verified by DHS because of participation in other programs such as SNAP, MA, or TANF, and the household's address and composition matches the information already in DHS' system.<sup>105</sup> The household will still have to provide proof of home heating responsibility.<sup>106</sup> Please let PULP know if applicants experience any difficulties with the automated eligibility determination.

The same form is used to apply for each of the LIHEAP components, including the Crisis Interface program.

An individual may need assistance to complete the application. Homebound individuals have the right to request that LIHEAP staff mail an application to them at their home and may also request help in filling out the form.<sup>107</sup>

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<sup>101</sup> 18-19 LIHEAP STATE PLAN at app. B § 601.106

<sup>102</sup> *Id.* at app. B § 601.21.

<sup>103</sup> See PA. DEP'T OF HUMAN SERVICES, LIHEAP BROCHURE - ENGLISH (2016); See also PA. DEP'T OF HUMAN SERVICES, LIHEAP BROCHURE - SPANISH (2016); PA Dep't of Human Services, *Heating Assistance/LIHEAP*, <http://www.dhs.pa.gov/citizens/heatingassistanceliheap/index.htm> (last visited Oct. 16, 2018).

<sup>104</sup> See [www.compass.state.pa.us](http://www.compass.state.pa.us).

<sup>105</sup> 18-19 LIHEAP STATE PLAN at app. B § 601.22.

<sup>106</sup> *Id.*

<sup>107</sup> *Id.* at § 601.24.

### Timing of Application

The date of application is the date the County Assistance Office or administering agency receives the application.<sup>108</sup> Where an individual is assisted by a utility, community group, or another party in filling out and forwarding an application, **the formal date of application is only when the local CAO or administering agency receives the application.**<sup>109</sup>

DHS has indicated that all households submitting a LIHEAP Cash application in 2018-2019 will receive a system generated notice informing them that their application has been received. This notice will be triggered once the application has been data entered.

As noted above, households using COMPASS may receive an automated eligibility determination if income is already known to and verified by DHS because of participation in other programs such as SNAP, MA, or TANF, and the household's address and membership matches the information already in DHS' system.<sup>110</sup>

### DHS Response

The CAO must provide the applicant with a written determination within 30 days of receiving a complete application for a Cash grant.<sup>111</sup> If the Cash grant application is deemed incomplete, the administering agency must send the applicant a notice indicating what information is missing within 10 *work days* of receipt.<sup>112</sup> The applicant will then have 15 *days* from the date of that notice to return the missing information in order to avoid rejection of the application.<sup>113</sup>



**Advocacy Tip:** If you have a client who has not applied by or near the end of the LIHEAP season (April 12, 2019) have them apply even if they do not have all of their documentation with them at the time. An incomplete application is not rejected, it is deemed incomplete and the client will then have 15 days from the date of the incomplete notice to submit the documentation. This will allow households nearing the end of the season to have their grant considered.

Although significant Cash grant processing delays have occurred in previous years, DHS's obligation to provide a determination of eligibility within 30 days of receiving a completed application continues to exist.<sup>114</sup> If county offices are routinely failing to comply with this deadline, please alert PULP so that we can bring it to the attention of DHS.

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<sup>108</sup> *Id.* at § 601.21(3).

<sup>109</sup> *Id.*

<sup>110</sup> 18-19 LIHEAP STATE PLAN at app. B § 601.22.

<sup>111</sup> *Id.*

<sup>112</sup> *Id.* at app. B § 601.23.

<sup>113</sup> *Id.*

<sup>114</sup> *See id.* at app. B § 601.22.

### Documentation vs. Verification

DHS uses two different classifications for information submitted in association with LIHEAP: “verification” and “documentation.”<sup>115</sup> “Verification” includes “any form of convincing information, including oral statements or documentation.”<sup>116</sup> “Documentation” meanwhile, is “written or printed evidence, such as fuel bills, rent receipts, or pay stubs, which is needed to determine LIHEAP eligibility and the type and amount of the LIHEAP benefit.”<sup>117</sup>

### Documenting Income

Applicants must **document** the amount and source of the income for: 1) all household members and 2) for anyone living in the residence who already received LIHEAP benefits during the program year as a member of another household.<sup>118</sup>

If an applicant claims little or no income for the household, the applicant will be required to provide **evidence** explaining how the household is meeting its financial obligations and basic living needs.<sup>119</sup> While the Plan does not specify the form of this evidence, the 2018-2019 Application for LIHEAP requires applicants with no income in the past month, or with income that is less than the cost of the household’s monthly basic living needs (food, shelter, personal items, etc.), to explain in writing how the household is meeting its basic living needs.<sup>120</sup> DHS generally applies a high level of scrutiny to applications of individuals who assert that they have no income.

### Documenting Heating Responsibility

*Cash grant:* applicants must **document** their responsibility for the primary heating source for the household.<sup>121</sup> A household that pays a vendor directly can satisfy this responsibility by submitting a fuel bill or receipt issued within the two months prior to the date of the LIHEAP application.<sup>122</sup> Households can also submit receipts from vendors for fuel purchased since January 2018.<sup>123</sup>

*Note:* Many utilities have established on-line portals that allow LIHEAP case workers to verify home heating responsibility directly through the portal. If a client does not have a bill from their primary heating source, they should still apply and this can be verified by the utility through the portal or through a phone call. Of course, for deliverable fuel vendors, the household will have to document their responsibility by providing a receipt for the delivery of home heating fuel. Since the purpose of this documentation is to prove home-heating responsibility, the receipt can be from

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<sup>115</sup> See *id.* at app. B § 601.101.

<sup>116</sup> *Id.* at app. B § 601.101(1).

<sup>117</sup> *Id.* at app. B § 601.101(2).

<sup>118</sup> *Id.* at app. B § 601.102(a).

<sup>119</sup> *Id.* at § 601.103.

<sup>120</sup> See PA. DEP’T OF HUMAN SERVICES, LIHEAP APPLICATION.

<sup>121</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.104(a).

<sup>122</sup> *Id.*

<sup>123</sup> *Id.*



a different vendor than the one that the client is electing to designate as the household's current LIHEAP vendor.

Households that pay for heat indirectly as an undesignated part of their rent can provide verification or documentation from the landlord or rental agent to show home heating responsibility.<sup>124</sup> Oral verification by the landlord is sufficient to meet this burden.<sup>125</sup>

*Note:* If a household chooses to have a benefit paid to the vendor of a secondary fuel type, then the household must document its responsibility for both the primary and secondary fuel types.<sup>126</sup>

*Crisis grant:* Applicants for crisis grants must prove payment responsibility for *either* the primary or secondary source of heat.<sup>127</sup> If, as a result of a prior service termination, the applicant does not have a recent bill or receipt, the intended vendor must supply documentation that indicates the vendor will activate service upon a determination of LIHEAP eligibility.<sup>128</sup>

*Note:* In certain situations, an applicant for a Cash or Crisis benefit can show proof of home heating responsibility despite the billing payment responsibility being in someone else's name.<sup>129</sup> This includes the death of the bill payer, credit problems of the applicant, and domestic violence safety concerns.<sup>130</sup> The applicant must then provide written proof that he/she lives at the residence address, and explain why the bill is in another person's name.<sup>131</sup>

- For example, if the LIHEAP applicant continues to have the utility bill in the name of her deceased spouse, she may then provide a driver's license documenting that she resides at the residence.<sup>132</sup>

### Documenting Proof of Residence

Generally, an applicant must live at the residence being heated. However, an applicant temporarily living away from his or her actual residence can still apply for LIHEAP by providing some documentation of the emergency or extenuating circumstances requiring the household to live elsewhere.<sup>133</sup> The CAO is required, upon request, to assist in providing appropriate documentation for applicants in these situations.<sup>134</sup>

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<sup>124</sup> *Id.* at app. B § 601.104(c).

<sup>125</sup> *Id.*

<sup>126</sup> *Id.* at app. B § 601.104(a).

<sup>127</sup> *Id.* at app. B § 601.104(b).

<sup>128</sup> *Id.*

<sup>129</sup> *Id.* at app. B § 601.104(d).

<sup>130</sup> *See id.*

<sup>131</sup> *See id.*

<sup>132</sup> *Id.*

<sup>133</sup> *Id.* at app. B § 601.105.

<sup>134</sup> *Id.*



### Documenting a Crisis

To receive a crisis grant, the applicant must prove that there is a home heating crisis.<sup>135</sup> Acceptable forms of proof include:

- A utility termination notice or verification of a scheduled termination,
- Verification that utility service has already been terminated, or
- A statement from the applicant that the household’s deliverable fuel supply is depleted or will last less than 15 days.<sup>136</sup>

Whether a crisis exists is fact specific. For example:

- A termination notice is generally sufficient proof to document a crisis for receipt of a Crisis grant.<sup>137</sup>

Because regulated utility companies cannot terminate service to LIHEAP income-eligible households during the Winter Moratorium (December 1 through March 31), a termination notice issued by a regulated utility company during the Winter Moratorium is not, by itself, accepted by DHS as proof of a home heating emergency.<sup>138</sup> However, in past years, DHS has honored, as proof of a crisis, shut-off notices dated February 1 or later that are issued by regulated utilities.<sup>139</sup>

- Subsidized housing tenants are not eligible for a Crisis grant if their rental charge includes an undesignated amount for heat AND is based on a fixed percentage of their income.<sup>140</sup>

*However*, if a subsidized housing tenant who has heat included in their rent has a direct relationship with electric company and the electricity is necessary to operate their primary heating source, then they would be eligible for a crisis grant to their secondary heating source (electricity).



### **Advocacy Tips**

An advocate may need to address:

- *Social Security Numbers*: A Social Security number is not required for eligibility, but if the applicant has a Social Security number and they are able to provide it, DHS has determined that it must be provided.<sup>141</sup> Regulated vendors often request social security numbers in

<sup>135</sup> *Id.* at app. B § 601.108.

<sup>136</sup> *Id.*

<sup>137</sup> *E.g., Id.* at app. B § 601.62(2)(ii); 66 Pa C.S. § 1406(g).

<sup>138</sup> 18-19 LIHEAP STATE PLAN, AT app. B § 601.108.

<sup>139</sup> Shut-off notices are valid for sixty days from the date they are issued. 66 Pa. C.S. § 1406(b)(1)(i). As such, a shut-off notice issued after February 1<sup>st</sup> could be acted on by the utility in April, after the end of the winter moratorium.

<sup>140</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.31(2)(i)(B).

<sup>141</sup> *Id.* at app. B § 601.106.

order to match the grant to the appropriate account. An applicant who does not have a Social Security number or is unable to provide one can complete an Energy Assistance Affidavit.<sup>142</sup> The Energy Assistance Affidavit is printed in the certification section on page three of the LIHEAP application.

- *Immigration Status*: Official documentation from the U.S. Citizenship and Immigration Services is generally sufficient to establish lawfully admitted non-citizen status.<sup>143</sup> A chart of acceptable documents for proving eligible non-citizen status is provided in the State Plan, at the end of appendix B.<sup>144</sup>

### Cash Grant

**The LIHEAP Cash grant is available to all eligible individuals with a home heating responsibility.**<sup>145</sup> An individual may be a renter or an owner and may use *any* type of fuel to provide heat to the residence, including but not limited to: gas, oil, electric, wood, propane.<sup>146</sup> The purpose of the Cash grant is to assist low-income households with their financial home heating burden.<sup>147</sup> Therefore, to receive a Cash grant an individual:

- Need **not** be threatened with termination of service;
- Need **not** have an outstanding bill or be in debt to a utility or energy vendor; and
- Need **not** have a direct relationship with a utility or energy vendor.

Grants are calculated based upon a number of household characteristics that impact affordability:<sup>148</sup>

- Household size,
- Household income,
- Heating Region, and
- Primary (or main) Fuel Type.

Based upon these household characteristics, Cash grants for 2018-2019 will range from \$200 to \$1,000 per household.<sup>149</sup> The LIHEAP Benefit Amount Table shows the size of the Cash grant a household may receive.<sup>150</sup>

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<sup>142</sup> *Id.*

<sup>143</sup> *See d.* at app. B § 601.109.

<sup>144</sup> *Id.* at app. B.

<sup>145</sup> *See id.* at app. B § 601.31.(2)

<sup>146</sup> *See id.*

<sup>147</sup> *See id.* at app. B § 601.2.

<sup>148</sup> *Id.* at app. B § 601.41(a)(1-4).

<sup>149</sup> *See* 18-19 LIHEAP STATE PLAN, at ii.

<sup>150</sup> *See* PA. DEP'T OF HUMAN SERVICES, LIHEAP BENEFIT AMOUNT TABLE (2018), <http://www.dhs.pa.gov/citizens/heatingassistanceliheap/liheapbenefitamounttable/index.htm>.

*Note:* The Benefit Amount Table only includes income levels up through \$22,999. However, households with incomes above \$22,999 may still be eligible, depending on household size. Refer to Appendix A of this Manual for 2018-2019 PA LIHEAP Income Guidelines.

If the household pays for fuel directly, then DHS will send the Cash grant to the fuel vendor or utility on behalf of the household.<sup>151</sup> The applicant receives the grant directly in the following situations: if the household pays for heat as an undesignated part of rent, the fuel vendor refuses to participate in the program or has been removed from the list of participating vendors, the heating bill is in the name of a non-household member, the applicant is a roomer, or the bill is paid to a third party such as in a master-metered situation.<sup>152</sup>

Landlords, rental agents, housing authorities, or hotel or rooming house managers are not eligible to receive direct vendor payments.<sup>153</sup> Thus, an unscrupulous landlord is not able to intercept or coerce a LIHEAP grant from a tenant.

With the advent of competition in electric and natural gas utility service, some households may be purchasing their energy generation from an entity other than their local regulated distribution company. LIHEAP grants can only go to the local regulated distribution company. If a supplier bills customers separately for generation service, those customers cannot designate their LIHEAP grant to pay the generation bill.<sup>154</sup> However, in most cases, residential customers who use a supplier are billed through the distribution company. In that circumstance, LIHEAP can apply to the entire bill.

### Crediting a Cash Grant to a CAP Customer's Account

#### **Background**

The purpose of LIHEAP is to help low-income households meet their home heating needs. The LIHEAP Federal statute and regulations and Pennsylvania's approved State Plan require that LIHEAP funds be applied in full to the account of LIHEAP eligible households.

#### Customer Assistance Programs (CAPs)

In addition, each large regulated electric and natural gas distribution company in Pennsylvania must provide a Customer Assistance Program (CAP) for low-income consumers within its service territory.<sup>155</sup> CAPs generally serve payment-troubled households with incomes at or below 150%

<sup>151</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.44(a).

<sup>152</sup> *Id.* at app. B § 601.44(b).

<sup>153</sup> *Id.* at app. B § 601.44(c).

<sup>154</sup> Note, however, that almost all competitive electric suppliers sell their receivables to the utility company and have that utility company bill the customer for the supply charges. In this case, applicants who direct their LIHEAP grant to the utility will indirectly pay for the competitive supply. This is because the utility retains the ability to terminate service for nonpayment of the energy costs that it purchases from the competitive supplier. It is only in those cases where a supplier separately bills the customer that the customer cannot direct the LIHEAP grant to the supplier.

<sup>155</sup> 66 Pa. C.S. §§ 2803 (electric), 2203 (gas).

of the Federal poverty level, similar to the LIHEAP eligibility level. The Pennsylvania Public Utility Commission (PUC) oversees the CAP programs, which are administered by the individual utility companies. CAP programs protect consumers' health and safety by helping low-income customers maintain affordable utility service.<sup>156</sup> In CAP, monthly utility bills are lowered by providing a reduced rate through either a Percentage of Income Payment Program (PIPP or PIP), a rate discount, or some other PUC approved model. Entry into CAP will also generally freeze any collection activity of pre-program arrears and enable their eventual forgiveness.

Companies provide unique names for their CAP program. For example, PPL's CAP is OnTrack, PGW's is Customer Responsibility Program (CRP), and NFG's is Low-Income Rate Assistance (LIRA). Each program operates somewhat differently.

### Intersection of LIHEAP and CAP

- CAP participants must apply for and designate one LIHEAP grant to the utility administering the CAP.
- LIHEAP Crisis recipients not already enrolled in CAP must be offered entrance into the CAP of the utility company designated to receive that Crisis grant, or a budget plan, depending on which is the most advantageous.<sup>157</sup>

However, PUC policy, which governs utility accounting practices, had permitted utilities not to credit a CAP participant's LIHEAP Cash grant specifically to that individual customer's current bill. Instead, utilities could apply the grant to cover the general costs of the Customer Assistance Program, to frozen pre-program arrears or to the difference between the CAP "Asked to Pay" amount and the amount that the customer actually consumed.

To address this questionable application of the CAP payment by utilities, DHS formulated a policy **requiring utilities to apply the LIHEAP cash grant to the individual CAP customer's asked-to-pay amount.**<sup>158</sup> The vendor copy of the Vendor Agreement for the 2018-2019 program year<sup>159</sup> also states the following:

3. Public utilities that operate Customer Assistance Programs (CAP) will apply the LIHEAP Cash grant in full to the customer's account:
  - a) To resolve any past-due CAP payments;
  - b) To the current CAP payment; and
  - c) Any remaining funds credited to future CAP payments.

NOTE: A CAP payment is the amount the customer is required to pay under the terms of the utility's CAP agreement.

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<sup>156</sup> 52 PA. CODE §§ 54.73 (electric), 62.3 (gas).

<sup>157</sup> 18-19 LIHEAP STATE PLAN at app. B § 601.61.

<sup>158</sup> *Id.* at app. B § 601.45.

<sup>159</sup> See Appendix F attached hereto.

DHS continues to require that LIHEAP Cash grants be applied to a CAP household’s “asked to pay” amount. The vendor agreement does not use that phrase, but instead talks about a household’s “CAP payment”, defined as “the amount the customer is required to pay under the utility’s CAP agreement.” Since each of the CAP programs operates slightly differently, advocates are encouraged to contact PULP staff with questions. Additionally, each of the utility’s CAP plans can be found on the Public Utility Commission’s website.<sup>160</sup>



**Advocacy Tip:** Advocates should remain vigilant and carefully review each customer’s account to be certain that the LIHEAP Cash grant has, in fact, been credited properly to the “Asked to Pay” amount. The review process may be daunting since it is often difficult to trace how utilities are applying LIHEAP payments. If you have questions, please contact PULP staff.

### Policy Aftermath:

In reaction to this policy change, many utilities have sought novel means to recover the value of the LIHEAP grants which formerly covered general operating costs of the Customer Assistance Program. One method, called “CAP-Plus,” adds a flat fee to each customer’s account based on the total value of LIHEAP grants obtained in the previous program year. The legality of this process had been challenged; however, the Commonwealth Court of Pennsylvania has affirmed the adoption of the CAP-Plus program.<sup>161</sup> LIHEAP clients participating in CAPs at utilities that have implemented CAP-Plus **are required to pay** this additional charge and advocates should be aware that other companies may also petition the Commission to implement a CAP-Plus payment.

### Crisis Grant

The LIHEAP Crisis grant assists households with a home heating related emergency, such as: loss of heat due to a heating system failure; actual or scheduled service shut-off; lack of fuel; or imminent depletion of fuel.<sup>162</sup> Crisis grants may be applied to either the primary or secondary heat source, or a supplemental heat source where the main source of heat is inoperable.<sup>163</sup> Although households should apply for both Cash and Crisis grants if they are eligible for both, the LIHEAP State Plan is clear that households may apply for and, if eligible, receive a Crisis grant regardless of whether they apply for and receive a Cash grant.<sup>164</sup>

When a crisis arises, an individual may apply for a Crisis grant as well as for a Cash grant. DHS first looks to the Cash grant amount to resolve the crisis; if that amount is not enough, DHS then

<sup>160</sup> See [http://www.puc.pa.gov/consumer\\_info/electricity/energy\\_assistance\\_programs.aspx](http://www.puc.pa.gov/consumer_info/electricity/energy_assistance_programs.aspx). Scroll down on the page to the section titled “Universal Service Plans and Evaluations.”

<sup>161</sup> Pa. Communities Org. for Change, Inc. v. Pa. Pub. Util. Comm’n, 89 A.3d 338 (Pa. Commw. Ct. 2014).

<sup>162</sup> See 18-19 LIHEAP STATE PLAN at app. B § 601.4(2).

<sup>163</sup> *Id.* at app. B § 601.61.

<sup>164</sup> *Id.* at app. B § 601.32.

approves the Crisis grant only to the extent necessary to resolve the crisis, and only if the Crisis grant will resolve the emergency.<sup>165</sup>

Cash grants and Crisis grants, as well as the Crisis Interface program, can be used individually or jointly to resolve the crisis. Types of assistance can include:

- Pipe thawing,
- Gas/fuel line repair,
- Purchase of a new furnace/heating system,
- Furnace repair,
- Water-heating system repair,
- Broken window repair,<sup>166</sup> or
- Payment of utility bills or for fuel delivery.<sup>167</sup>

The State Plan notes these particular examples, but other heat related emergencies can also be addressed.

Other grants, such as from a regulated utility's Hardship Fund or other public or private sources of funding, can also be used in combination with LIHEAP to resolve a crisis.<sup>168</sup>

In response to **an advocate's request, or due to individual utility company policy, a utility may also accept less than the amount due to resolve a crisis.** For instance, in 2018, PECO announced that it will accept a Crisis grant as sufficient to resolve a crisis and prevent termination of service or restore service for all households with balances of \$3,000 or less. After application of the Crisis grant, PECO will place the balance of the arrears on a payment agreement.

Advocates are encouraged to be creative in combining and leveraging these grants – and requesting that utilities reduce up-front payment amounts - for the purpose of resolving a utility crisis.

### Expedited Processing

The CAO or other administering agency must expedite processing of Crisis grant applications. Households that qualify for a Crisis grant must receive assistance within **48 hours** of submitting

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<sup>165</sup> See *id.* at app. B § 601.32(3).

<sup>166</sup> Broken windows alone do not meet the definition of a home heating emergency unless their repair is necessary to ensure the effectiveness of other repairs or improvements. *Id.* at app. B § 601.62(vi).

<sup>167</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.62.

<sup>168</sup> Each regulated electric and gas utility has a hardship fund. See [http://www.puc.state.pa.us/consumer\\_info/electricity/energy\\_assistance\\_programs.aspx](http://www.puc.state.pa.us/consumer_info/electricity/energy_assistance_programs.aspx). Some of those hardship fund programs – such as PPL's Operation HELP – allow utility customers to use those funds for other fuel types.

the application.<sup>169</sup> In life-threatening situations, assistance must be provided within **18 hours** of the application.<sup>170</sup>



**Advocacy Tip:** CAOs and administering agencies often fall behind on the processing of applications due to the volume of applications within a limited time period. If an applicant does not get a decision from the CAO within the 48 hour/18 hour Crisis deadlines (as well as the 30 day Cash deadline), the advocate should contact the CAO. Each CAO has a LIHEAP coordinator who can troubleshoot missed Crisis deadlines.<sup>171</sup> Have your CAO identify that individual, and contact them immediately when an application is not processed within the 48 hour/18 hour window. We have provided the list of LIHEAP Coordinators as Appendix D of this document.

### Crisis Grant Eligibility

Crisis applicants must meet distinct eligibility criteria to receive a grant:

- The household must meet all of the general eligibility requirements regarding income, home heating responsibility, residency, and citizen status.<sup>172</sup>
- The household must be without heat or in imminent danger of being without heat due to a weather-related event, a home heating system breakdown, a utility shut-off or an energy supply shortage.<sup>173</sup> **DHS has clarified that a household that heats with a deliverable fuel will be considered to be in a home heating emergency if their heating fuel supply will last less than 15 calendar days.**<sup>174</sup>
- The Crisis benefit must alone, or in conjunction with other resources, resolve the home heating emergency.<sup>175</sup>
- The household must provide proof of the home heating emergency.<sup>176</sup>

### Grant Features

The amount of a Crisis grant is the amount needed to resolve the crisis subject to the minimum allowable Crisis grant of \$25 and the maximum allowable Crisis grant of \$600.<sup>177</sup> The amount of the Crisis grant cannot exceed whatever amount is needed to resolve the crisis.<sup>178</sup>

Crisis grants are paid directly to the approved LIHEAP vendor or utility.<sup>179</sup> Exceptions in which Crisis grants are paid directly to the applicant are rare, but may arise situations when direct

<sup>169</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.4(2).

<sup>170</sup> *Id.* at app. B § 601.4(2).

<sup>171</sup> A list of LIHEAP contacts at each CAO is attached to this manual as Exhibit D.

<sup>172</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.32(1).

<sup>173</sup> *Id.* at app. B § 601.32(2).

<sup>174</sup> *See id.* at app. B § 601.62(2)(i).

<sup>175</sup> *Id.* at app. B § 601.32(3).

<sup>176</sup> *Id.* at app. B § 601.32(4).

<sup>177</sup> *Id.* at ii.

<sup>178</sup> *See id.* at app. B § 601.61.

<sup>179</sup> *Id.* at app. B § 601.64.



payment to the vendor cannot be made. In this case, DHS will pay the Crisis benefit to the applicant as a reimbursement after the purchase has been verified.<sup>180</sup>

Crisis funds can pay reconnection fees, re-start fees, and reasonable delivery charges.<sup>181</sup> **They may not be used to pay security deposits or late fees.**<sup>182</sup> Advocates should note that as of January 2015, regulated utilities can no longer require CAP eligible customers to pay a security deposit and should advise PULP of any utilities that attempt to do so.<sup>183</sup> Most CAP programs use the same income guideline as LIHEAP -- 150% of Federal Poverty and below – however, CAP programs may count income and household members that LIHEAP does not, and vice versa.

### Heating System Repairs

Weather-related heating emergencies may include heating system repairs or heating system replacements.<sup>184</sup> A household can use a Crisis grant to pay for the repairs,<sup>185</sup> but PULP recommends that clients access the Crisis Interface/Weatherization Assistance Program for assistance in making the necessary repairs or replacing their heating system free of charge, provided the household is income eligible. This program is discussed in greater detail below.

### Deliverable Fuels

Special rules apply to the payment of a Crisis grant for a shortage of deliverable fuels (e.g., oil, propane, kerosene, wood). In this situation, **an applicant's statement** that their fuel supply has been exhausted or will last fewer than 15 days is acceptable proof of an energy crisis.<sup>186</sup>

In the case of deliverable fuels, the LIHEAP crisis grant can include the cost of delivery up to the \$600 maximum payment.<sup>187</sup> If the fuel is not delivered by the vendor, the household will receive the amount needed to resolve the crisis or the maximum amount of fuel that can be transported by the household in one trip; again subject to the \$600 maximum Crisis payment.<sup>188</sup> A prior statement from the vendor is required to verify the cost of the non-vendor pick-up.<sup>189</sup>

DHS requires deliverable fuel vendors to charge the lowest price if the vendor has a variable pricing structure (i.e., one price for cash deliveries and one for credit deliveries), and requires that the household be charged the same amount as a non-LIHEAP household for an identical delivery based on quantity. In other words, if there is a minimum delivery fee (or a higher per unit price

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<sup>180</sup> *Id*

<sup>181</sup> *See id.* at app. B § 601.62(2)(i-ii).

<sup>182</sup> *Id.* at app. B § 601.45.

<sup>183</sup> 66 Pa. C.S. § 1404(a.1).

<sup>184</sup> 18-19 LIHEAP STATE PLAN at app. B § 601.62(1).

<sup>185</sup> *See id.*

<sup>186</sup> *Id.* at app. B § 601.108.

<sup>187</sup> *See id.* at app. B § 601.61.

<sup>188</sup> *Id.*

<sup>189</sup> *Id.*



for a lesser amount of fuel) it must be assessed for LIHEAP and non-LIHEAP households equally.<sup>190</sup>

Advocates should continue to watch out for this to ensure that households are paying the lowest possible price for deliverable fuel.

### Crisis Resolution

A LIHEAP Crisis grant must resolve the crisis.<sup>191</sup> Households are **ineligible** for a Crisis grant if the grant, alone or combined with other resources available to the household, will not resolve the crisis.<sup>192</sup> Given the fragile economic condition of LIHEAP Crisis applicants and the current cost of energy, a \$600 Crisis grant alone could very likely be insufficient to resolve the crisis.



**Advocacy Tip:** Applicants will still be eligible for Crisis grants if the grant will resolve the crisis **in combination with other resources**. Advocates should work with applicants, reach out to community organizations, and negotiate with utilities to identify additional resources that will complement the Crisis grant in resolving the home heating crisis. Resources can include, but are not limited to, supplemental funds from community organizations or friends and family, utility hardship funds, and negotiating a lower amount owed with the utility or a payment arrangement or deferral of debt by the utility.

*Minimum Grant:* If a household requires less than \$25 to resolve a home heating emergency, then it will not be eligible to receive a Crisis grant.

*Maintenance of Service:* When a regulated electric or natural gas vendor accepts a Crisis payment to prevent termination or reconnect service to the household, then that vendor must maintain ongoing service to the household for at least 30 calendar days following the resolution of the crisis.<sup>193</sup> When a household receives a Crisis grant approval up to 30 days before the Winter Moratorium or during the Winter Moratorium period, then service may not be terminated until either 30 days after the Crisis is resolved, or May 1st, whichever is later.<sup>194</sup>

*Enrollment in CAP:* If a utility accepts a Crisis grant, then that utility *must offer* that individual the opportunity to enroll in that utility's Customer Assistance Program (CAP) or into a budget billing plan, whichever is more beneficial to the applicant.<sup>195</sup>

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<sup>190</sup> *See* Vendor Agreement – Liquid or Solid Fuels ¶ 5a.

<sup>191</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.61.

<sup>192</sup> *Id.*

<sup>193</sup> *Id.* at app. B § 601.61.

<sup>194</sup> *Id.*

<sup>195</sup> *Id.*

### LIHEAP Crisis Grants and the Winter Moratorium

There are conflicting legal principles at work during the Winter moratorium. In general, customers of regulated electric and natural gas utilities with a household income at or below 250% of the Federal Poverty Level are protected from service termination from December 1 through March 31 of each year, unless the utility is specifically given permission to terminate by the PUC.<sup>196</sup> A request for such permission by the utility is exceptionally rare. Customers of PGW have separate guidelines.<sup>197</sup>

On one hand, Chapter 14 (the Pennsylvania statute that governs terminations) specifically states that a notice of termination is sufficient proof of a crisis to enable a low-income household to qualify for a Crisis grant.<sup>198</sup> However, since the basis for receiving a Crisis grant rests with the household demonstrating the existence of an *imminent or actual crisis*, DHS does not generally consider a low-income household protected by the Winter Moratorium to be in an imminent crisis and will not authorize a Crisis grant to such a household.

As a result, some confusing scenarios arise:

- **Scenario #1:** A regulated utility issues a termination notice, to take effect during the Winter Moratorium period. Because the Winter Moratorium prevents terminations, before the utility may act on that termination notice, it must petition the PUC for permission to do so.<sup>199</sup> In the extraordinarily rare case that the PUC grants permission to act on the notice and terminate the household, then a crisis exists and the household will be eligible for a Crisis grant. DHS does not consider the household to be in crisis until the PUC has given permission for the utility to act.<sup>200</sup>
- **Scenario #2:** Same facts as Scenario #1. The utility either does not seek PUC permission to act on the notice or seeks PUC permission and is denied. In either case, the applicant is not in an actual crisis, but Chapter 14 would appear to authorize the grant anyway.

DHS treats this situation as a quasi-crisis. In past years, applicants in this situation did not receive an absolute denial, but DHS delayed processing of the grant until a later date, pending funding availability.

*Note:* The applicant may receive a notice from DHS informing her that she is not presently eligible for a Crisis grant because there is no imminent or immediate crisis, but that she may receive a grant if, towards the end of the program year, she remains in a crisis situation and there is sufficient funding available. This could cause confusion for LIHEAP Crisis applicants.

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<sup>196</sup> 66 Pa. C.S. § 1406(e)(1).

<sup>197</sup> 66 Pa. C.S. § 1406(e)(2).

<sup>198</sup> 66 Pa. C.S. § 1406(g).

<sup>199</sup> 66 Pa. C.S. § 1406(e)(1).

<sup>200</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.62(2)(ii)(A).

- **Scenario #3:** A utility issues a termination notice in February to a household protected by the winter termination moratorium. Because termination notices are effective for sixty days, it will still be in effect after the close of the Winter Moratorium. After April 1, utilities can terminate service without PUC permission.



**Advocacy Tip:** Whether DHS will provide a Crisis grant may depend on a number of factors, such as the availability of funds, the actual closing date of the Crisis component, or other policy determinations. Because the notice will still be in effect after the moratorium, advocates should argue the Crisis grant will resolve an imminent crisis.

Vendors not regulated by the PUC are not subject to Chapter 14 or to the Winter Moratorium.<sup>201</sup> Therefore, DHS will examine crisis applications for customers of those vendors on a case by case basis. For example, some Rural Electric Cooperatives or municipal utilities preclude termination during certain winter months, while others do not.

### Crisis Interface/Weatherization Assistance Program Component

The Crisis Interface/Weatherization Assistance Program component of LIHEAP is designed to help low-income households who are in a crisis situation due to inoperability or faulty functioning of a heating source as a result, for example, of a heating system or furnace breakdown. The program provides a household with necessary repairs to a furnace or to replace the furnace outright. The program is open from November 1, 2018 until April 12, 2019.

The measures for which Weatherization Agencies will be responsible under the LIHEAP Crisis program are as follows:<sup>202</sup>

- Repair of heating system
- Loan of auxiliary heater
- Repair of gas or other fuel lines
- Replacement of un-repairable heating systems
- Repair of hot water heating system
- Heating system pipe thawing service
- Repair of broken windows<sup>203</sup>
- Provide blankets

<sup>201</sup> See 66 Pa. C.S. § 1406(e)(1).

<sup>202</sup> PA. DEP'T OF CMTY. & ECON. DEV., WEATHERIZATION ASSISTANCE PROGRAM STATE PLAN, at app. C § IV (2016).

<sup>203</sup> DHS policy states that broken windows alone do not meet the definition of a home-heating emergency, but can be repaired if the heating system is also being repaired or replaced. 18-19 LIHEAP STATE PLAN, at app. C § IV.

Because situations like the loss of a heat source represent crises, remedial action must be taken within an appropriate time frame of 48, or 18 hours in the case of life-threatening situation.<sup>204</sup> Initially, a non-permanent action, such as the provision of space heaters, may temporarily help to ameliorate the situation.<sup>205</sup> A more permanent solution should follow the temporary measure within a reasonable amount of time.<sup>206</sup> Unlike the Cash and Crisis components, the Crisis Interface program component provides services rather than grants.<sup>207</sup> It is administered jointly by DHS and the Department of Community and Economic Development (DCED) in the following manner:

- The applicant must be determined to be in a crisis and eligible for a Crisis Interface referral by the DHS administering agency (such as the CAO);
- The DHS administering agency refers the applicant to the appropriate local weatherization agency;
- The weatherization agency conducts a home visit to assess the heating system, proceeds to take appropriate action to resolve the crisis, and if appropriate, initiate additional weatherization measures.<sup>208</sup>

Special eligibility rules apply for renters:

- In all cases, prior written permission must be granted by the landlord in addition to the applicant tenant for the agency to enter the premises to provide Crisis or Weatherization Services; and
- The landlord and tenant must sign an agreement, witnessed by the agency, that the tenant will not be evicted or suffer a rent increase for a reasonable time (not less than 18 months), unless the landlord can show the eviction or increase is not related to the weatherization work performed.<sup>209</sup>

### Appeals

Individuals can request fair hearings to challenge decisions of the CAO -- such as being improperly denied LIHEAP benefits; having benefits unjustly delayed; being approved for less than the correct amount; or being improperly assessed for an overpayment.<sup>210</sup> Individuals can complete and sign the appeal section of any notice, send a written or faxed request to the CAO or tell the CAO they are appealing. In the case of an oral appeal, there must be a written follow-up within 3 days.

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<sup>204</sup> PA. DEP'T OF CMTY. & ECON. DEV., WEATHERIZATION ASSISTANCE PROGRAM STATE PLAN, at app. C § IV (2016).

<sup>205</sup> *Id.* at § III.

<sup>206</sup> *Id.* at § IV.

<sup>207</sup> *Id.* at § I.

<sup>208</sup> *Id.*

<sup>209</sup> 18-19 LIHEAP STATE PLAN, at app. C § VII.

<sup>210</sup> *Id.* at app. B § 601.123(a).

*Note:* LIHEAP is not an entitlement program. Unlike other public benefits programs, an appeal will be ineffective if the individual applied for LIHEAP after the program closed or when there was a lack of funds.<sup>211</sup>

Detailed procedures for the appeal process are found in Chapter 870 of DHS’s Supplemental Handbook, posted online at DHS’s website.<sup>212</sup>



**Advocacy Tip:** There are several key time frames for the advocate to keep in mind:

- An appeal must be taken within 30 days of the date of written notice from the CAO.<sup>213</sup>
- An appeal must be taken within 60 days of the CAO’s failure to act on a request or an application.<sup>214</sup>
- An appeal must be taken within 6 months of the date of the CAO’s failure to send a required written notice or where there is an administrative error.<sup>215</sup>

As long as the program is open, failure to adhere to these time frames, as well as other appealable issues, may be resolved by an individual simply filing a new application. In these situations, an applicant may benefit from direct advocacy to CAO staff to ensure proper processing of the application.

### Special Issues to Watch for LIHEAP Advocates

The **primary heat source** is “The central heating system used most by the household or, if the residence is not centrally heated or the central heating system is inoperable, the heat source used most by the household.”<sup>216</sup>

#### Primary, Secondary and Supplemental Fuel Types

LIHEAP designates three fuel types: main, secondary, and supplemental.<sup>217</sup>

The **primary fuel type** is “the type of energy consumed by the primary heat source to create heat.”<sup>218</sup>

<sup>211</sup> *Id.*

<sup>212</sup> See <http://services.dpw.state.pa.us/oimpolicymanuals/supp/index.htm>.

<sup>213</sup> *E.g.*, 55 Pa Code § 275.3(b)(1); PA. DEP’T OF HUMAN SERVICES, SUPPLEMENTAL HANDBOOK § 870.12 (Jul. 21, 2015), <http://services.dpw.state.pa.us/oimpolicymanuals/supp/index.htm>.

<sup>214</sup> *E.g.*, 55 Pa Code § 275.3(b)(2); PA. DEP’T OF HUMAN SERVICES, SUPPLEMENTAL HANDBOOK § 870.12 (Jul. 21, 2015), <http://services.dpw.state.pa.us/oimpolicymanuals/supp/index.htm>.

<sup>215</sup> *E.g.*, 55 Pa Code § 275.3(b)(3); PA. DEP’T OF HUMAN SERVICES, SUPPLEMENTAL HANDBOOK § 870.12 (Jul. 21, 2015), <http://services.dpw.state.pa.us/oimpolicymanuals/supp/index.htm>.

<sup>216</sup> 18-19 LIHEAP STATE PLAN app. B § 601.3

<sup>217</sup> *Id.*

<sup>218</sup> *Id.*

The **secondary fuel type** is “the source of energy that is necessary, in addition to the primary heat source, to operate the primary heating source.”<sup>219</sup>

A **supplemental fuel type** is “[a] source of energy that a household uses to provide heat in addition to the residence’s primary heat source.”<sup>220</sup>



**Advocacy Tip:** These definitions of secondary and supplemental fuel type can be helpful for a household. For example, if a household’s oil or gas furnace heating system needs electricity in order to operate, the loss of electric service to the residence will result in the shut-down of the furnace, and, therefore, loss of heat. In this instance, a household can apply for a LIHEAP grant citing electric as a “secondary fuel type.” The LIHEAP application specifically asks for information about secondary fuel types used to run main heating sources.<sup>221</sup> LIHEAP cash or crisis grants can be directed to secondary heating source. However, a cash grant can be directed to a *supplemental* fuel type **only if** the main source of heat is inoperable and the supplemental fuel is the source of energy used most by the household for heating.<sup>222</sup>

Additionally, note that the definition of **primary heat source** allows non-centralized heating if the centralized heating system is inoperable. In that case, the primary heat source becomes the heat source that is used most by the household.

*Note:* that DHS has issued an Operations Memorandum indicating that it does not consider water as a secondary heating source.<sup>223</sup> However, advocates have been able to convince DHS in the past to issue grants for water if they are necessary for the operation of the primary heating source – such as through steam radiators or other such system. Advocates should contact PULP if they run into this situation.

### Restrictions on use of LIHEAP funds

LIHEAP benefits may be used to pay reconnection fees, but may **not** be used for security deposits or for late fees.<sup>224</sup> When attempting to reconnect a household’s utility service, advocates may need to look to other resources or to the utility itself to help generate funds for security deposits or late fees. However, as of January 2015, CAP-eligible customers cannot be charged security deposits.<sup>225</sup> Most low-income households that are eligible for LIHEAP will also be CAP eligible, subject to variations in household and income definitions between the utilities and DHS. PULP is interested in hearing about cases of LIHEAP recipients being charged security deposits for reconnection.




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<sup>219</sup> *Id.*

<sup>220</sup> *Id.*

<sup>221</sup> See PA. DEP’T OF HUMAN SERVICES, LIHEAP APPLICATION § 8.

<sup>222</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.41(a)(4).

<sup>223</sup> DHS Operations Memorandum 09-10-01, October 7, 2009

<sup>224</sup> *Id.* at app. B § 601.45.

<sup>225</sup> 66 Pa C.S. § 1404 (a.1).

**Advocacy Tip:** In situations where the utility claims a LIHEAP recipient is not CAP eligible, it may still be worth advocacy to request that a utility waive security deposits or late fees. Particularly when the utility stands to receive a Crisis or Cash grant in exchange for the waiver, this request may receive a positive response. Additionally, each of the regulated utilities and some other energy vendors have Hardship Funds that assist struggling utility customers with their bills. Contact the household's local vendor to inquire about additional company-sponsored customer assistance mechanisms.

### Transfer of Service or Initiation of Service at a new Address

For customers whose service has been disconnected at their previous address and who need services to be connected at their new address, a regulated utility may use a LIHEAP Cash Grant to cover 50% of the customer's back balance from the previous address plus a reconnection fee in order to restore service.<sup>226</sup> If a LIHEAP Cash grant is more than this amount, the regulated utility must apply the remainder of the Cash grant to the household's future bills, and not to the remaining back balance.<sup>227</sup> Utilities must also agree to keep service on through the moratorium and enroll the applicant in a CAP or budget program if eligible.<sup>228</sup> The choice of CAP or budget program is to be based upon which is most beneficial to the applicant.

### Earned Income Incentive for Amount of Cash Grant

An individual with earned income is eligible to receive a larger Cash grant than an individual with unearned income. When calculating a household's total income for *eligibility* for a Cash grant, all income is included. However, once a household is deemed eligible to receive a Cash grant, the administering agency will reduce by 20% the amount of income earned from employment in order to determine the *grant amount*.<sup>229</sup> The effect is to reward those households that have earned income from employment.

### Improper Counting of Lump Sum Annual Payments

Sometimes, households receive an annual pension or annuity in one large annual payment, rather than smaller monthly payments. The 18-19 LIHEAP STATE PLAN clearly gives the applicant the option to choose the most favorable time period to use in calculating income for LIHEAP eligibility – the past calendar month or a 12 month period.<sup>230</sup> However, DHS will often count the annual payment as part of the household income, regardless of when that payment is received. As a result, an eligible household will inappropriately be deemed ineligible and denied a LIHEAP grant or, if found eligible, that household will receive a lower Cash grant. Advocates should look out for this income counting practice and prepare to challenge it.

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<sup>226</sup> 18-19 LIHEAP STATE PLAN, at app. B § 601.31(2)(vii). See also 66 Pa C.S. § 1407 for general rules related to reconnection of service for regulated utilities.

<sup>227</sup> *Id.*

<sup>228</sup> *Id.*

<sup>229</sup> *Id.* at app. B § 601.41(a)(2).

<sup>230</sup> *See id.* at app. B § 601.83.



### Refunds and Second Payments

Vendors receiving a LIHEAP grant must apply that grant to a customer’s account within two program years.<sup>231</sup> The two-year period ends no later than June 30th of the year *following* the year in which the grant was awarded.<sup>232</sup> For example, if grants were awarded in the 2018-2018 program year, the two-year period to use those funds will end on June 30, 2019.

Any funds not used by the vendor or the grantee in that time period must be sent back to DHS.<sup>233</sup> In addition, if an applicant is awarded a grant and then subsequently dies, changes vendor, or moves from the vendor’s service area, then the vendor must refund to DHS any unexpended grant amounts.<sup>234</sup>

A grantee can receive a second payment of these refunded amounts within that same two-year period if:

- the grantee’s whereabouts are known,
- the grantee continues to reside in the Commonwealth, and
- where the grantee retains heating responsibility<sup>235</sup> or where the crisis for which benefits were authorized continues to exist.”<sup>236</sup>

A vendor can sometimes receive an overpayment that is not the result of fraud, error, or misrepresentation by the applicant. In those situations, the error is considered an administrative error for which the applicant cannot be held responsible.<sup>237</sup>

### Master Metering

Master metering is when a landlord or mobile home park owner receives utility service in his/her own name for a property in which multiple tenants live. This can present special challenges for tenants and their advocates. The premises may be sub-metered, or the landlord may pass along the utility costs to the tenants through a formula or calculation that assesses an energy use or heating charge to each tenant.

Where the landlord passes along the utility costs through a specific fee or charge, the utility charge is **not** an undesignated portion of the rent. Some CAOs in past years have concluded that these tenants do not have a home heating responsibility as it is defined in the State Plan.<sup>238</sup> While it may, on a superficial review, appear that the tenant is ineligible for LIHEAP that conclusion may not be

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<sup>231</sup> *Id.* at app. B § 601.46.

<sup>232</sup> *See id.* at app. B § 601.46.

<sup>233</sup> *Id.*

<sup>234</sup> *Id.* at app. B §§ 601.46(1), 601.65(1).

<sup>235</sup> *Id.* at app. B § 601.46(2).

<sup>236</sup> *Id.* at app. B § 601.65(2).

<sup>237</sup> *Id.* at app. B § 601.144(c).

<sup>238</sup> *See id.* at app. B § 601.31(2)(i)(B) (2016).



accurate. DHS has clarified in previous years that “Households that are renting with heat included and have a specific portion of their rent used for their heating costs are considered to have a heating responsibility and are therefore eligible for benefits.”<sup>239</sup>

Landlords are not approved vendors for the purposes of LIHEAP.<sup>240</sup> This means that the tenant here is making a utility payment to a non-vendor, and will qualify for a direct grant.<sup>241</sup> The Plan specifically excludes landlords from the definition of vendors and precludes landlords from receiving a vendor payment.<sup>242</sup> DHS may also provide Crisis grants directly to tenants or mobile home park residents in master-meter situations based upon a case by case review.<sup>243</sup> “If DHS determines that crisis benefits cannot be paid directly to the vendor, DHS pays the crisis benefit to the applicant as reimbursement after verification of the purchase has been provided.”<sup>244</sup>



**Advocacy Tip:** If tenants or mobile home park residents are denied LIHEAP Cash grants, advocates should demonstrate the applicant does have a home heating responsibility by showing that a failure to make the required payments will leave the tenant without heat.

## Conclusion

LIHEAP provides critical home heating benefits to low income families. We hope that this manual is helpful in providing information and advocacy suggestions in securing those critical dollars for your clients. We welcome your questions and feedback, and if we at the Pennsylvania Utility Law Project can be of any assistance in your work, do not hesitate to contact us.

<sup>239</sup> See *id.* at app. B § 601.3 (defining household).

<sup>240</sup> See *id.* at app. B § 601.44(c) (2016).

<sup>241</sup> See *id.* at app. B § 601.44(b).

<sup>242</sup> *Id.* at app. B § 601.44(c)

<sup>243</sup> *Id.* at app. B § 601.44(b).

<sup>244</sup> *Id.* at app. B § 601.64.

## **APPENDICES**

Appendix A: 2018 - 2019 Pennsylvania LIHEAP Income Guidelines

Appendix B: Online Resources and Forms

Appendix C: Glossary of Common Terms and Abbreviations

Appendix D: 2018-2019 LIHEAP County Coordinator Telephone Numbers & E-mail Addresses

**Appendix A: 2018-2019 Pennsylvania LIHEAP Income Guidelines**

<b>Household Size</b>	<b>Household Income 150% FPL for Cash &amp; Crisis</b>
1	\$ 18,210
2	\$24,690
3	\$ 31,170
4	\$ 37,650
5	\$ 44,130
6	\$ 50,610
7	\$ 57,090
8	\$ 63,570
9	\$ 70,050
10	\$ 76,530
For each additional person add	\$ 6,480

\* Eligibility information from <http://www.dhs.pa.gov/citizens/heatingassistanceliheap/index.htm>

## Appendix B: Online Resources and Forms

**Attached are Application Forms (HSEA-1 and HSEA-1S) and the LIHEAP Vendor Agreement.**

### Online Resources:

DHS's Heating Assistance Web Page	PA Department of Human Services	<a href="http://www.dhs.pa.gov/citizens/heatingassistanceliheap/index.htm">http://www.dhs.pa.gov/citizens/heatingassistanceliheap/index.htm</a>
2019 Final State Plan for PA LIHEAP	PA Department of Human Services	<a href="http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_279179.pdf">http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_279179.pdf</a>
COMPASS	PA Department of Human Services	<a href="http://www.compass.state.pa.us">www.compass.state.pa.us</a>
LIHEAP Cash Benefit Table for PA	PA Department of Human Services	<a href="http://www.dhs.pa.gov/citizens/heatingassistanceliheap/liheapbenefitamounttable/index.htm">http://www.dhs.pa.gov/citizens/heatingassistanceliheap/liheapbenefitamounttable/index.htm</a>
LIHEAP Clearinghouse	U.S. Dept. of Health & Human Services Admin. For Children & Families	<a href="https://liheapch.acf.hhs.gov/">https://liheapch.acf.hhs.gov/</a>
HHS LIHEAP Homepage	U.S. Dept. of Health & Human Services Admin. For Children & Families	<a href="http://www.acf.hhs.gov/programs/ocs/programs/liheap">http://www.acf.hhs.gov/programs/ocs/programs/liheap</a>
NEADA	National Energy Assistance Directors Association	<a href="http://neada.org/">http://neada.org/</a>
PA PUC Homepage	Pa Public Utility Commission	<a href="http://www.puc.state.pa.us/">http://www.puc.state.pa.us/</a>
DHS LIHEAP Handbook	PA Department of Public Welfare	<a href="http://services.dpw.state.pa.us/oimpolicymanuals/liheap/LIHEAP_Handbook.htm">http://services.dpw.state.pa.us/oimpolicymanuals/liheap/LIHEAP_Handbook.htm</a>
PULP	Pennsylvania Utility Law Project	<a href="http://www.pautilitylawproject.org/">http://www.pautilitylawproject.org/</a>

### DHS Online Forms:\*

<u>HSEA 1 - LIHEAP Application Form (English)</u>	Application - English
<u>HSEA 1-S - LIHEAP Application Form (Spanish)</u>	Application - Español
<u>PWEA 18 - LIHEAP English Brochure</u>	LIHEAP Brochure - English
<u>PWEA 18-S - LIHEAP Brochure Spanish</u>	LIHEAP Brochure- Español
<u>PWEA 4</u>	Energy Assistance Affidavit
<u>PWEA 4-S</u>	Energy Assistance Affidavit (Español)
<u>HSEA 6</u>	Zero Income Statement
<u>HSEA 6-S</u>	Zero Income Statement (Español)
<u>PWEA 32</u>	Request for Additional Information
<u>PWEA 32-S</u>	Request for Additional Information (Español)
<u>PWEA 35</u>	LIHEAP Computation Worksheet
<u>HSEA 36</u>	Landlord Statement

<u>HSEA 36-S</u>	Landlord Statement (Español)
<u>HSEA 40</u>	DCED/DHS Crisis Interface Referral Form
<u>PWEA 41</u>	Low-Income Home Energy Assistance Program (LIHEAP) Electronic Funds Transfer Application Form
<u>PWEA 51</u>	Conservation Tips to Reduce Energy Usage
<u>PWEA 51-S</u>	Conservation Tips to Reduce Energy Usage (Español)

**\*These are the forms available and online as of October 22, 2018.**

## Appendix C: Glossary of Common Terms and Abbreviations

CAO – County Assistance Office are local offices where Pennsylvanians can access a range of services for themselves and their families from professionally trained staff members. CAOs are often but not always the LIHEAP administering agency.

CAP – Customer Assistance Programs assists eligible utility customers who are having difficulty paying their utility bills through provision of a special rate and the forgiveness of past debts by the utility.

Cash Grant (Component) – A onetime annual grant to assist eligible households with their regular heating costs. The amount of the grant is based upon household income, number of household members, fuel type and geographic location.

COMPASS - COMPASS is the name of the website where individuals can apply for LIHEAP, the SNAP program, and many other services that may benefit low-income households.

Crisis Grant (Component) – Provides a grant(s) to resolve imminent and current heating-related emergencies, including utility shutoffs, malfunctioning heat sources, depleted fuel, and other concerns.

DCED – Department of Community and Economic Development, which administers the Crisis Interface/Weatherization Assistance Program Component.

DHS – Department of Human Services (formerly the Department of Public Welfare) administers the LIHEAP program and other programs in Pennsylvania that are designed to assist low-income households, including Medical Assistance, Supplemental Nutrition Assistance Program (SNAP), and Temporary Assistance to Needy Families (TANF).

FPG (FPL) – Federal Poverty Guidelines (Level) – A representation of the federal poverty measure, based upon household income, issued each year by the U.S. Department of Health and Human Services to assist agencies determine eligibility for certain benefits and programs. DHS uses FPG (FPL) to determine LIHEAP eligibility.

LIHEAP – Federally funded program designed to provide supplemental assistance to aid low-income households afford the costs of energy, specifically residential heating, in the cold weather months.

Primary Heat Source – The central heating system used most by the household or, if the residence is not centrally heated or the central heating system is inoperable, the heat source used most by the household.

Primary Fuel Type – The type of energy consumed by the primary heat source to create heat.

PUC – The Pennsylvania Public Utility Commission provides oversight for a number of programs and policies implemented by utility companies operating within Pennsylvania, including CAP programs, and the approval of service termination.

PULP – The Pennsylvania Utility Law Project provides information, assistance, and advice about residential utility and energy matters affecting low-income consumers.

Secondary Fuel Type – The source of energy that is necessary, in addition to the primary fuel type, to operate the primary heat source. For example, electricity is a secondary fuel type when it is necessary to enable the operation of an oil furnace when oil is the household’s primary heating source.

Supplementary Fuel – A source of energy that a household uses to provide heat in addition to the residence’s primary heat source.

SNAP – Supplemental Nutrition Assistance Program, formerly known as “food stamps,” is a program administered by the Department of Human Services, participants of which, if not already approved for LIHEAP, receive a minimal heating assistance benefit to maximize their Standard Utility Allowance for SNAP purposes.

SUA – Standard Utility Allowance refers to the fixed dollar amount for a household’s heating and utility expenses used in the calculation of shelter expenses for SNAP benefits.

Vendor Agreement – The Department of Human Services requires any fuel source vendor that wishes to participate in the LIHEAP program to complete and sign a contract known as a vendor agreement.

Weatherization Assistance Component (Crisis Interface) – This component addresses crises through repair or replacement of heating systems in cases of heating source malfunction or failure.

Winter Moratorium – Period from December 1 through March 31 that prohibits regulated gas and electric utilities from terminating residential service to households at or below 250% of the Federal Poverty Guidelines, unless granted specific permission by the Public Utility Commission.



**Appendix D: County Coordinator Contact Information**

County	LIHEAP Coordinator	Phone #	Email @ pa.gov	Alternate Coordinator	Phone #	Email @ pa.gov
Adams	Vicki Miller	717-338-2329	<a href="mailto:vicmiller@pa.gov">vicmiller@</a>	Brandi Cole	717-338-2357	<a href="mailto:brcole@pa.gov">brcole@</a>
Allegheny	Kimberly Shepard	724-339-6817	<a href="mailto:kshepard@pa.gov">kshepard@</a>	Dorothy McCarthy	724-337-5618	<a href="mailto:dormccarth@pa.gov">dormccarth@</a>
				Jayne Brymn	724-339-6815	<a href="mailto:jbrymn@pa.gov">jbrymn@</a>
Armstrong	Stephanie Equihua	724-548-0231	<a href="mailto:sequihua@pa.gov">sequihua@</a>	Kimbel Kovatch	724-548-0238	<a href="mailto:kkovatch@pa.gov">kkovatch@</a>
Beaver	Matt Parker	724-773-7555	<a href="mailto:maparker@pa.gov">maparker@</a>	Sherri Graeser-Ray	724-773-7524	<a href="mailto:sgraeserra@pa.gov">sgraeserra@</a>
Bedford	Wendy Clevenger	814-624-4023	<a href="mailto:wclevenger@pa.gov">wclevenger@</a>	Janice Leppert	814-624-4002	<a href="mailto:jleppert@pa.gov">jleppert@</a>
Berks	Robin Miley Johnson	610-736-4169	<a href="mailto:rmiley-joh@pa.gov">rmiley-joh@</a>	Alicia Reid	610-736-4252	<a href="mailto:alreid@pa.gov">alreid@</a>
Blair	Travis Etters	814-646-7176	<a href="mailto:teters@pa.gov">teters@</a>	Robert Lee	814-946-7118	<a href="mailto:robelee@pa.gov">robelee@</a>
Bradford	Suzette O’Neil	570-268-1902	<a href="mailto:soneil@pa.gov">soneil@</a>	Dorothy Ayres	570-268-1901	<a href="mailto:dayres@pa.gov">dayres@</a>
Bucks	Charles (CJ) Joynt	215-781-3385	<a href="mailto:cjoynt@pa.gov">cjoynt@</a>	Maureen Hahn	215-781-3388	<a href="mailto:mhahn@pa.gov">mhahn@</a>
Butler	Melissa Eppinger	724-284-8235	<a href="mailto:meppinger@pa.gov">meppinger@</a>	Shirleyanne Michelotti	724-284-8877	<a href="mailto:smichelott@pa.gov">smichelott@</a>
Cambria	Rebecca Tinik	814-533-2271	<a href="mailto:rtinik@pa.gov">rtinik@</a>	Holly Burkhart	814-533-2341	<a href="mailto:hburkhart@pa.gov">hburkhart@</a>
				Judi Letzo	814-533-2328	<a href="mailto:jletzo@pa.gov">jletzo@</a>
Cameron	Andrea Stahl	814-916-4112	<a href="mailto:anstahl@pa.gov">anstahl@</a>	Tara Hough	570-893-4503	<a href="mailto:tahough@pa.gov">tahough@</a>
Carbon	Kristi Bower	570-271-3601	<a href="mailto:krbower@pa.gov">krbower@</a>	Stacy Netznik	610-577-9040	<a href="mailto:snetznik@pa.gov">snetznik@</a>
Centre	Jodi Bitner	814-861-1912	<a href="mailto:jbitner@pa.gov">jbitner@</a>	Jarrold Stahlman	814-861-1933	<a href="mailto:jstahlman@pa.gov">jstahlman@</a>
Chester	Erica Dixon	610-466-1036	<a href="mailto:erdixon@pa.gov">erdixon@</a>	Eileen Haviland	610-466-1022	<a href="mailto:ehaviland@pa.gov">ehaviland@</a>
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Clearfield	Victoria Phillips	814-205-1101	<a href="mailto:viphillips@pa.gov">viphillips@</a>	Jennifer Holt	814-205-1086	<a href="mailto:jeholt@pa.gov">jeholt@</a>

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Columbia	Roxanne Yurkiewicz	570-271-3602	<a href="mailto:ryurkewic@">ryurkewic@</a>	Wendy Townsend	570-912-1132	<a href="mailto:wtownsend@">wtownsend@</a>
Columbia	Michael Lisnock	570-387-4222	<a href="mailto:mlisnock@">mlisnock@</a>	Susan Butkiewicz	570-387-4221	<a href="mailto:sbutkewic@">sbutkewic@</a>
Crawford	Renee Colinear	814-333-3447	<a href="mailto:rcolinear@">rcolinear@</a>	Fredrick Oakman	814-333-3526	<a href="mailto:froakman@">froakman@</a>
Cumberland	Addrienne McGinley	717-240-2725	<a href="mailto:admccinley@">admccinley@</a>	Kim Showaker	717-240-2772	<a href="mailto:kshowaker@">kshowaker@</a>
Dauphin	Norma Torres	717-787-1028	<a href="mailto:ntorres@">ntorres@</a>	Randi Cheek	717-787-4555	<a href="mailto:rcheek@">rcheek@</a>
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	Hao Dinh	610-461-3901	<a href="mailto:hdinh@">hdinh@</a>	Patricia Weldon - Darby	610-461-3810	<a href="mailto:paweldon@">paweldon@</a>
Elk	Pamela Freeburg	814-776-4340	<a href="mailto:pfreeburg@">pfreeburg@</a>	Barbara Hetrick	814-776-4303	<a href="mailto:bahetrick@">bahetrick@</a>
Erie	Laurie Kubaney	814-461-2114	<a href="mailto:lkubaney@">lkubaney@</a>	John Byers	814-461-2078	<a href="mailto:johnbyers@">johnbyers@</a>
Fayette	Scott Patterson	724-439-7047	<a href="mailto:scopatters@">scopatters@</a>	Dean Richmond	724-852-3526	<a href="mailto:derichmond@">derichmond@</a>
Forest	Sandra Zacherl	814-755-2105	<a href="mailto:szacherl@">szacherl@</a>	Susan Martin	814-362-5334	<a href="mailto:susmartin@">susmartin@</a>
Franklin	Tom Walsh	717-262-6570	<a href="mailto:thowalsh@">thowalsh@</a>	Lisa Hunt	717-262-6539	<a href="mailto:lhunt@">lhunt@</a>
Fulton	Danelle Flood	717-325-1212	<a href="mailto:dflood@">dflood@</a>	Wendy Clevenger	814-624-4023	<a href="mailto:wclevenger@">wclevenger@</a>
Greene	Mary Yoders	724-852-3528	<a href="mailto:myoders@">myoders@</a>	Dean Richmond	724-852-3526	<a href="mailto:derichmond@">derichmond@</a>
Huntingdon	Juanita Randoll	814-641-6450	<a href="mailto:jrandoll@">jrandoll@</a>	Brad Norris	814-641-6449	<a href="mailto:bnorris@">bnorris@</a>
Indiana	Patricia Davis	724-357-1920	<a href="mailto:patdavis@">patdavis@</a>	Vicki Howells	724-357-2922	<a href="mailto:vhowells@">vhowells@</a>
Jefferson	Stacy Volchko	814-938-1341	<a href="mailto:svolchko@">svolchko@</a>	Rebecca Mitchell	814-938-1302	<a href="mailto:remitchell@">remitchell@</a>
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Lehigh	Katrina Myricks	570-271-3650	<a href="mailto:kmyricks@">kmyricks@</a>	Peter Romanyshyn	610-821-6580	<a href="mailto:promanyshy@">promanyshy@</a>
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Mckean	Susan Martin	814-362-5334	<a href="mailto:susmartin@">susmartin@</a>	Kimberly Hahn	814-362-5340	<a href="mailto:kihahn@">kihahn@</a>
Mercer	Lori Gill	724-983-5175	<a href="mailto:logill@">logill@</a>	Theresa Gilliland	724-983-5013	<a href="mailto:tgillian@">tgillian@</a>
	Tracie Montanari	724-983-5020	<a href="mailto:tmontanari@">tmontanari@</a>			
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Monroe	Kristi Bower	570-271-3601	<a href="mailto:krbower@">krbower@</a>	Charles Deubler	570-424-3900	<a href="mailto:cdeubler@">cdeubler@</a>
Montgomery	April Mocarsky	610-270-3557	<a href="mailto:amocarsky@">amocarsky@</a>	Brenda Dean	610-270-3500	<a href="mailto:brdean@">brdean@</a>
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Northampton	Tamara Fernandes	610-250-1772	<a href="mailto:tfernandes@">tfernandes@</a>	Jennifer Watson	610-250-1764	<a href="mailto:jenwatson@">jenwatson@</a>
Northumberland	Sheila Ruiz	570-271-3623	<a href="mailto:sruiz@">sruiz@</a>	Heather Kalman	570-988-5950	<a href="mailto:hkalman@">hkalman@</a>
Perry	Charlotte Noel-Klunk	717-582-5018	<a href="mailto:cnoelklunk@">cnoelklunk@</a>	Cortney Kolak	717-528-5014	<a href="mailto:ckolak@">ckolak@</a>
Philadelphia	Linda Alvarado	215-560-4733	<a href="mailto:lalvarado@">lalvarado@</a>	Melvin Neal	215-560-4713	<a href="mailto:meneal@">meneal@</a>
Philadelphia	David Keller	215-560-2603	<a href="mailto:davkeller@">davkeller@</a>	PW, PCAO LIHEAP VM		
Pike	Sheila Ruiz	570-271-3623	<a href="mailto:sruiz@">sruiz@</a>	April Stevens	570-409-8361	<a href="mailto:aprstevens@">aprstevens@</a>

			-	Katie Peselli	570-409-8387	<a href="mailto:kpeselli@">kpeselli@</a>
Potter	Michelle Valenti	814-274-4106	<a href="mailto:mvalenti@">mvalenti@</a>	Tara Hough	570-893-4503	<a href="mailto:tahough@">tahough@</a>
Schuylkill	Christina Bright	570-271-3637	<a href="mailto:chbright@">chbright@</a>	Joan Stoudt	570-621-3007	<a href="mailto:jstoudt@">jstoudt@</a>
			-	Kristine Herbst	570-621-3090	<a href="mailto:kherbst@">kherbst@</a>
Snyder	Christine Beaver	570-372-1722	<a href="mailto:chbeaver@">chbeaver@</a>	Julie Eister	570-372-1723	<a href="mailto:jeister@">jeister@</a>
Somerset	Christina Bierterman	814-445-1152	<a href="mailto:cbierterman@">cbierterman@</a>	Michele Peters	814-445-1114	<a href="mailto:mipeters@">mipeters@</a>
Sullivan	Terrie Smith	570-946-8255	<a href="mailto:terriesmit@">terriesmit@</a>	Suzette O’Neil	570-268-1902	<a href="mailto:soneil@">soneil@</a>
Susquehanna	Dyan Leslie	570-271-3638	<a href="mailto:dleslie@">dleslie@</a>	Danielle Shortt	570-278-5612	<a href="mailto:dshortt@">dshortt@</a>
Tioga	Brenda Kline	570-724-9502	<a href="mailto:brkline@">brkline@</a>	Melanie Herb	570-724-9507	<a href="mailto:mherb@">mherb@</a>
Union	Kathy Smith	570-522-8708	<a href="mailto:kathysmith@">kathysmith@</a>	Kelly Ramsey	570-522-8709	<a href="mailto:kramsey@">kramsey@</a>
Venango	Kim Irwin	814-437-4360	<a href="mailto:kiirwin@">kiirwin@</a>	Jodi Villmer	814-437-4409	<a href="mailto:jvillmer@">jvillmer@</a>
Warren	Meghan Dahl	814-726-8853	<a href="mailto:mdahl@">mdahl@</a>	Brenda Ruhlman	814-726-8802	<a href="mailto:bruhlman@">bruhlman@</a>
Washington	Andrew Hartt	724-223-4419	<a href="mailto:ahartt@">ahartt@</a>	Cynthia McCann	724-223-4343	<a href="mailto:cymccann@">cymccann@</a>
Washington	Todd Pilkington	724-379-1512	<a href="mailto:tpilkingto@">tpilkingto@</a>	Gary Ailes	724-379-1511	<a href="mailto:gales@">gales@</a>
Wayne	Dyan Leslie	570-271-3638	<a href="mailto:dleslie@">dleslie@</a>	Thomas O’Neill	570-253-7123	<a href="mailto:thoneill@">thoneill@</a>
			-	Pat Werner	570-253-7120	<a href="mailto:pwerner@">pwerner@</a>
Westmoreland	Robert Small	724-832-5365	<a href="mailto:rsmalljr@">rsmalljr@</a>	Jon Shogan	724-832-7991	<a href="mailto:jshogan@">jshogan@</a>
Westmoreland			-	Jen Eicher	724-261-3556	<a href="mailto:jeeicher@">jeeicher@</a>
Westmoreland	Robert Small	724-261-3557	<a href="mailto:rsmalljr@">rsmalljr@</a>			
Wyoming	Dyan Leslie	570-271-3638	<a href="mailto:dleslie@">dleslie@</a>	Linda Greene	570-996-5403	<a href="mailto:lingreene@">lingreene@</a>
York	Gina Burrows	717-849-6435	<a href="mailto:ckioussis@">ckioussis@</a>	Rachel Hess	717-849-6400	<a href="mailto:rahess@">rahess@</a>

York	Cathy Kioussis	717-771-1275				
	PW, LIHEAP York Regional Center					

APPLICATION FOR THE LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)

To apply for Energy Assistance, you must complete all questions front and back and sign at the red "X". Be sure your correct and complete name and address is entered below. If incorrect, cross out and PRINT correctly in space provided below. YOU CAN ALSO APPLY ONLINE AT WWW.COMPASS.STATE.PA.US.

YOUR NAME AND ADDRESS

Your county assistance office address

DHS USE ONLY

CRISIS  CASH

Application Registration Number

County

District

Record Number

Worker I.D.

Rejected  Approved

Date

If you do not understand these instructions, contact your local county assistance office.

1 Please complete this section for the head of household.

\*Use the codes from page 2 to help provide the details.

Name (Include Last, First Middle Initial)		Date of Birth	Sex	Social Security Number	
Home Address (Include Street, Apt. Number, City, State & ZIP Code+4)					
Mailing Address if different (Include Street, Apt. Number, City, State & ZIP Code+4)					
County You Live In	Phone Number: ( )	Citizenship*	Race (Optional)*	Ethnicity (Optional)*	Marital Status*
If you are currently receiving Cash, Medical Assistance, or SNAP benefits, may we use the income you have on file? <input type="checkbox"/> Yes <input type="checkbox"/> No					

2 Do you read, write and understand English?  Yes  No If no, what language? \_\_\_\_\_

3 Are You:

<input type="checkbox"/> Renting with heat included	<input type="checkbox"/> Renting subsidized housing/Section 8 housing with heat included
<input type="checkbox"/> Renting with heat <b>not</b> included	<input type="checkbox"/> Renting subsidized housing/Section 8 housing with heat <b>not</b> included
<input type="checkbox"/> An unrelated roomer	<input type="checkbox"/> An owner or are you buying your home <input type="checkbox"/> Other: _____

If heat is included in your rent, attach a note from your landlord stating that heat is included and what type of heat is used.

4 What is your main heating source? Choose the type of energy that heats your home or is being used if your main heating source is not working. Attach a copy of your last bill or a statement from a utility or fuel dealer stating the type of fuel and that you are accepted as a customer.

Electric  Fuel Oil  Coal  Natural Gas  Kerosene  Propane or Bottled Gas  Blended Fuel  Wood/Other

4a Do you need electricity to run your main heating source (secondary heat)?  Yes  No

5 Check if any of the following apply and provide explanation if needed:

<input type="checkbox"/> Electricity is shut off	<input type="checkbox"/> Have a shut-off notice for electricity	<input type="checkbox"/> Main heating source is not working
<input type="checkbox"/> Gas is shut off	<input type="checkbox"/> Have a shut-off notice for gas	Explain: _____
<input type="checkbox"/> Ran out of fuel	<input type="checkbox"/> Will run out of fuel within 15 days	_____



**6** Which utility company or fuel dealer do you want to receive your LIHEAP grant? Write their name and address, and your account information.

Name of Utility Company or Fuel Dealer	Account Number
Address (Include Street, City, State & ZIP Code+4)	Name on Account

**7** Please list your electric company if not listed above

Name of Electric Company	Account Number
--------------------------	----------------

**8** Do you use any other heating source in your home?  Yes  No

If **yes**, please explain: \_\_\_\_\_

**9** If you are in subsidized/public housing, do you receive a utility allowance check?  Yes  No

If **yes**, how much? \$ \_\_\_\_\_

**10** Does anyone in your household receive financial assistance for a disability?  Yes  No

If **yes**, who? \_\_\_\_\_

**11** List the people who live with you at this address. Include all children and adults. Include related roomers. Include all unrelated roomers who share household expenses. Do not include anyone in jail/prison. Do not include the household member listed in block 1. **See "Did you remember to..." on page 4.**

Use the codes below to help provide the details for each individual in your household.

- CITIZENSHIP\*:** (1) U.S. Citizen, (2) Permanent Alien, (3) Temporary Alien, (4) Refugee, (5) Other-not eligible for benefits (All non-U.S. citizens must provide proof of citizenship status.)
- RACE\*:** (optional) (1) Black or African American, (3) American Indian or Alaskan Native:, (4) Asian, (5) White, (7) Native Hawaiian or other Pacific Islander. List all groups that apply.
- ETHNICITY\*:** (optional) (1) Non-Hispanic, (2) Hispanic or Latino
- MARITAL STATUS\*:** (1) Single, (2) Married, (3) Common Law Marriage, (4) Separated, (5) Divorced, (6) Widow/Widower

Name (Include Last, First, Middle Initial)	Birthdate (MM/DD/YY)	Sex M/F	Social Security Number	Citizenship*	Race* (Optional)	Ethnicity* (Optional)	Marital Status *	Relationship to You
Person 1								

If this person is currently receiving Cash, Medical Assistance, or SNAP benefits, may we use the income we have on file for this person?  Yes  No

Name (Include Last, First, Middle Initial)	Birthdate (MM/DD/YY)	Sex M/F	Social Security Number	Citizenship*	Race* (Optional)	Ethnicity* (Optional)	Marital Status *	Relationship to You
Person 2								

If this person is currently receiving Cash, Medical Assistance, or SNAP benefits, may we use the income we have on file for this person?  Yes  No

Name (Include Last, First, Middle Initial)	Birthdate (MM/DD/YY)	Sex M/F	Social Security Number	Citizenship*	Race* (Optional)	Ethnicity* (Optional)	Marital Status *	Relationship to You
Person 3								

If this person is currently receiving Cash, Medical Assistance, or SNAP benefits, may we use the income we have on file for this person?  Yes  No

Name (Include Last, First, Middle Initial)	Birthdate (MM/DD/YY)	Sex M/F	Social Security Number	Citizenship*	Race* (Optional)	Ethnicity* (Optional)	Marital Status *	Relationship to You
Person 4								

If this person is currently receiving Cash, Medical Assistance, or SNAP benefits, may we use the income we have on file for this person?  Yes  No

If you have additional people in your house, please provide their information on a separate piece of paper and send it along with this application.



**Using income on file for someone? You don't need to list them or their income in question 12.**

12

**Tell us about income for the people in your household.** Please tell us about all income, before taxes and deductions. **Types/sources of income include money from:** Employment, Veteran's Benefits, Unemployment Compensation, Black Lung benefits, Social Security, Support, Workers Compensation, Interest/Dividends, Rental Income. **See "Did you remember to..." on page 4.**

Name of person with income	Type/source of income	Start Date	Date of First Paycheck	How much each month?
Name of person with income	Type/source of income	Start Date	Date of First Paycheck	How much each month?
Name of person with income	Type/source of income	Start Date	Date of First Paycheck	How much each month?
Name of person with income	Type/source of income	Start Date	Date of First Paycheck	How much each month?

13

Are you interested in free weatherization service? Weatherization services include home insulation and heating system evaluation.  Yes  No

14

Are you or anyone in your household fleeing to avoid prosecution or custody for a crime, or an attempt to commit a crime that would be classified as a felony?  Yes  No

If **yes**, who? \_\_\_\_\_

15

Is anyone in the U.S. Military or has anyone been in the U.S. Military?  Yes  No

If **yes**, who? \_\_\_\_\_

Is anyone a widow, spouse or child (under age 18) of anyone in the U.S. Military or anyone who has been in the U.S. Military?  Yes  No

If **yes**, who? \_\_\_\_\_

## Certification

- My signature on this application gives my permission to the Department of Human Services or its authorized agent to: (a) check any information I give about where I live, my jobs, income, resources, energy supply and energy supplier; (b) share information with my energy supplier and receive information from my energy supplier to allow DHS to obtain a record of my annual energy consumption, cost and billing information for purposes of program evaluation, operation, or reporting; and (c) complete any survey in connection with energy assistance.
- If you fail to provide a Social Security number or fail to complete the Energy Assistance Affidavit below, you are ineligible for benefits.

### Energy Assistance Affidavit

I certify that: (check all that apply)

- I provided Social Security numbers for all household members.
- To the best of my knowledge, these household members do not have Social Security numbers:

\_\_\_\_\_ Print Name                      \_\_\_\_\_ Print Name

\_\_\_\_\_ Print Name                      \_\_\_\_\_ Print Name

- The following household members are exercising their rights under Section 7 of the Privacy Act of 1974, and refuse to disclose their Social Security Number or may be unable to because they are a victim of domestic violence:

\_\_\_\_\_ Print Name                      \_\_\_\_\_ Print Name

\_\_\_\_\_ Print Name                      \_\_\_\_\_ Print Name

- I authorize the release of LIHEAP eligibility information to and from my energy suppliers or weatherization agencies and allow them to seek assistance for which I may be eligible. The assistance may include LIHEAP Cash, Crisis, or Weatherization benefits.
- I understand I have the right to appeal any decision or undue delay in decision which I consider improper regarding this application.
- I affirm that Pennsylvania is my legal residence.
- I understand any Social Security number(s) given will be used in the administration of this program, including cross matches with other programs.
- I understand that I will be sent a notice of eligibility or ineligibility and, if eligible, the notice will state the amount of my benefit.
- I further understand that if my household is eligible for a LIHEAP cash benefit, it must be sent directly to my utility company or fuel dealer unless I am a renter and my heat is included in my rent or my fuel is supplied by a fuel dealer who does not accept vendor payment.
- I certify that, subject to penalties provided by law, the information I gave is true, correct and complete to the best of my knowledge.
- I know that if I give false information, I can be penalized by fine and/or imprisonment.
- I understand by signing this application, I may not qualify because LIHEAP money has run out.
- If your household is eligible for LIHEAP, you may receive a Fast Track consent form in the mail that could allow you and your household members to be automatically enrolled in Medical Assistance.

**Please Sign Here - Use Ink**



\_\_\_\_\_ Signature

\_\_\_\_\_ Date

**Apply online at [www.compass.state.pa.us](http://www.compass.state.pa.us)**



## Did you remember to...

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Fill out all required information clearly and completely.</li> <li><input type="checkbox"/> Provide Social Security numbers for <b>all</b> household members or complete the Energy Assistance Affidavit in the Certification section on page 3.</li> <li><input type="checkbox"/> Send proof of immigration status if you are a non-U.S. citizen.</li> <li><input type="checkbox"/> If you rent with heat included, send a copy of your lease or a signed, written statement from your landlord explaining how you pay for heat and the type of heat used.</li> <li><input type="checkbox"/> If you pay for heat, send a bill for your main heating source. Attach a copy of your utility bill dated within 2 months of the date you submit your application. For other fuels provide a bill/receipt of a purchase from January of the previous heating season to present.</li> <li><input type="checkbox"/> If you would like payment sent to your secondary heating provider, enclose a copy of your main <b>AND</b> secondary heating bills.</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Send proof of all household income.<br/><b>Example:</b> If you apply in November and are sending:               <ul style="list-style-type: none"> <li>a) one month of income – send proof for October, the month prior to application.</li> <li>b) 12 months of income – send proof for November of the previous year through October of the current year.</li> </ul> </li> <li style="text-align: center; color: red;"><b>PROOF INCLUDES PAY STUBS, AWARD LETTERS, EMPLOYER STATEMENTS, ETC.</b></li> <li><input type="checkbox"/> If you told us you have no income or if your income is less than the cost of your monthly basic living needs, send a statement explaining how your household pays for basic living needs (food, rent, etc.).</li> <li><input type="checkbox"/> Sign and date your application.</li> <li><input type="checkbox"/> Mail your completed application and all documents to your local county assistance office. If you are not sure where that is, call 1-866-857-7095.</li> </ul> |
|---|--|

**IF YOU DO NOT SEND THE PROOF WE NEED WITH THIS FORM, WE WILL NOT BE ABLE TO PROCESS YOUR APPLICATION.**

## Voter Registration (Optional)

If you are not registered to vote where you live now, would you like to apply to register to vote here today?  Yes  No

**IF YOU DO NOT CHECK EITHER BOX, YOU WILL BE CONSIDERED TO HAVE DECIDED NOT TO REGISTER TO VOTE AT THIS TIME.**

To register, you must: 1) Be at least 18 on the day of the next election; 2) Be a citizen of the United States for at least one month PRIOR TO THE NEXT ELECTION; 3) Reside in Pennsylvania and the voting district at least 30 days prior to the next election.

**Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.**

If you would like help filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private. Please contact the county assistance office if you would like help. If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with the Secretary of the Commonwealth, PA Department of State, Harrisburg, PA 17120. (Toll-free telephone number 1-877-VOTESPA.)

### COUNTY ASSISTANCE OFFICE STAFF WILL COMPLETE THIS BOX BASED UPON YOUR RESPONSE ABOVE

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Given to Client __/__/__          | <input type="checkbox"/> Sent to voter registration __/__/__ | <input type="checkbox"/> Mailed to Client __/__/__             |
| <input type="checkbox"/> Declined, not interested __/__/__ | <input type="checkbox"/> Not a U.S. citizen __/__/__         | <input type="checkbox"/> Declined, already registered __/__/__ |

If you have a disability and need this application in large print or another format, please call our **Helpline** at **1-800-692-7462**.

**TDD Services** are available by calling PA Relay at **711**.

# NOTICE OF PRIVACY PRACTICES

## THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This notice contains important information about the privacy of your medical information. If you need this notice in another language or someone to interpret, please contact your local county assistance office. Language assistance will be provided free of charge.

Este aviso contiene información importante acerca de la privacidad de su información médica. Si necesita este aviso en otro idioma o alguien para que interprete, comuníquese con la Oficina de Asistencia de su Condado. La asistencia bilingüe será gratuita.

Данное уведомление содержит важные сведения относительно конфиденциальности вашей медицинской информации. Если вам нужно данное уведомление на другом языке или вам нужны услуги устного переводчика, обращайтесь в Бюро помощи вашего округа (County Assistance Office). Переводческие услуги предоставляются бесплатно.

此通知包括关于您的医疗信息的个人隐私方面的重要资料。如果您需要此通知译成其它语言或需要有人替您翻译，请联系您所在地区的郡县援助办事处。可提供免费语言协助。

Thông báo này gồm những thông tin quan trọng về việc bảo mật các chi tiết y tế cá nhân của quý vị. Nếu cần có thông báo này bằng một ngôn ngữ khác hay người để thông dịch, xin quý vị liên lạc với Văn Phòng Trợ Cấp Địa Phương. Trợ giúp ngôn ngữ sẽ được cung cấp miễn phí.

សំបុត្រនេះមានព័ត៌មានសំខាន់ៗអំពីការរក្សាទុកព័ត៌មានផ្ទាល់ខ្លួនរបស់អ្នក។ ប្រសិនបើអ្នកមិនយល់ភាសាខ្មែរ ឬមិនចង់អានភាសាខ្មែរ ទេ អ្នកអាចសុំឱ្យមានការបកប្រែបាន។ ការបកប្រែនេះ គឺជាឥតគិតថ្លៃ។ ប្រសិនបើអ្នកមានសំណួរអ្វីមួយ ទាក់ទងនឹងព័ត៌មាននេះ ឬស្វែងរកព័ត៌មានបន្ថែម អ្នកអាចទាក់ទងមន្ត្រីសេវាអ្នកប្រឹក្សាបាន។ ព័ត៌មានខាងលើនេះ គឺជាឥតគិតថ្លៃ។

يحتوي هذا الإخطار على معلومات هامة حول خصوصية المعلومات الطبية المتعلقة بك. إذا كنت بحاجة إلى هذا الإخطار بلغة أخرى أو إلى شخص ما لترجمته لك، فيرجى الاتصال بمكتب معونة المقاطعة المحلي. وستقدم المساعدة اللغوية مجاناً.

The Department of Human Services (DHS) provides and pays for many types of benefits and social services. We also determine an individual's eligibility to receive benefits and services. To do these things, we have to collect personal and health information about you and/or your family. The information we collect about you and/or your family is private. We call this information "protected health information."

DHS does not use or disclose DHS health information unless it is permitted or required by law. DHS is required by law to maintain the privacy of protected health information, to provide individuals with notice of its legal duties and privacy practices concerning protected health information and to notify affected individuals in the case of a breach of unsecured protected health information. As a "covered entity," DHS must follow applicable laws protecting the privacy of your protected health information which include the Health Insurance Portability and Accountability Act (HIPAA) privacy rules. Under HIPAA, Medicaid agencies, certain health plans and health care providers are examples of covered entities that must comply with HIPAA. Other laws that may apply include rules concerning confidential information about Medical Assistance, other benefits, behavioral health, substance abuse/treatment and HIV/AIDS. When we use or disclose protected health information, we make every reasonable effort to limit its use or disclosure to the minimum necessary to accomplish the intended purpose. This notice explains your right to privacy of your protected health information and how we may use and disclose that information. For more information on DHS privacy practices, or to receive another copy of this notice, please contact us. For information on how to contact us, see the "Questions or Complaints" section on the last page of this notice.

We are required by law to follow the terms of this notice. We reserve the right to change the terms of this notice and to make the new notice provisions effective for all protected health information we maintain. If we make an important change in our privacy policies or procedures, we will post a revised copy of the notice on our website and/or provide you with a new privacy notice by mail or in person. You may request and receive a paper copy of this notice at any time.

### What is protected health information?

Protected health information is information about you that relates to a past, present or future physical or mental health condition, treatment or payment for treatment, and that can be used to identify you. This information includes any information, whether verbal or recorded in any form, that is created or received by DHS or persons or organizations that contract with DHS. This includes electronic information and information in any other form or medium that could identify you, for example:

- Your name (or names of your children)
- Address
- Date of birth
- Admission/discharge date
- Diagnostic code
- Telephone number
- DHS case number
- Social Security number
- Medical procedure code

## Who sees and shares my health information?

DHS professionals (such as caseworkers and other county assistance office and program staff) and people outside of DHS (such as our contractors, health maintenance organization (HMO) staff, nurses, doctors, therapists, social workers and administrators) may see and use your health information to determine your eligibility for benefits, treatment, payment or for other required or permitted reasons. Sharing your health information may relate to services and benefits you had before, receive now, or may receive later. DHS will not use or share genetic information about you when deciding if you are eligible for Medicaid.

## Why is my protected health information used and disclosed by DHS?

There are different reasons why we may use or disclose your protected health information. The law says that we may use or disclose information without your consent or authorization for the reasons described below.

**For Treatment:** We may use or disclose information so that you can receive medical treatment or services. For example, we may disclose information your doctor, hospital or therapist needs to know to give you quality care and to coordinate your treatment with others helping with your care.

**For Payment:** We may use or disclose information to pay for your treatment and other services. For example, we may exchange information about you with your doctor, hospital, nursing home, or another government agency to pay the bills for your treatment and services.

**For Operating Our Programs:** We may use or disclose information in the course of our ordinary business as we manage our various programs. For example, we may use your health information to contact you to provide information about appointments, health-related information and benefits and services. We may also review information we receive from your doctor, hospital, nursing home and other health care providers to review how our programs are working or to review the need for and quality of health care services provided to you and/or your family.

**For Public Health Activities:** We report public health information to other government agencies concerning such things as contagious diseases, immunization information, and the tracking of some diseases such as cancer.

**For Law Enforcement Purposes and As Required by Legal Proceedings:** We will disclose information to the police or other law enforcement authorities as required by court order.

**For Government Programs:** We may disclose information to a provider, government agency or other organization that needs to know if you are enrolled in one of our programs or receiving benefits under other programs such as the Workers' Compensation Program.

**For National Security:** We may disclose information requested by the federal government when they are investigating something important to protect our country.

**For Public Health and Safety:** We may disclose information to prevent serious threats to health or safety of a person or the public.

**For Research:** We may disclose information for permitted research purposes and to develop reports. These reports do not identify specific people.

**For Coroners, Funeral Directors and Organ Donation:** We may disclose information to a coroner or medical examiner for identification purposes, cause of death determinations, organ donation and related reasons. We may also disclose information to funeral directors to carry out funeral-related duties.

**For Reasons Otherwise Required By Law:** DHS may use or disclose your protected health information to the extent that the use or disclosure is otherwise required by law. The use or disclosure is made in compliance with the law and is limited to the requirements of the law.

## Do other laws also protect certain health information about me?

DHS also follows other federal and state laws that provide additional privacy protections for the use and disclosure of information about you. For example, if we have HIV or substance abuse information, with a few exceptions, we may not release it without special, signed written permission that complies with the law. In some situations, the law also requires us to obtain written permission before we use or release information concerning mental health or intellectual disabilities and certain other information.

## Can I ask DHS to use or disclose my health information?

Sometimes, you may need or want to have your protected health information sent or otherwise disclosed to someone or somewhere for reasons other than treatment, payment, operating our programs, or other permitted or required purpose not needing your written authorization. If so, you may be asked to sign an authorization form, allowing us to send or otherwise disclose your protected health care information as you request.

The authorization form tells us what, where and to whom the information will be sent or otherwise disclosed. You may revoke your authorization or limit the amount of information to be disclosed at any time by letting us know in writing, except to the extent that DHS has already taken action in reliance upon the authorization.

If you are younger than 18 years old and, by law, you are able to consent for your own health care, then you will have control of that health information. You may ask to have your health information sent to any person who is helping you with your health care.

Except as described in this Notice, we will not use or disclose your health information without your written authorization. For example, HIPAA generally requires written authorization before a covered entity may use or disclose an individual's psychotherapy notes. In most cases, HIPAA also requires written authorization before a covered entity may use or disclose protected health information for marketing purposes or before it sells it.

## What are my rights regarding my health information?

As a DHS client, you have the following rights regarding your protected health information that we use and disclose:

**Right to See and Copy Your Health Information:** You have the right to see most of your protected health information and to receive a copy of it. If you want copies of information you have a right to see, you may be charged a small fee. However, generally, you may not see or receive a copy of: (1) psychotherapy notes; or (2) information that may not be released to you under federal law.

If we deny your request for protected health information, we will provide you a written explanation for the denial and your rights regarding the denial.

DHS does not receive or keep a file of all of your protected health information. Doctors, hospitals, nursing homes and other health care providers (including an HMO, if you are enrolled in one) may also have your protected health information. You also have a right to your health information through your doctor or other provider who has these records.

**Right to Correct or Add Information:** If you think some of the protected health information we have is wrong, you may ask us in writing to correct or add new information. You may ask us to send the corrected or new information to others who have received your health information from us. In certain cases, we may deny your request to correct or add information. If we deny your request, we will provide you a written explanation of why we denied your request. We will also explain what you can do if you disagree with our decision.

**Right to Receive a List of Disclosures:** You have the right to receive a list of where your protected health information has been sent, unless it was sent for purposes relating to treatment, payment, operating our programs, or if the law says we are not required to add the disclosure to the list. For example, the law does not require us to add to the list any disclosures we may have made to you, to family or persons involved in your care, to others you have authorized us to disclose to, or for information disclosed before April 14, 2003.

**Right to Request Restrictions on Use and Disclosure:** You have the right to ask us to restrict the use and disclosure of your protected health information. We may not be able to agree to your request. In fact, in some situations, we are not permitted to restrict the use or disclosure of the information. If we cannot comply with your request, we will tell you why. Except as otherwise required by law, we must grant your request to restrict disclosure to a health plan if the purpose of disclosure is not for treatment and the medical services to which the request applies have been paid out-of-pocket in full.

**Right to Request Confidential Communication:** You may ask us to communicate with you in a certain way or at a certain location. For example, you may ask us to contact you only by mail.

**Right to Receive Notification of a Breach:** You have the right to receive notification if there is a breach of your unsecured protected health information

## Whom do I contact about my rights or to ask questions about this notice?

You can contact the DHS HIPAA helpline, toll-free at 800-692-7462 to discuss your rights or to ask questions about this notice. You can also contact your caseworker or health care provider or write to DHS's Privacy Office, 3rd Floor West, Health and Welfare Building, 7th and Forster Streets, Harrisburg, PA 17120.

You can receive important information or updates to this notice by visiting DHS's Web site at [www.dhs.pa.gov](http://www.dhs.pa.gov).

## How do I file a complaint?

You may contact either office listed below if you want to file a complaint about how DHS has used or disclosed information about you. There is no penalty for filing a complaint. Your benefits will not be affected or changed if you file a complaint. DHS and its employees and contractors cannot and will not retaliate against you for filing a complaint.

PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES PRIVACY OFFICE  
3RD FLOOR WEST, HEALTH AND WELFARE BUILDING  
7TH AND FORSTER STREETS  
HARRISBURG, PA 17120

REGION III  
U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  
OFFICE FOR CIVIL RIGHTS  
150 S. INDEPENDENCE MALL WEST - SUITE 372  
PHILADELPHIA, PA 19106-9111

**Effective: April, 2003 – Revised July 28, 2015**



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**SOLICITUD PARA EL PROGRAMA PARA ASISTENCIA DE ENERGÍA PARA HOGARES DE BAJOS INGRESOS (LIHEAP)**

Para solicitar el beneficio de asistencia para energía, debe completar todas las preguntas del frente y reverso y firmar donde está la "X" de color rojo. Asegúrese de que su nombre y dirección completos estén escritos correctamente a continuación. En caso de no estar escritos correctamente, tache y ESCRIBALOS correctamente con letra de imprenta en el espacio provisto a continuación. **TAMBIEN PUEDE SOLICITAR EL BENEFICIO EN LINEA EN WWW.COMPASS.STATE.PA.US.**

SU NOMBRE Y DIRECCIÓN

Dirección de su Oficina de Asistencia del Condado

**Si no comprende estas instrucciones, comuníquese con la oficina de asistencia del condado de su área.**

**1** Complete esta sección con los datos delcabeza de familia.  
\*Use los códigos de la página 2 para ayudar a proporcionar los detalles.

Nombre (incluya apellido, nombre, inicial del segundo nombre)		Fecha de nacimiento	Sexo	Número de Seguro Social	
Dirección particular (incluya calle y número, núm. de apartamento, ciudad, estado y código postal+4)					
Dirección postal, si es diferente (incluya calle, núm. de apartamento, ciudad, estado y código postal+4)					
Condado en el que reside	Número de teléfono: ( )	Ciudadanía*	Raza (opcional)*	Grupo étnico (opcional)*	Estado civil*
Si usted actualmente recibe beneficios en efectivo, de asistencia médica o de SNAP ¿podemos basarnos en los ingresos que tiene registrados?					<input type="checkbox"/> Sí <input type="checkbox"/> No

DHS USE ONLY

CRISIS  CASH

Application Registration Number

County

District

Record Number

Worker I.D.

Rejected  Approved

Date

**2** ¿Lee, escribe y entiende el idioma inglés?  Sí  No  
Si la respuesta es no, ¿qué idioma lee, escribe y entiende? \_\_\_\_\_

**3** Usted:

<input type="checkbox"/> alquila y los gastos de calefacción están incluidos	<input type="checkbox"/> alquila una vivienda subsidiada/del programa "Section 8" con gastos de calefacción incluidos
<input type="checkbox"/> alquila y los gastos de calefacción no están incluidos	<input type="checkbox"/> alquila una vivienda subsidiada/del programa "Section 8" con gastos de calefacción <b>no</b> incluidos
<input type="checkbox"/> vive con este grupo familiar sin ser pariente	<input type="checkbox"/> es propietario o está comprando su vivienda <input type="checkbox"/> Otros: _____

Si el gasto de calefacción está incluido en su alquiler, adjunte una nota del propietario que le alquila la vivienda en la que declare que el gasto de calefacción está incluido, así como el tipo de combustible utilizado.

**4** ¿Cuál es su fuente principal de calefacción? **Escoja el tipo de energía que calienta su casa o que se está usando si su fuente de calor no funciona. Adjunte una copia de su último recibo o una carta de la compañía de luz o combustible que indique el tipo de combustible y que usted ha sido aceptado como cliente.**

Electricidad  Gasóleo  Carbón  Gas natural  Querosén  Gas propano o envasado  Combustibles mixtos  Madera/Otros

**4a** ¿Necesita electricidad para el funcionamiento de su fuente de calor principal (calor secundario)?  Sí  No

**5** Marque si algo de lo siguiente se aplica y explique si es necesario:

<input type="checkbox"/> Servicio de electricidad suspendido	<input type="checkbox"/> Tiene un aviso de suspensión para la electricidad	<input type="checkbox"/> La fuente de calor principal no funciona
<input type="checkbox"/> Servicio de gas suspendido	<input type="checkbox"/> Tiene un aviso de suspensión para el gas	Explique: _____
<input type="checkbox"/> Se acabó el combustible	<input type="checkbox"/> Se acabará el combustible en 15 días	_____





6

¿Qué compañía de servicios públicos o proveedor de combustible desea usted que reciba su subsidio LIHEAP? Especifique el nombre y dirección y la información de su cuenta.

Nombre de la empresa proveedora del servicio público o del proveedor de combustible	Número de cuenta
Dirección (incluya calle y número, ciudad, estado y código postal+4)	Nombre en la cuenta

7

Indique el nombre de su compañía de electricidad si no figura arriba.

Nombre de la empresa de electricidad	Número de cuenta
--------------------------------------	------------------

8

¿Usa usted otra fuente de calor en su hogar?  Sí  No

Si respondió **que sí**, explique: \_\_\_\_\_

9

Si vive en una vivienda subsidiada/pública, ¿recibe un cheque en concepto de asignación para servicios públicos?  Sí  No  
Si la respuesta **es sí**, ¿cuánto recibe? \$ \_\_\_\_\_

10

¿Alguien en su grupo familiar recibe asistencia económica por una discapacidad?  Sí  No

Si la respuesta **es sí**, ¿quién? \_\_\_\_\_

11

Enumere las personas que viven con usted en esta dirección. Incluya a todos los niños y adultos. Incluya a las personas que son parientes. Incluya a todas las personas que no son parientes, pero que comparten los gastos del grupo familiar. No incluya a ninguna persona que esté en la cárcel/prisión. No incluya al miembro del grupo familiar indicado en el bloque 1. [Vea recordatorio de la página 4.](#)

Use los códigos a continuación para ayudar a proporcionar los detalles para cada persona en su grupo familiar.

**CIUDADANÍA\*:** (1) Ciudadano de los Estados Unidos, (2) Extranjero residente permanente, (3) Extranjero residente temporal, (4) Refugiado, (5) Otros –no elegibles para recibir beneficios (Quienes no son ciudadanos de los EE.UU. deben proporcionar comprobantes de su estado migratorio).

**RAZA\*:** (opcional) (1) Negro o afroamericano, (3) Indígena norteamericano o nativa de Alaska, (4) Asiático, (5) Blanco, (7) Nativo de Hawái u otra raza de las Islas del Pacífico. Liste todos los grupos que correspondan.

**GRUPO ÉTNICO\*:** (opcional) (1) No hispano, (2) Hispano o latino

**ESTADO CIVIL\*:** (1) Soltero/a, (2) Casado/a, (3) Unión de hecho, (4) Separado/a, (5) Divorciado/a, (6) Viudo/a

Nombre y apellido (incluya apellido, nombre, inicial del segundo nombre)	Fecha de nacimiento (MM/DD/AA)	Sexo M/F	Número de Seguro Social	Ciudadanía*	Raza* (opcional)	Grupo étnico* (opcional)	Estado civil *	Relación con usted
Persona 1								

Si usted actualmente recibe beneficios en efectivo, de asistencia médica o de SNAP ¿podemos basarnos en los ingresos que tiene registrados?  Sí  No

Nombre y apellido (incluya apellido, nombre, inicial del segundo nombre)	Fecha de nacimiento (MM/DD/AA)	Sexo M/F	Número de Seguro Social	Ciudadanía*	Raza* (opcional)	Grupo étnico* (opcional)	Estado civil *	Relación con usted
Persona 2								

Si usted actualmente recibe beneficios en efectivo, de asistencia médica o de SNAP ¿podemos basarnos en los ingresos que tiene registrados?  Sí  No

Nombre y apellido (incluya apellido, nombre, inicial del segundo nombre)	Fecha de nacimiento (MM/DD/AA)	Sexo M/F	Número de Seguro Social	Ciudadanía*	Raza* (opcional)	Grupo étnico* (opcional)	Estado civil *	Relación con usted
Persona 3								

Si usted actualmente recibe beneficios en efectivo, de asistencia médica o de SNAP ¿podemos basarnos en los ingresos que tiene registrados?  Sí  No

Nombre y apellido (incluya apellido, nombre, inicial del segundo nombre)	Fecha de nacimiento (MM/DD/AA)	Sexo M/F	Número de Seguro Social	Ciudadanía*	Raza* (opcional)	Grupo étnico* (opcional)	Estado civil *	Relación con usted
Persona 4								

Si usted actualmente recibe beneficios en efectivo, de asistencia médica o de SNAP ¿podemos basarnos en los ingresos que tiene registrados?  Sí  No

Si viven otras personas en su hogar, proporcione la información correspondiente de dichas personas en una hoja de papel adicional y envíela junto con esta solicitud.

Solicite el beneficio en línea en [www.compass.state.pa.us](http://www.compass.state.pa.us)

**¿Está utilizando los ingresos que alguien tiene registrados en su expediente? No necesita mencionar dicha persona ni sus ingresos en la pregunta 12.**

**12** Proporcione información sobre los ingresos de las personas de su grupo familiar. Proporcione información sobre todos los ingresos, antes de impuestos y deducciones. **Los tipos/fuentes de ingresos incluyen dinero proveniente de:** empleo, beneficios para veteranos, compensación por desempleo, beneficios por neumoconiosis o pulmón negro, Seguro Social, manutención, compensación a trabajadores, intereses/dividendos, ingresos de alquileres. **Vea recordatorio de la página 4.**

Nombre de la persona con ingresos	Tipo/fuente del ingreso	Fecha de inicio	Fecha del primer cheque de pago	¿Cuánto por mes?
Nombre de la persona con ingresos	Tipo/fuente del ingreso	Fecha de inicio	Fecha del primer cheque de pago	¿Cuánto por mes?
Nombre de la persona con ingresos	Tipo/fuente del ingreso	Fecha de inicio	Fecha del primer cheque de pago	¿Cuánto por mes?
Nombre de la persona con ingresos	Tipo/fuente del ingreso	Fecha de inicio	Fecha del primer cheque de pago	¿Cuánto por mes?

**13** ¿Le interesa el servicio gratuito de aclimatación? Los servicios de aclimatación incluyen colocar aislamiento en el hogar y la evaluación del sistema de calefacción.  Sí  No

**14** ¿Está usted, o alguna persona de su grupo familiar, fugándose para evitar acciones legales o para evitar ser detenido por un delito, o por un intento de delito que sería clasificado como un delito grave?  Sí  No  
Si la respuesta **es sí**, ¿quién? \_\_\_\_\_

**15** ¿Alguna de las personas está o ha estado en las Fuerzas Armadas de los EE.UU.?  Sí  No  
Si la respuesta **es sí**, ¿quién? \_\_\_\_\_  
¿Alguna de las personas es la viuda, cónyuge o hijo/a (menor de 18 años de edad) de alguien que esté o haya estado en las Fuerzas Armadas de los EE.UU.?  Sí  No  
Si la respuesta **es sí**, ¿quién? \_\_\_\_\_

## Certificación

- Mediante mi firma en esta solicitud le doy mi permiso al Departamento de Servicios Humanos (DHS) o a su agente autorizado para: (a) verificar cualquier información que proporcione relativa a mi residencia, mis empleos, ingresos, recursos, suministro de energía y proveedor de energía; (b) compartir información con mi proveedor de energía y recibir la información de mi proveedor de energía para permitir que el DHS obtenga un registro de mi información anual del consumo de energía, el costo y la facturación a efectos de la evaluación de programas, el funcionamiento o la elaboración de informes; y (c) completar encuestas relacionadas con la asistencia para energía.
- Si no proporciona un número de Seguro Social o no completa la declaración jurada de asistencia para energía a continuación, usted no es elegible para recibir los beneficios.  
**Declaración jurada de asistencia de energía**  
Certifico que: (marque todas las opciones que correspondan)  
 Proporcioné los números de Seguro Social de todos los miembros del grupo familiar.  
 A mi leal saber y entender, estos miembros del grupo familiar no tienen números de Seguro Social:  
  
\_\_\_\_\_  
Nombre en letra de imprenta      Nombre en letra de imprenta  
  
\_\_\_\_\_  
Nombre en letra de imprenta      Nombre en letra de imprenta  
  
 Los siguientes miembros del grupo familiar, en ejercicio de sus derechos según la Sección 7 de la Ley de Privacidad de 1974, se niegan a divulgar sus números de Seguro Social o no pueden hacerlo por ser víctimas de violencia doméstica:  
  
\_\_\_\_\_  
Nombre en letra de imprenta      Nombre en letra de imprenta  
  
\_\_\_\_\_  
Nombre en letra de imprenta      Nombre en letra de imprenta
- Autorizo la divulgación de la Información de elegibilidad de LIHEAP a mis proveedores de energía o agencias de aclimatación o que ellos la divulguen con el fin de que puedan solicitar asistencia, para la cual yo pueda ser elegible. La asistencia puede comprender recibir los beneficios de dinero en efectivo, de crisis o de aclimatación de LIHEAP.
- Entiendo que tengo el derecho de apelar cualquier decisión o demora excesiva en la decisión que considere incorrecta con respecto a esta solicitud.
- Declaro que mi residencia legal es en Pennsylvania.
- Entiendo que el/los número(s) de Seguro Social provisto(s) será(n) utilizado(s) en la administración de este programa, incluyendo referencias cruzadas con otros programas.
- Entiendo que me enviarán una notificación de aprobación o de denegación y que, si soy aprobado, dicha notificación indicará la cantidad de mi beneficio.
- También entiendo que si mi grupo familiar es aprobado para recibir un beneficio en efectivo del programa LIHEAP, el dinero se enviará directamente a la empresa que me provee los servicios públicos o al proveedor de combustible, a menos que yo sea inquilino/arrendatario y que el gasto de calefacción esté incluido en el alquiler, o que el combustible sea proporcionado por un proveedor que no acepta pago a proveedores.
- Certifico que, sujeto a las penalizaciones previstas por ley, la información que brindé es, a mi leal saber y entender, verdadera, correcta y completa.
- Sé que si proporciono información falsa, puedo ser penado con multa o prisión.
- Entiendo, al firmar esta solicitud, que quizás no sea aprobado debido a que el dinero del programa LIHEAP se haya agotado.
- Si su hogar es elegible para LIHEAP, puede recibir un formulario de consentimiento Vía Rápida por correo que podría permitir que usted y los integrantes de su hogar se inscriban automáticamente en Asistencia Médica.

**Firme aquí – Use tinta**

**X**

\_\_\_\_\_  
Firma

\_\_\_\_\_  
Fecha

**Solicite el beneficio en línea en [www.compass.state.pa.us](http://www.compass.state.pa.us)**



## Recordatorio...

- Completar toda la información requerida de manera clara y completa.
  - Proporcionar los números de Seguro Social de **todos** los miembros del grupo familiar o completar el declaración jurada de asistencia para energía incluida en la sección Certificación en la página 3.
  - Enviar comprobantes de su situación migratoria si usted no es ciudadano de los EE.UU.
  - Enviar una copia del contrato de alquiler o una declaración escrita y firmada por su arrendador explicando cómo paga los gastos de calefacción, si usted alquila y los gastos de calefacción están incluidos.
  - Si usted paga por su calefacción, envíe una factura de su fuente principal de calefacción. Adjunte una copia de su factura de servicios públicos fechada en un plazo de 2 meses de la fecha en que usted presentó su solicitud. Para otros combustibles debe proporcionar una factura/recibo de una compra a partir de enero de la temporada de calefacción anterior a la presente.
  - Si desea que se envíe el pago a su proveedor de calefacción secundaria, adjunte una copia de sus facturas de calefacción principal Y secundaria.
  - Enviar comprobantes de todos los ingresos del grupo familiar.
- Ejemplo:** Si solicita en noviembre y envía:
- a) un mes de ingresos - enviar prueba para octubre, el mes anterior a la solicitud.
  - b) 12 meses de ingresos - enviar prueba de noviembre del año anterior a octubre del año en curso.
- LOS COMPROBANTES INCLUYEN TALONES DE CHEQUES DE PAGO DE NÓMINA, CARTAS DE OTORGAMIENTO DE BENEFICIOS, DECLARACIONES DE EMPLEADORES, ETC.**
- Enviar una declaración explicando cómo su grupo familiar paga las necesidades básicas de mantenimiento (comida, alquiler, etc.), en caso de que nos haya informado que no tiene ingresos o que sus ingresos son inferiores al costo de sus necesidades básicas de mantenimiento.
  - Firmar y fechar su solicitud.
  - Enviar por correo su solicitud completa y todos los documentos a la oficina de asistencia del condado de su área. Si no está seguro dónde está esto, llame al 1-866-857-7095.

**SI NO ENVÍA LOS COMPROBANTES QUE NECESITAMOS JUNTO CON ESTE FORMULARIO, NO PODREMOS PROCESAR SU SOLICITUD.**

## Inscripción de electores (opcional)

Si no está inscrito para votar en el lugar donde vive actualmente, ¿desea presentar una solicitud para inscribirse para votar aquí hoy?  Sí  No  
**SI NO MARCA NINGUNA CASILLA, CONSIDERAREMOS QUE DECIDIÓ NO INSCRIBIRSE PARA VOTAR EN ESTE MOMENTO.**

**Para inscribirse, usted debe: 1) tener por lo menos 18 años de edad el día de la próxima elección; 2) ser ciudadano de los Estados Unidos por un mes como mínimo ANTES DE LA PRÓXIMA ELECCIÓN; 3) residir en Pennsylvania y en el distrito de votación al menos 30 días antes de la próxima elección.**

**Solicitar la inscripción o negarse a inscribirse para votar no afectará la cantidad de la asistencia que recibirá de parte de esta agencia.**

Si desea ayuda para completar el formulario de inscripción para votar, podemos ayudarlo. La decisión de buscar o aceptar ayuda es suya. Puede completar el formulario de solicitud en privado. Comuníquese con la oficina de asistencia del condado si desea ayuda. Si cree que alguna persona ha interferido con su derecho a inscribirse para votar o a rechazar la inscripción para votar, su derecho a la privacidad para decidir si se inscribe o para solicitar la inscripción para votar, o su derecho a elegir su propio partido político u otra preferencia política, usted puede presentar una queja ante la Secretaría de Estado en: Secretary of the Commonwealth, PA Department of State, Harrisburg, PA 17120. (Número de teléfono sin cargo 1-877-VOTESPA)

EL PERSONAL DE LA OFICINA DE ASISTENCIA DEL CONDADO COMPLETARÁ ESTA SECCIÓN SEGÚN LO QUE USTED HAYA RESPONDIDO MÁS ARRIBA

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Given to Client ___/___/___          | <input type="checkbox"/> Sent to voter registration ___/___/___ | <input type="checkbox"/> Mailed to Client ___/___/___             |
| <input type="checkbox"/> Declined, not interested ___/___/___ | <input type="checkbox"/> Not a U.S. citizen ___/___/___         | <input type="checkbox"/> Declined, already registered ___/___/___ |



**COMPASS**  
CLICK. APPLY. BENEFIT.

Si tiene una discapacidad y necesita esta solicitud impresa con letras grandes o en otro formato, llame a nuestra **línea de ayuda** al número **1-800-692-7462**.  
**Para servicios de TDD, llame a PA Relay al 711.**

Solicite el beneficio en línea en [www.compass.state.pa.us](http://www.compass.state.pa.us)



## ¿Quién puede ver y con quién se comparte mi información de salud?

Los profesionales del DHS, tales como los trabajadores sociales y personal de las oficinas de asistencia del condado y de los programas; y personas que trabajan fuera del DHS, tales como contratistas, personal de una organización de cuidado de la salud (Health Maintenance Organization – HMO), enfermeras, médicos, terapeutas, trabajadores sociales y administradores, pueden ver y utilizar su información de salud para determinar su elegibilidad para recibir beneficios, tratamientos, pagos o por otras razones permitidas o necesarias. Compartir su información de salud puede estar relacionado con servicios y beneficios que tuvo anteriormente, que recibe actualmente o que puede recibir en el futuro. El DHS no usará ni compartirá su información genética al decidir si usted es elegible para recibir Medicaid.

## ¿Por qué el DHS utiliza y divulga mi información de salud protegida?

Hay distintas razones por las cuales podemos usar o divulgar su información de salud protegida. La ley establece que podemos utilizar o divulgar información sin su consentimiento o autorización por las razones que se describen a continuación.

**Para realizar tratamientos:** podemos utilizar o divulgar información para que usted pueda recibir tratamiento o servicios médicos. Por ejemplo, podemos dar información que su médico, hospital o terapeuta necesitan saber para brindarle atención médica de calidad y para coordinar su tratamiento con otros profesionales o especialistas que también le brindan asistencia médica.

**Para pagos:** podemos utilizar o dar información para pagar sus gastos de tratamientos y otros servicios médicos. Por ejemplo, podemos intercambiar información con su médico, hospital, hogar para personas mayores, y con otras agencias del gobierno para pagar las facturas por su tratamiento y servicios.

**Para la gestión de nuestros programas:** podemos utilizar o divulgar información durante el cumplimiento habitual de nuestras funciones al administrar los distintos programas. Por ejemplo, podemos utilizar su información de salud para comunicarnos con usted y proporcionar información sobre citas, información relativa a la salud, beneficios y servicios. También podemos analizar la información que recibimos de parte de su médico, hospital, hogar para personas mayores y otros proveedores de salud, para verificar cómo funcionan nuestros programas o para revisar la necesidad y calidad de los servicios de cuidado de la salud proporcionados a usted y/o su familia.

**Para actividades de salud pública:** proporcionamos información de salud pública a otras agencias del gobierno en relación con temas tales como enfermedades contagiosas, información sobre inmunización y seguimiento de ciertas enfermedades como el cáncer.

**Para fines de aplicación de la ley y según lo requerido por procedimientos legales:** divulgamos información a la policía y a otros agentes de la ley, según sea requerido por orden judicial.

**Para programas del gobierno:** podemos proporcionar información a un proveedor, una agencia del gobierno u otra organización que necesita saber si usted está inscrito en uno de nuestros programas o si recibe beneficios bajo otros programas tales como el Programa de Compensación a Trabajadores.

**Por cuestiones de seguridad nacional:** podemos proporcionar información solicitada por el gobierno federal cuando investigan algo importante para proteger a nuestro país.

**Para proteger la seguridad y salud públicas:** podemos divulgar información para prevenir amenazas graves a la salud o seguridad de una persona o del público en general.

**Para investigaciones:** podemos divulgar información con fines de investigación permitidos y para crear informes. Dichos informes no identifican a personas específicas.

**Para jueces de instrucción, directores de empresas de servicios funerarios y donaciones de órganos:** podemos proporcionar información a un juez de instrucción o a un médico forense con fines de identificación, determinación de causa de muerte, donación de órganos y otros motivos relacionados. También podemos divulgar información a directores de empresas de servicios funerarios para llevar a cabo tareas relativas a sepelios.

**Por otros motivos exigidos por ley:** el DHS podrá usar o divulgar su información de salud protegida en la medida que el uso o divulgación sea exigido por ley. El uso o divulgación se realiza en cumplimiento de la ley y se limita a los requisitos exigidos por ley.

## ¿Hay otras leyes que también protegen ciertos aspectos de mi información de salud?

El DHS también cumple otras leyes federales y estatales que brindan protección de privacidad adicional para el uso y divulgación de su información. Por ejemplo, si tenemos información sobre VIH o sobre abuso de sustancias, salvo unas pocas excepciones, no podemos proporcionarla sin el permiso especial por escrito y firmado de acuerdo a lo que estipula la ley. En algunos casos, la ley también nos exige obtener un permiso por escrito antes de usar o divulgar información relativa a la salud mental o discapacidades intelectuales y otras informaciones específicas.

## ¿Puedo pedir al DHS que utilice o divulgue mi información de salud?

A veces, es posible que usted necesite o quiera que su información de salud protegida sea enviada o de otra manera divulgada a alguna persona o a algún lugar por otras razones que no sean el tratamiento, pago, administración de nuestros programas o por otro motivo permitido o necesario que no requiera de su autorización escrita. En esos casos, podríamos pedirle que firme un formulario de autorización, para permitirnos enviar o de otra manera divulgar su información de atención de salud protegida, como usted lo solicita.

El formulario de autorización nos dice qué información enviaremos o divulgaremos de otra manera, a dónde y a quién. Usted puede revocar su autorización o limitar la cantidad de información que se divulgará en cualquier momento, informándonos por escrito sobre su decisión, excepto por las medidas que el DHS ya haya tomado al respecto de conformidad con dicha autorización.

Si usted es menor de 18 años de edad y por ley puede dar consentimiento sobre su propia atención médica, entonces tendrá el control de dicha información de salud. También puede hacer que su información de salud sea enviada a la o las personas que le están ayudando con su atención médica.

Salvo como se describe en la presente notificación, no utilizaremos ni divulgaremos su información de salud sin su autorización escrita. Por ejemplo, la Ley HIPAA por lo general exige que se obtenga una autorización escrita antes de que una entidad regulada por dicha ley pueda usar o divulgar las notas de las sesiones de psicoterapia de una persona. En la mayoría de los casos, la Ley HIPAA también exige que se obtenga una autorización escrita antes de que una entidad amparada pueda usar o divulgar la información de salud protegida para fines de mercadeo o antes de venderla.

## ¿Cuáles son mis derechos con respecto a mi información de salud?

Como cliente del DHS, usted tiene los siguientes derechos sobre la información de salud protegida que podemos utilizar y divulgar:

**Derecho a ver y tener una copia de su información de salud:** tiene el derecho de ver la mayor parte de su información de salud protegida y a recibir una copia de dicha información. Si desea tener copias de la información que tiene derecho a ver, es posible que se le cobre un cargo mínimo. Sin embargo, generalmente no podrá ver o recibir una copia de: (1) las notas de sesiones de psicoterapia o (2) la información que no se le puede proporcionar por ley federal.

Si denegamos su pedido de información de salud protegida, le proporcionaremos una explicación por escrito sobre dicha denegación y sus derechos respecto a la misma.

El DHS no recibe ni mantiene un registro de toda su información de salud protegida. Los médicos, hospitales, hogares para personas mayores y otros proveedores del cuidado de la salud (incluida una HMO si está inscrito en alguna) también pueden tener su información de salud protegida. Usted también tiene derecho a ver su información de salud a través de su médico u otro proveedor que tenga dichos registros.

**Derecho a corregir o agregar información:** si usted considera que parte de la información de salud protegida que tenemos es incorrecta, puede solicitarnos por escrito que corriamos o agreguemos nueva información. Puede pedirnos que enviemos la información nueva o corregida a otras personas a quienes hayamos enviado su información de salud. En algunos casos, podemos denegar su solicitud para corregir o agregar información. Si denegamos su pedido, le proporcionaremos una explicación por escrito de los motivos por los cuales lo hicimos. También le explicaremos qué puede hacer si no está de acuerdo con nuestra decisión.

**Derecho a recibir una lista de distribución:** usted tiene el derecho a recibir una lista de los lugares donde su información de salud protegida ha sido enviada, a menos que fuese enviada por motivos relativos a un tratamiento, pagos, administración de nuestros programas o si la ley establece que no estamos obligados a agregar la información de distribución a la lista. Por ejemplo, no estamos obligados por ley a agregar a la lista ninguna divulgación que podamos haber hecho a usted, su familia o personas involucradas en su atención, a otras personas a quien usted nos autorizó a divulgar la información, ni la información divulgada antes del 14 de abril de 2003.

**Derecho a solicitar restricciones sobre el uso y divulgación:** usted tiene derecho a solicitarnos restringir el uso y divulgación de su información de salud protegida. Es posible que no podamos cumplir su solicitud. De hecho, en algunos casos, no se nos permite restringir el uso o divulgación de la información. Si no podemos cumplir su solicitud, le informaremos por qué. Excepto cuando sea exigido por ley, debemos conceder su solicitud de restricción de divulgación a un plan de salud, si el propósito de la divulgación no es por tratamiento y los servicios médicos a los cuales se aplica la solicitud han sido pagados en su totalidad como desembolso personal.

**Derecho a solicitar comunicación confidencial:** nos puede solicitar que nos comuniquemos con usted de determinada forma o en un lugar determinado. Por ejemplo, puede pedirnos que nos comuniquemos con usted únicamente por correo.

**Derecho a recibir una notificación en caso de violación de la confidencialidad:** usted tiene el derecho a ser notificado en caso de violación de la confidencialidad de su información no segura de salud protegida.

## ¿A quién debo contactar por consultas sobre mis derechos o sobre esta notificación?

Puede comunicarse con la línea directa gratuita del DHS HIPAA al 800-692-7462 si tiene preguntas o consultas sobre sus derechos o sobre esta notificación. También puede comunicarse con su asistente social o proveedor de servicios de salud, o escribir a la Oficina de Privacidad del DHS a: Privacy Office, 3rd Floor West, Health and Welfare Building, 7th and Forster Streets, Harrisburg, PA 17120.

Puede recibir información importante o actualizaciones de esta notificación a través del sitio web del DHS en: [www.dhs.pa.gov](http://www.dhs.pa.gov).

## ¿Cómo presento una queja?

Si desea presentar una queja sobre la forma en que el DHS ha utilizado o divulgado su información, puede comunicarse con cualquiera de las oficinas que se indican abajo. No hay ninguna penalización por presentar una queja. Sus beneficios no se verán afectados ni cambiarán si usted presenta una queja. El DHS y sus empleados y contratistas no pueden tomar ni tomarán ningún tipo de represalia contra usted por presentar una queja.

PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES PRIVACY OFFICE  
3RD FLOOR WEST, HEALTH AND WELFARE BUILDING  
7TH AND FORSTER STREETS  
HARRISBURG, PA 17120

REGION III  
U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  
OFFICE FOR CIVIL RIGHTS  
150 S. INDEPENDENCE MALL WEST - SUITE 372  
PHILADELPHIA, PA 19106-9111

**Vigente a partir de: Abril de 2003 – Actualizada el 28 de Julio de 2015**



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES





**Pennsylvania Department of Human Services**  
**LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM**  
**2017 VENDOR AGREEMENT - LIQUID OR SOLID FUEL**

Vendor Name and Address

Vendor Number

This Agreement is entered into for the purpose of facilitating the provision of Low-Income Home Energy Assistance Program (LIHEAP) benefits to low-income households through the delivery of utility service or fuel products from a participating LIHEAP vendor to the LIHEAP beneficiary who is a customer of the vendor. Subject to the availability of funds, DHS may opt to provide additional benefit issuances through supplementary programs via the LIHEAP Cash or Crisis programs. By signing this agreement, the Vendor agrees to accept the additional benefit issuances and apply them according to DHS instructions.

Participating LIHEAP vendors are paid through the Commonwealth Treasury by check or direct deposit. A participating LIHEAP vendor also receives a corresponding provider payments list that identifies customer names, addresses and the amount of LIHEAP Cash and Crisis payments each customer will receive, associated with a specific Treasury Pay Date.

The business or company written above, herein referred to as the “vendor,” cannot enter into any subcontracts under this agreement with other subcontractors who are currently suspended or debarred by the commonwealth or other state or federal government. If any vendor enters into any subcontracts under this agreement with any subcontractors who become suspended or debarred by the commonwealth or other state or federal government during the term of this agreement or any extensions or renewals thereof, the commonwealth shall have the right to require the vendor to terminate such subcontracts in order to remain a LIHEAP vendor.

The vendor agrees that it shall be responsible for reimbursing the commonwealth for all necessary and reasonable costs and expenses incurred by the Office of the Inspector General or the Attorney General relating to an investigation of the vendor’s compliance with the terms of this or any other agreement between the vendor and the commonwealth which results in the suspension or debarment of the vendor.

Vendors will adhere to LIHEAP policy and procedures as defined in the LIHEAP State Plan, will report any discovery of fraud, and address any questions regarding participation in LIHEAP to the LIHEAP Vendor Unit. A copy of the current LIHEAP State Plan can be obtained on the LIHEAP Vendor Website at: [www.dhs.pa.gov/provider/informationforliheapvendors/index.htm](http://www.dhs.pa.gov/provider/informationforliheapvendors/index.htm).

Vendors will adhere to the guidance provided by the Department of Agriculture’s Division of Weights and Measures as it relates to the sale of energy products to protect consumers from unfair business practices and assure equity in the marketplace. See [www.agriculture.pa.gov/Protect/RideMeasurement](http://www.agriculture.pa.gov/Protect/RideMeasurement). The Weights and Measures Division is responsible for regulating a diverse array of products and services, including those that pertain to Coal, Firewood, Home Heating Oil and Liquid Propane Gas as defined in Section 23.106 and 23.107 of Title 70 of the Pennsylvania Weights, Measures and Standards, and the Consolidated Weights and Measures Act of December 18, 1996, P.L. 1028, No. 155) (3 Pa.C.S.A. §§ 4101 – 4194).

The vendor agrees to cooperate with the Department of Human Services (DHS) by complying with the following conditions in order to receive energy assistance payments through the Commonwealth of Pennsylvania:

1. Complete and return the Signature/Submission Page designating:
  - a) The vendor’s Federal Employer Identification Number (FEIN) or Social Security number (SSN). Submission of proof of the company’s FEIN or SSN is required to initiate participation as a LIHEAP vendor, or when that information changes. Proof consists of any tax document generated by the Federal Internal Revenue Service that shows the name and SSN or FEIN used by the vendor for tax purposes;
  - b) Phone numbers and an email address to maintain contact with DHS;
  - c) The vendor’s preferred method of receiving payment (direct deposit or paper check) and customer information; and
  - d) Any fees charged based on quantity or timing of delivery, such as emergency nature of delivery or intervening in an energy crisis situation.

New LIHEAP vendors must also indicate the type(s) of energy that the vendor provides, and the counties where services are provided.

2. Apply all LIHEAP payments paid by the Commonwealth of PA Treasury (Cash and Crisis grants) on behalf of the customer against that customer's heating costs, subject to subparagraphs "a" through "d" below:
  - a) Apply the full amount of each LIHEAP benefit to the respective account of each designated LIHEAP customer.
  - b) If a household is authorized for a LIHEAP Cash grant before the date of its request for Crisis benefits, any existing credit, including the LIHEAP Cash grant that has been authorized and not yet received, is considered to be available and must be used first for the resolution of the Crisis.
  - c) Late payment charges must be frozen at the amount they are at the time notification of eligibility for LIHEAP is received by the vendor, and may not be increased for the remainder of the LIHEAP program year, defined as the date that applications for LIHEAP benefits are no longer accepted.
  - d) LIHEAP Cash and Crisis grants will not be used for security deposits, service maintenance contracts, tank leases or rental payments or fees, late payment fees or other finance charges.
3. If the vendor has a variable pricing structure, energy products disbursed with LIHEAP funds should be charged the **lowest price**. Fees associated with a delivery made with LIHEAP funds must not be greater than those charged for an identical delivery to a non-LIHEAP household.
4. LIHEAP Cash grants received on behalf of a LIHEAP customer:
  - a) Will be used to cover customer fuel purchases only;
  - b) May only be used for purchases made on or after October 1st of the heating season for which they were authorized; and
  - c) Will be available as a credit to the customer to cover the cost of fuel until funds are exhausted, or until June 30 of the year immediately following the LIHEAP program year in which benefits were authorized.
5. LIHEAP Crisis grants:
  - a) May be used for energy supply shortage emergencies to provide fuel to a household that is out of fuel or is in immediate danger of being without fuel, or to restore home-heating service to a household that is without heat due to termination of the main or secondary source of heat by a utility company. Such benefits may include reconnect fees, off-hour delivery charges, or minimal costs (i.e., \$100 or less) to restart the furnace;
  - b) Are authorized by DHS or its representatives in the minimum amount needed to resolve the Crisis;
  - c) Are only guaranteed for authorizations approved by DHS or its representatives. Every request for Crisis must be made by the LIHEAP household to its designated DHS office, which will evaluate eligibility and determine the amount the household has available to resolve the Crisis. A DHS representative will contact the vendor to convey eligibility. Customers who call the vendor to request a delivery paid with LIHEAP Crisis funds should be told to contact DHS first. Customers who fail to secure DHS approval prior to the Crisis delivery will be required to pay for the delivery;
  - d) Are authorized in an "up-to" amount needed to resolve the Crisis, defined as the amount of fuel needed to fill the tank, up to the LIHEAP season's maximum Crisis amount;
  - e) Are assigned an authorization number to resolve a specific Crisis situation, i.e. a single delivery or pickup; and
  - f) May not be used for unpaid balances.
  - g) Vendors shall cooperate with DHS or its representative by making every attempt to make a Crisis delivery in time to resolve the customer's emergency:
    - Before the customer is without heat;
    - Within 48 hours if the customer is already without heat; or
    - Within 18 hours if a medical emergency or life-threatening situation exists.
  - h) If the vendor's supply is insufficient or other circumstances prevent the vendor from resolving the heating emergency, the vendor must tell the DHS representative immediately so DHS can evaluate other ways to remediate the customer's crisis situation, which could include the selection of another vendor to provide a delivery.
6. Crisis claims processing requires data entry into a web-based program and submission of documentation (proof of delivery or pickup).
  - a) Processing claims must occur **within 30 calendar days** of the date a Crisis benefit is authorized. Prompt data entry ensures that DHS can process a second Crisis request in a timely manner if one is received. Exceptions to the 30-day rule may be granted for claims entered on or after the 31st day and up to 30 days after the close of the LIHEAP season if funds are available.

- b) Acceptable Crisis documentation for solid or liquid fuels is based on fuel type and whether the fuel was delivered or picked up from the vendor, in compliance with the Department of Agriculture's Division of Weights and Measures:
- The vendor's name and address;
  - Date and time of delivery or transaction;
  - The purchaser's name and address;
  - Product identification; and
  - The price per unit or weight such as gallon, ton, pound, cord.

In addition to the items above, oil, propane, kerosene, and blended fuel deliveries must be recorded on a metered delivery ticket that includes:

- The driver's signature or employee number;
  - The delivery vehicle's permanently assigned company truck number; and
  - The volume to the nearest one-tenth of a gallon or other quantity if not measured in gallons.
- c) Documentation shall be provided to the agency designated by DHS via mail, fax, or electronic upload.
- d) A LIHEAP vendor will not receive payment until data entry and documentation have been processed by DHS or its designee.
- e) Data entry will be for no more than **the actual amount** of Crisis funds that are used to resolve the Crisis after subtracting available credits, which could include the LIHEAP Cash grant.
- f) A vendor may not bill the maximum available amount and keep the excess as a credit on the customer's account.
- g) A request for payment must be the exact amount needed to resolve the Crisis, not rounded to the nearest dollar.
- h) Crisis claims must be submitted in DHS' data entry system with consideration of the season minimum and maximum Crisis amounts, defined by DHS each LIHEAP season.
- i) LIHEAP recipients cannot be billed for services or late payment fees as a result of a vendor's failure to comply with billing requirements in this agreement.
7. Return all LIHEAP funds to DHS as required, by check, within 48 hours after the basis for return is known. A LIHEAP Refund Form (HSEA 37) must accompany payment, indicating the individual number of the customer that was provided on the LIHEAP Provider Payment List when payment was received and a description of the reason the funds are being returned. A user-friendly form is located on the LIHEAP Vendor website: [www.dhs.pa.gov/provider/informationforliheapvendors/index.htm](http://www.dhs.pa.gov/provider/informationforliheapvendors/index.htm).

**NOTE: LIHEAP funds should never be sent to a customer.**

Returned funds should be sent with a check payable to the COMMONWEALTH OF PENNSYLVANIA to:

**Commonwealth of Pennsylvania  
DHS-LIHEAP Vendor Refunds  
P.O. Box 2675 (WOB Room 224)  
Harrisburg, PA 17105-2675**

- a) **Examples of situations when the vendor should return all credited LIHEAP funds include but are not limited to:**
- Instances where a customer's whereabouts are unknown, customer changes vendor, customer dies or departs the area serviced by the vendor, vendor receives a duplicate payment, money erroneously applied toward a security deposit, or billing error detected.
  - Upon termination as a participating LIHEAP vendor.
  - Overpayments caused by vendor error. If this occurs, the vendor is responsible for reimbursement from the vendor's funds, not the customer's account. Vendor error includes, but is not limited to: the vendor failing to provide appropriate or accurate customer account information, non-equitable pricing practice, failure to provide credit balance information, failure to provide service that the LIHEAP funds were sent for, or using a communal account for LIHEAP funds.
  - The end of each LIHEAP program year. LIHEAP funds are available for use for two heating seasons, which includes the heating season of receipt and the heating season immediately following. All LIHEAP funds that have not been expended on or before June 30 of the year immediately following the LIHEAP season in which benefits were authorized must be returned to DHS by July 31 of that year. DHS will, on an annual basis, notify the vendors of the need to identify these accounts and request return of the funds.
- b) DHS is authorized to recoup past-due LIHEAP balances by debiting any current or future LIHEAP payment to the vendor for an amount equal to the outstanding un-refunded balance that is due to DHS from the vendor. A record of the balance of funds owed is established by DHS when a vendor error



has occurred or a vendor has received a payment on behalf of a person who is not an active customer of the vendor. The vendor must return these funds to DHS. DHS will send the vendor up to three notices requesting payment of the funds. If the vendor has failed to respond after the third notice, the amount of the balance of funds owed to DHS will be deducted from the vendor's next payment(s) until the funds are repaid. The vendor acknowledges that DHS will reduce vendor payments by the amount of the balance of funds owed to allow for the expeditious collection of these debts. If funds are unable to be recouped, outstanding balances will be referred to the Attorney General's Office for collection proceedings and all other legal remedies.

8. Provide all requested information established in DHS policies and procedures including information on the annual heating usage and cost incurred by LIHEAP households necessary for compliance with federal reporting requirements. Upon request, vendors will provide the total annual cost of a LIHEAP household's energy consumption for a designated annual period if this information is gathered by customer name or account number and the customer has been served by the vendor at the same address for the entire annual period.
9. Vendors are holding, on DHS' behalf, federal money for the benefit of recipient customers. Vendors are prohibited from using LIHEAP funds for purposes other than home heating. This requirement does not supersede the provisions of the Federal Bankruptcy Act, 11 U.S.C., Section 366.
10. To promptly notify the LIHEAP Vendor Unit whenever discrepancies in approved fuel applications are found. Examples include a vacant residence, a request to deliver to an address other than what was indicated on the Remittance Advice, a request to provide a fuel type other than what was authorized or other situations when the vendor is aware of potentially fraudulent activity.
11. To not discriminate against any eligible household in regard to terms and conditions of sale, credit, delivery, or price, nor treat adversely any household receiving LIHEAP because of such assistance.
12. To ensure the retention of LIHEAP customer confidentiality in the use of social media.
13. To notify DHS at least 120 days before filing for bankruptcy and return all funds not expended on LIHEAP clients at least 91 days before filing for bankruptcy.
14. To resolve any crisis payment disputes with DHS' Bureau of Hearings and Appeals if disputes cannot be resolved informally with DHS staff.
15. To present for review or reproduction records maintained by the vendor concerning overall pricing, conditions of sale, credit, and delivery, upon request by DHS for audit or investigation purposes, as provided in this agreement.
16. If DHS receives a notice of levy, DHS will turn over rights to property such as money, credit and deposits in accordance to the notice.
17. Vendors will retain all books, records and documents pertaining to LIHEAP payments for four years from the receipt of payment or until all questioned costs or activities have been resolved to the satisfaction of the commonwealth, or as required by applicable federal laws and regulations. All records must be maintained in a legible, readable condition. If records are maintained in a computer, the vendor must cooperate in providing printed versions of such records. Recipient-specific records should clearly identify both Cash and Crisis payments from LIHEAP, charges to the account, and documentation supporting these entries by individual household.

The commonwealth reserves the right for state and federal agencies or their authorized representatives to perform financial and compliance audits if deemed necessary by commonwealth or federal agencies. If an audit of this agreement will be performed, the vendor will be given advance notice.

A new LIHEAP Vendor Agreement is required every two years unless changes require this time frame to be shortened. **This agreement will terminate June 30, 2019, unless superseded by a new agreement, or terminated for convenience upon 30-day written notice by either DHS or by the vendor. Failure to comply with any of these conditions may result in removal from the approved vendor file and suspension of further payments to the vendor for client services.**

**LIHEAP VENDOR HELPLINE**  
**Toll Free Number 1-877-537-9517**  
**Fax 717-231-5516**  
**Email Address: RA-LIHEAPVendors@pa.gov**

**LIHEAP VENDOR WEBSITE**  
**[www.dhs.pa.gov/provider/informationforliheapvendors/index.htm](http://www.dhs.pa.gov/provider/informationforliheapvendors/index.htm)**



Pennsylvania Department of Human Services  
**LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM**  
**2017 VENDOR AGREEMENT - UTILITY**

Vendor Name and Address

Vendor Number

This Agreement is entered into for the purpose of facilitating the provision of Low-Income Home Energy Assistance Program (LIHEAP) benefits to low-income households through the delivery of utility service or fuel products from a participating LIHEAP vendor to the LIHEAP beneficiary who is a customer of the vendor. Subject to the availability of funds, DHS may opt to provide additional benefit issuances through supplementary programs via the LIHEAP Cash or Crisis programs. By signing this agreement, the Vendor agrees to accept the additional benefit issuances and apply them according to DHS instructions.

Participating LIHEAP vendors are paid through the Commonwealth Treasury by check or direct deposit. A participating LIHEAP vendor receives a corresponding provider payment list that identifies customer names, addresses and the amount of LIHEAP Cash and Crisis payments each customer will receive, associated with a specific Treasury Pay Date.

The business or company written above, herein referred to as the "vendor," cannot enter into any subcontracts under this agreement with other subcontractors who are currently suspended or debarred by the commonwealth or other state or federal government. If any vendor enters into any subcontracts under this agreement with any subcontractors who become suspended or debarred by the commonwealth or other state or federal government during the term of this agreement or any extensions or renewals thereof, the commonwealth shall have the right to require the vendor to terminate such subcontracts in order to remain a LIHEAP vendor.

The vendor agrees that it shall be responsible for reimbursing the commonwealth for all necessary and reasonable costs and expenses incurred by the Office of the Inspector General or the Attorney General relating to an investigation of the vendor's compliance with the terms of this or any other agreement between the vendor and the commonwealth which results in the suspension or debarment of the vendor.

Vendors will adhere to LIHEAP policy and procedures as defined in the LIHEAP State Plan, will report any discovery of fraud, and address any questions regarding participation in LIHEAP to the LIHEAP Vendor Unit. A copy of the current LIHEAP State Plan can be obtained on the LIHEAP Vendor Website at: [www.dhs.pa.gov/provider/informationforliheapvendors/index.htm](http://www.dhs.pa.gov/provider/informationforliheapvendors/index.htm).

The vendor agrees to cooperate with the Department of Human Services (DHS) by complying with the following conditions in order to receive energy assistance payments through the Commonwealth of Pennsylvania:

1. Complete and return the Signature/Submission Page designating:
  - a) The vendor's Federal Employer Identification Number (FEIN) or Social Security Number (SSN). Submission of proof of the company's FEIN or SSN is required to initiate participation as a LIHEAP vendor OR when that information changes. Proof consists of any tax document generated by the Federal Internal Revenue Service that shows the name and SSN or FEIN used by the vendor for tax purposes;
  - b) Phone numbers and an email address to maintain contact with DHS; and
  - c) The vendor's preferred method of receiving payment (direct deposit or paper check) and customer information.

New LIHEAP vendors must also indicate the type(s) of energy that the vendor provides, and the counties where services are provided.

2. Apply all LIHEAP payments paid by the Commonwealth of PA Treasury (Cash and Crisis grants) on behalf of the customer against that customer's heating costs, subject to subparagraphs "a" through "d" below:
  - a) Apply the full amount of each LIHEAP benefit to the respective account of each designated LIHEAP customer. For customers who have chosen their own supplier, the entire LIHEAP grant must be applied to cover the costs of both the distribution and supply portion of the bill each month until the LIHEAP benefit has been exhausted.

- b) If a household is authorized for a LIHEAP Cash grant before the date of its request for Crisis benefits, any existing credit, including the LIHEAP Cash grant that has been authorized and not yet received is considered to be available and must be used first for the resolution of the Crisis.
  - c) Late payment charges must be frozen at the amount they are at the time notification of eligibility for LIHEAP is received by the vendor, and may not be increased for the remainder of the LIHEAP program year, defined as the date that applications for LIHEAP benefits are no longer accepted.
  - d) LIHEAP Cash and Crisis grants will not be used for security deposits, service maintenance contracts, late payment fees, or other finance charges.
3. Public utilities that operate Customer Assistance Programs (CAP) will apply the LIHEAP Cash grant in full to the customer's account:
- a) To resolve any past-due CAP payments;
  - b) To the current CAP payment; and
  - c) Any remaining funds credited to future CAP payments.

NOTE: A CAP payment is the amount the customer is required to pay under the terms of the utility's CAP agreement.

4. Public utilities that operate a CAP will not consider the customer's LIHEAP benefit as an available resource in the computation that determines the amount of household's monthly CAP payment.
5. LIHEAP Cash grants received on behalf of a LIHEAP customer will be available as a credit to the customer to cover utility costs until funds are exhausted, or until June 30 of the year immediately following the LIHEAP program year in which benefits were authorized.
6. LIHEAP Crisis grants:
- a) May be used to prevent termination or restore home-heating service to a household that is without heat due to termination of the main or secondary source of heat by a utility company.
  - b) Are authorized by DHS or its representatives in the minimum amount needed to resolve the Crisis. Vendors must validate the existence of a Crisis to a DHS representative and indicate the minimum amount needed to resolve the utility emergency.
  - c) Are only guaranteed for authorizations approved by DHS or its representatives. Every request for Crisis must be made by the LIHEAP household to its designated DHS office, which will evaluate eligibility and determine the amount the household has available to resolve the Crisis. A DHS representative will contact the vendor to convey eligibility.
  - d) Are assigned an authorization number to resolve a specific Crisis situation.
  - e) Cannot exceed the amount listed on a utility termination notice, subject to the minimum and maximum LIHEAP Crisis benefits allowed.
  - f) May be used for reconnect fees.
  - g) Must maintain service to such households for no less than 30 calendar days from the date of the resolution of the Crisis.
  - h) Utility companies governed by the Public Utility Commission will adhere to the winter termination procedure referred to in §601.62(2) (ii)(A) of Appendix B of the LIHEAP State Plan.
  - i) Vendors shall cooperate with DHS or its representative by making every attempt to resolve the customer's heating emergency:
    - Before the customer is without heat;
    - Within 48 hours if the customer is already without heat; or
    - Within 18 hours if a medical emergency or life-threatening situation exists.
7. Crisis claims processing requires data entry into a web-based program and submission of documentation.

- a. Processing claims must occur **within 30 calendar days** of the date a Crisis grant is authorized. Exceptions to the 30-day rule may be granted for claims entered on or after the 31st day and up to 30 days after the close of the LIHEAP season if funds are available.
  - b. Acceptable Crisis documentation includes a termination or restoration notice confirming the dollar amount needed to restore service or prevent service interruption.
  - c. Documentation shall be provided to the agency designated by DHS via mail, fax or electronic upload.
  - d. A LIHEAP Vendor will not receive payment until data entry and documentation have been processed by DHS or its designee.
  - e. Data entry will be for no more than the amount that was authorized by the DHS representative to resolve the emergency after subtracting available credits, which could include the LIHEAP Cash grant.
  - f. LIHEAP recipients cannot be billed for services or late payment fees as a result of a vendor's failure to comply with billing requirements in this agreement.
8. Return all LIHEAP funds to DHS as required, by check, within 48 hours after the basis for return is known. A LIHEAP Refund Form (HSEA 37) must accompany payment, indicating the individual number of the customer that was provided on the LIHEAP Provider Payment List when payment was received and a description of the reason the funds are being returned. A user-friendly form is located on the LIHEAP Vendor website: [www.dhs.pa.gov/provider/informationforliheapvendors/index.htm](http://www.dhs.pa.gov/provider/informationforliheapvendors/index.htm).

**NOTE: LIHEAP funds should never be sent to a customer.**

Returned funds should be sent with a check payable to the COMMONWEALTH OF PENNSYLVANIA to:

**Commonwealth of Pennsylvania  
DHS–LIHEAP Vendor Refunds  
P.O. Box 2675 (WOB Room 224)  
Harrisburg, PA 17105-2675**

- a) **Examples of situations when the vendor should return all credited LIHEAP funds include, but are not limited to:**
- Instances where a customer's whereabouts are unknown, customer changes vendor, customer dies or departs the area serviced by the vendor, vendor receives a duplicate payment, money erroneously applied toward a security deposit, or billing error detected.
  - Upon termination as a participating LIHEAP vendor.
  - Overpayments caused by vendor error. If this occurs, the vendor is responsible for reimbursement from the vendor's funds, not the customer's account. Vendor error includes but is not limited to: the vendor failing to provide appropriate or accurate customer account information, non-equitable pricing practice, failure to provide credit balance information, failure to provide service that the LIHEAP funds were sent for, or using a communal account for LIHEAP funds.
  - The end of each LIHEAP program year. LIHEAP funds are available for use for two heating seasons, which includes the heating season of receipt and the heating season immediately following. All LIHEAP funds that have not been expended on or before June 30 of the year immediately following the LIHEAP season in which benefits were authorized must be returned to DHS by July 31 of that year. DHS will, on an annual basis, notify the vendors of the need to identify these accounts and request return of the funds.
- b) DHS is authorized to recoup past-due LIHEAP balances by debiting any current or future LIHEAP payment to the vendor for an amount equal to the outstanding un-refunded balance that is due to DHS from the vendor. A record of the balance of funds owed is established by DHS when a vendor error has occurred or a vendor has received a payment on behalf of a person who is not an active customer of the vendor. The vendor must return these funds to DHS. DHS will send the vendor up to three notices requesting payment of the funds. If the vendor has failed to respond after the third notice, the amount of the balance of funds owed to DHS will be deducted from the vendor's next payment(s) until the funds are repaid. The vendor acknowledges that DHS will reduce vendor payments by the amount of the balance of funds owed to allow for the expeditious collection of these debts. If funds are unable to be recouped, outstanding balances will be referred to the Attorney General's Office for collection proceedings and all other legal remedies.

9. Provide all requested information established in DHS policies and procedures including information on the annual heating usage and cost incurred by LIHEAP households necessary for compliance with federal reporting requirements. Upon request, vendors will provide the total annual cost of a LIHEAP household's energy consumption for a designated annual period if this information is gathered by customer name or account number and the customer has been served by the vendor at the same address for the entire annual period.
10. Vendors are holding, on DHS' behalf, federal money for the benefit of recipient customers. Vendors are prohibited from using LIHEAP funds for purposes other than home heating. This requirement does not supersede the provisions of the Federal Bankruptcy Act, 11 U.S.C., Section 366.
11. To promptly notify the LIHEAP Vendor Unit whenever discrepancies in approved applications are found. Examples include a vacant residence, a request for service at an address other than what was indicated on the Remittance Advice, a request to provide a fuel type other than what was authorized or other situations when the vendor is aware of potentially fraudulent activity.
12. To not discriminate against any eligible household in regard to terms and conditions of sale, credit, service or price, nor treat adversely any household receiving LIHEAP because of such assistance.
13. To ensure the retention of LIHEAP customer confidentiality in the use of social media.
14. To notify DHS at least 120 days before filing for bankruptcy and return all funds not expended on LIHEAP clients at least 91 days before filing for bankruptcy.
15. To resolve any crisis payment disputes with DHS' Bureau of Hearings and Appeals if disputes cannot be resolved informally with DHS staff.
16. To present for review or reproduction records maintained by the vendor concerning overall pricing, conditions of sale, credit, and service upon request by DHS for audit or investigation purposes, as provided in this agreement.
17. If DHS receives a notice of levy, DHS will turn over rights to property such as money, credit and deposits in accordance to the notice.
18. Vendors will retain all books, records and documents pertaining to LIHEAP payments for four years from the receipt of payment or until all questioned costs or activities have been resolved to the satisfaction of the commonwealth, or as required by applicable federal laws and regulations. All records must be maintained in a legible, readable condition. If records are maintained in a computer, the vendor must cooperate in providing printed versions of such records. Recipient-specific records should clearly identify both Cash and Crisis payments from LIHEAP, charges to the account, and documentation supporting these entries by individual household.

The commonwealth reserves the right for state and federal agencies or their authorized representatives to perform financial and compliance audits if deemed necessary by commonwealth or federal agencies. If an audit of this agreement will be performed, the vendor will be given advance notice.

A new LIHEAP Vendor Agreement is required every two years unless changes require this time frame to be shortened. **This agreement will terminate June 30, 2019, unless superseded by a new agreement, or terminated for convenience upon 30-day written notice by either DHS or by the vendor. Failure to comply with any of these conditions may result in removal from the approved vendor file and suspension of further payments to the vendor for client services.**

**LIHEAP VENDOR HELPLINE  
Toll Free Number 1-877-537-9517  
Fax 717-231-5516**

**Email Address: RA-LIHEAPVendors@pa.gov**

**LIHEAP VENDOR WEBSITE  
[www.dhs.pa.gov/provider/informationforliheapvendors/index.htm](http://www.dhs.pa.gov/provider/informationforliheapvendors/index.htm)**