

MASSACHUSETTS
RENTAL VOUCHER
PROGRAM
(MRVP)

ADMINISTRATIVE PLAN TRAINING

Module #2:

Verification & Calculation of Income



Welcome

- Welcome to the MRVP Administrative Plan training.
- Over the course of the next several months, we will conduct training sessions on commonly applied MRVP policies.
- Each session will cover a section/chapter or grouping of sections/chapters from the MRVP Administrative Plan.
- Each session and training module focuses on the application of MRVP program policies for specific program elements.

Training Curriculum & Schedule

 \checkmark



| # | Topics | Admin Plan Chapter(s) | Date |
|----|--|-----------------------|------------|
| 1. | Training Introduction, MRVP Regulations & Governance Eligibility, Issuance Briefing & Voucher | Chapters 1, 4, 6 | March 2023 |
| 2. | Verification | Chapters 7-8 | March 2023 |
| 3. | Calculation of Voucher Payment & Tenant Rent Share | Chapter 7 | April 2023 |
| 4. | General Leasing Procedures & MRVP Lease Addendum | Chapters 9-10 | April 2023 |
| 5. | Voucher Payment ContractRent Reasonableness & Rent Increases | Chapters 11 & 12 | May 2023 |
| 6. | Relocation & Project Based Voucher Transfers | Chapters 12 & 14 | May 2023 |
| 7. | Redetermination of Tenant Rent Share | Chapter 16 | June 2023 |
| 8. | Terminations & Grievances | Chapter 17 | June 2023 |
| 9. | Program Administration & Program Integrity | Chapters 18-19 | July 2023 |

Today's Session

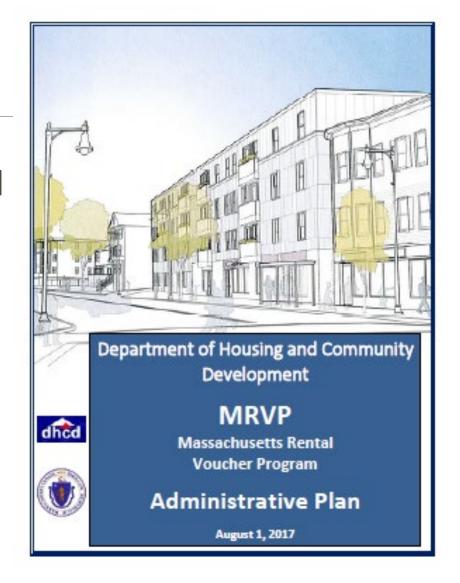
- Today's session will focus on the verification of income, assets, household composition, disability, and various eligible deductions.
 - Part I: Verification of Income Sources & Assets
 - Part II: Verification of Non-Income Factors
- Today's session will primarily focus on the verification of various income and non-income factors, rather than calculation. We will focus on calculation of gross and net income in the next training session.

Prior Session

- Verification of Identify: Training Module #1 previously reviewed the requirements for verification of vital documents such as photo ID, date of birth, and SSN verification.
- Please refer to Training Module #1 for more information on the verification of vital documents and other documentation required to be collected and verified at initial screening.

Resource Materials

- Use DHCD's MRVP Administrative Plan to ensure consistent application of policies and procedures.
- The policies we are reviewing today are generally found in Chapters 7 & 8 of the Administrative Plan.
- The goal is to know where to find the information you need and to correctly apply policies.



General Verification Requirements

- All information that a household is required to submit for MRVP, including documentation of income, assets, household composition, expenses, disability status, and other information must be verified by the AA.
- Some documentation, like vital documents, only need to be collected at the initial determination of eligibility.
- Other information, like income, must be verified at periodic recertifications.

- The household must provide the AA with verification of all income.
 This can include:
 - Pay stubs, benefit letters, bank statements, Department of Revenue (DOR) printouts, notarized letters, etc.
- All information provided must be no more than 90 days old (except for Social Security and/or certain other SSA income as described in later slides).

- For all types of income or assets required to be verified by the AA, if an applicant/participant provides acceptable documentation (i.e., written third-party verification) to verify a source of income or assets, the AA does not need to make additional attempts to independently verify income or assets.
- The AA must follow up to independently verify a source of income or assets only if an Applicant/Participant cannot supply the acceptable documentation.
- For example, if a Participant submits five weekly pay stubs, the AA does not need to attempt to verify their earned income via third-party or alternative means.

- Oral verification is not required; however, it can be used to clarify information provided in writing by third party or as independent verification when written third-party verification is not received.
- Self-certification is only allowable in certain circumstances, as described in later slides, and only once third-party verification has been attempted.

Part I: Verification of Income Sources

Acceptable Documentation

- The documentation needed to verify a specific source of income depends on a variety of factors including the type of income and frequency of which it is received.
- The following slides will review each of the most common sources of income and the acceptable documentation to verify and calculate income from each source.

Acceptable Documentation for Common Sources of Income

| Income Source | Acceptable Documentation | Unacceptable Documentation |
|--------------------------|--|--|
| Earned Income | Pay stubs (5 weekly, 3 bi-weekly or bi-monthly, 2 | Offer letter, Salary letter, Projected |
| | monthly) | earnings, Bank statement |
| Self Employment | Tax return, Business ledger | Bank statement |
| Social Security | Annual Benefit letter | Bank statements |
| SSI or SSDI | If no other income change, annual benefit letter | Bank statements |
| | If income changes, benefit letter < 90 days old | |
| SSP | Bank statement, Benefit letter | |
| Child Support & Alimony | DOR Printout (child support), notarized letter from | Court order |
| | parent paying support, personal checks, bank statements | |
| | Self-attestation only if no other verification available | |
| TANF | Benefit letter | Bank statements |
| EAEDC | Benefit letter | Bank statements |
| • | Verification not required | |
| Unemployment | 5 check stubs w/ deductions, DUA Printout | Bank statement |
| Worker's Compensation or | Benefit letter, Payment receipts | Bank statement |
| Other Disability Income | | |
| Gifts | Notarized letter from gift giver | |
| Foster Care Payments | Payment receipts, Bank statements | |
| Assets | Self-attestation of < \$5,000 in assets | |
| | Two months of account statements | |

Wage Match

Wage Match

- Wage Match is a system by which DHCD is authorized to receive wage reporting information from the Department of Revenue (DOR) for State voucher program participants.
- DOR matches AA-provided participant data against its wage reporting files and provides that information back to DHCD and AAs.
- AAs review the wage reporting information to determine whether income reported by participants for determining Tenant Rent Share and Voucher Payment is correct.
- All AAs must utilize the Wage Match program.

Wage Match Requirements

- Wage Match verification must be conducted for every adult (18 and over) who has an SSN.
- Applicants and participants must be informed about Wage Match and must provide SSNs for all adults who have SSNs.
- Wage match does not need to be run at interim recertifications.

Confidentiality

- Security and confidentiality are governed by Mass General Laws (MGL) and Code of Massachusetts Regulations (CMR).
- Information from Wage Match may only be accessed by authorized AA employees and must directly relate to case specifically assigned to that employee.
- No other employee or person under the AA's control, or on the AA's premises, may inspect, disclose, or browse the wage reporting information for any purpose.
- Unauthorized use will result in immediate termination and may subject AA staff to fines.

Income Discrepancy

- AAs must compare wage information reported by the family with wage information from Wage Match. Specifically, AAs must review the current certification and the prior certification and compare the income reported to the information available on the Wage Match report.
- If the income was reported, but Wage Match is at least 10% higher, obtain third-party verification to verify the income with the employer.
- The HOH is required to explain differences between family reported and wage match information.

Income Discrepancy

- If the unreported income would not have been counted in the calculation of income (e.g., full-time student income), then there is no repayment required.
 - However, the household should be sent a warning to report all changes in income within 30 days.
- Even if a voucher payment re-determination is not triggered, failure to disclose income or provide documentation of an increase in income may be cause for termination.

Unreported Income

- If unreported income is discovered the AA must:
 - Send the family a letter regarding requirement to report all income.
 - Require the participant to enter into a repayment agreement (if the amount can be repaid within 5 years).
 - If the amount is so great that it cannot be repaid within five years, then proceed with termination.
 - In unreported income rises to the level of termination, the cause for termination is "failure to report information."*

^{*}Do not use "fraud" as the cause for termination, as "fraud" implies an intention to deceive, which is difficult to prove.

Sample Wage Match Report

COMMONWEALTH OF MASSACHUSETTS

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

WAGE MATCH SYSTEM

Response List for Request #185408

Report Date: 10/3/2020

quest Note : Report Time : 00:51:01

prmation Expiry Date: 10/10/2020 User:
guest Submitted By: Metrop803WM Total Records: 5

| SSN | Name DOR / (Submitted) | Address Submitted | Year | Qtrs | Wage | Employer | Remarks |
|---------|---------------------------|-------------------|-------|------|-------------|---|-----------------------------|
| xxx-xx- | | | 2019 | 4 | \$4,122.90 | SIDEKIM LLC 775 WOODLANDS PKWY STE 1, RIDGELAND, MS 391575214 | Exact match - Wage found |
| | | | 2019 | 3 | \$7,294.65 | SIDEKIM LLC 775 WOODLANDS PKWY STE 1, RIDGELAND, MS 391575214 | Exact match - Wage found |
| | ~ | | 2020 | 2 | \$10,557.32 | KETTLE CUISINE, LLC 330 LYNNWAY, LYNN, MA 01901 | Exact match - Wage found |
| | | | 2020 | 1 | \$13,416.37 | KETTLE CUISINE, LLC 330 LYNNWAY, LYNN, MA 01901 | Exact match - Wage found |
| | | | 2019 | 4 | \$4,790.26 | KETTLE CUISINE, LLC 330 LYNNWAY, LYNN, MA 01901 | Exact match - Wage found |
| | | | Yr To | otal | \$40,181.50 | | |

Training Module #2 Grand Total: \$40,181.50

Wage Match

- This report was run on 10/03/2020 at the regular recertification.
- The participant reported the income from Kettle Cuisine in 2019 and in 2020.
- The participant did not report the income from SIDEKIM LLC in 2019
- What action should be taken?

COMMONWEALTH OF MASSACHUSETTS

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

WAGE MATCH SYSTEM

Response List for Request #185408

Report Date: 10/3/2020

quest Note : Report Time : 00:51:01

brmation Expiry Date: 10/10/2020 User:
quest Submitted By: Metrop803WM Total Records: 5

SSN Name DOR / Address Submitted Year Qtrs Wage Employer Remarks (Submitted) \$4,122.90 SIDEKIM LLC XXX-XX-Exact match 775 WOODLANDS Wage found PKWY STE 1. RIDGELAND, MS \$7,294.65 SIDEKIM LLC Exact match -775 WOODLANDS Wage found PKWY STE 1, RIDGELAND, MS Exact match Wage found 330 LYNNWAY LYNN, MA 01901 \$13,416.37 KETTLE CUISINE. Exact match -Wage found 330 LYNNWAY LYNN, MA 01901 \$4,790.26 KETTLE CUISINE, Exact match -Wage found 330 LYNNWAY. LYNN, MA 01901 Yr Total \$40,181.50 Grand Total: \$40,181.50

Wage Match

- What action should be taken?
 - An MRVP Participant is required to report all income to the AA at the time of regular recertification.
 - Even though the income appears to have stopped, obtain third-party verification to verify the income; and as applicable, do a repayment agreement or propose termination.
 - Determine if the amount owed would rise to the level of termination.

COMMONWEALTH OF MASSACHUSETTS

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

WAGE MATCH SYSTEM

Response List for Request #185408

Report Date: 10/3/2020

Report Time: 00:51:01

ormation Expiry Date: 10/10/2020

uest Note

User:

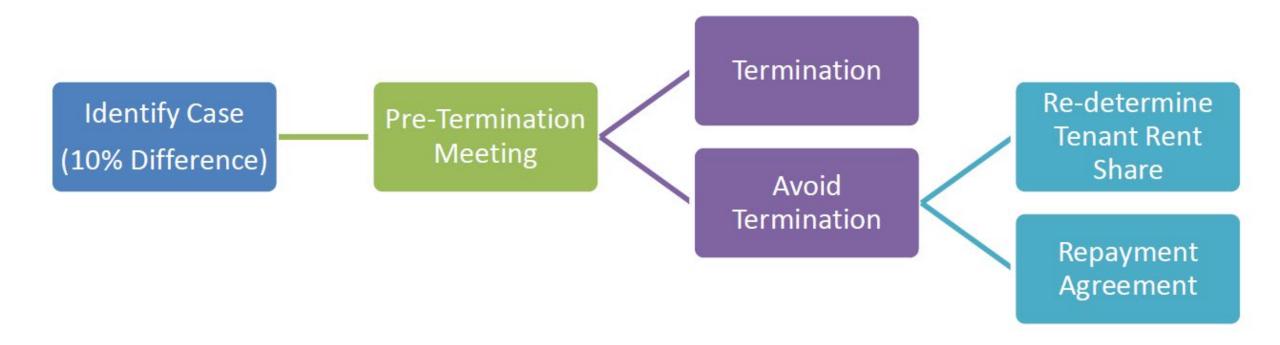
quest Submitted By : Metrop803WM

Total Records: 5

| SSN | Name DOR / (Submitted) | Address Submitted | Year | Qtrs | Wage | Employer | Remarks |
|---------|---------------------------|-------------------|---------|-------|---------------------|---|-----------------------------|
| xxx-xx- | | | 2019 | 4 | \$4,122.90 | SIDEKIM LLC 775 WOODLANDS PKWY STE 1, RIDGELAND, MS 391575214 | Exact match - Wage found |
| | | | 2019 | 3 | \$7,294.65 | SIDEKIM LLC 775 WOODLANDS PKWY STE 1, RIDGELAND, MS 391575214 | Exact match - Wage found |
| | | | 2020 | 2 | \$10,557.32 | KETTLE CUISINE, LLC 330 LYNNWAY, LYNN, MA 01901 | Exact match - Wage found |
| | | | 2020 | 1 | \$13,418.37 | KETTLE CUISINE, LLC 330 LYNNWAY, LYNN, MA 01901 | Exact match - Wage found |
| | | | 2019 | 4 | \$4,790.26 | KETTLE CUISINE, LLC 330 LYNNWAY, LYNN, MA 01901 | Exact match - Wage found |
| | | | Yr To | otal | \$40,181.50 | | |
| | | | Grand 1 | otal: | \$40, <u>181.50</u> | | |

Wage Match Discrepancy

- Request the information on the income discrepancy twice, in writing, through warning letters. Include information that failure to comply will result in termination.
- If the information is not provided after warning letters, schedule a pretermination meeting with the Household to discuss:
 - The information required;
 - Reasons why the information was not provided; and
 - Possible termination.
- If the information is not provided, terminate the Household.
- If the information is provided to the satisfaction of the AA at any time prior to when program termination is effective, discontinue termination proceedings.



Meeting/Hearing Process

- During the pre-termination meeting, the AA and Household have the opportunity to discuss the following:
 - Information obtained from DOR concerning the Household's wages
 - How the income discrepancy might affect the Tenant Rent Share or Voucher Payment
 - How the income discrepancy may result in program termination.
- If requested, the Household will be given time following the meeting to provide income information, documentation, or other evidence that shows why the wage reporting information received from DOR is incorrect.
- The AA will evaluate all information provided by the Household.

Meeting/Hearing Process

- Where termination for failure to report income is applicable, follow Termination policies on Failure to Provide Information
- Note that termination may not be required if failure to accurately report income was due to error rather than fraud or if fraud cannot be verified; in such cases, a repayment agreement may be appropriate.

Earned Income Verification

Earned Income

- Earned income includes:
 - The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services.
 - Income from the operation of a business or profession by each selfemployed Household member after deduction for the ordinary and necessary expenses of the business or profession.
- Types of income classified as earned income include:
 - Earnings from employment
 - Military pay
 - Income from self-employment

Verification of Earned Income

- Verification of Earned Income
 - Weekly Pay: 5 Pay stubs
 - Bi-weekly or Semi-Monthly: 3 Pay stubs
 - Monthly: 2 Pay stubs
- Use the Wage Match to identify discrepancies in reported earned income, as reviewed on the previous slides.
- Third-party verification forms are sent when and if third-party documents are not provided or if clarifications are needed.

- You received the following pay stubs. Which will you use to verify and calculate income?
 - a. 5/14/2023 5/20/2023: Gross Pay: \$200
 - b. 5/21/2023 5/27/2023: Gross Pay: \$400
 - c. 5/28/2023 6/3/2023: Gross Pay: \$630
 - d. 6/4/2023 6/10/2023: Gross Pay: \$650
 - e. 6/11/2023 6/17/2023: Gross Pay: \$700
 - f. 6/18/2023 6/24/2023: Gross Pay: \$675

- You received the following pay stubs. Which will you use to verify and calculate income?
 - a. 5/14/2023 5/20/2023: Gross Pay: \$200
 - b. 5/21/2023 5/27/2023: Gross Pay: \$400
 - c. 5/28/2023 6/3/2023: Gross Pay: \$630
 - d. 6/4/2023 6/10/2023: Gross Pay: \$650
 - e. 6/11/2023 6/17/2023: Gross Pay: \$700
 - f. 6/18/2023 6/24/2023: Gross Pay: \$675

Weekly pay requirement = 5 most current consecutive pay stubs. Do **not** use more than what is required.

- Calculate the annual income using the 5 most current pay stubs:
 - 5/21/2023 5/27/2023: Gross Pay: \$400
 - 5/28/2023 6/3/2023: Gross Pay: \$630
 - 6/4/2023 6/10/2023: Gross Pay: \$650
 - 6/11/2023 6/17/2023: Gross Pay: \$700
 - 6/18/2023 6/24/2023: Gross Pay: \$675

- Calculate the annual income using the 5 most current pay stubs:
 - 5/21/2023 5/27/2023: Gross Pay: \$400
 - 5/28/2023 6/3/2023: Gross Pay: \$630
 - 6/4/2023 6/10/2023: Gross Pay: \$650
 - 6/11/2023 6/17/2023: Gross Pay: \$700
 - 6/18/2023 6/24/2023: Gross Pay: \$675
 - \$675+\$700+\$650+\$630+\$400=\$3,055/5 weeks=\$611/week
 - \$611 per week x 52 weeks = \$31,772

Remember!

- Even though the household provided 6 pay stubs, don't use all 6 pay stubs to calculate annual income. Look at the difference in income if you used all 6:
 - Using 5 most recent pay-stubs: \$31,772
 - Using all 6 pay-stubs: \$28,210

 This is to ensure consistency in calculation of income among all MRVP households.

Pay Stubs

- Pay stubs may also provide AAs with additional information about the following assets or expenses:
 - Checking and/or savings accounts
 - 401(k) or other retirement or pension accounts
 - Medical and/or dental expenses

ACME CORPORATION 1 COMMONWEALTH ROAD CAMBRIDGE, MA 02139



Employee ID: 0002468
Department: 0779300
Location: 07793
Pay Rate: \$12.71

Pay Rate: \$12.71 Benefit Rate: \$12.71

| Check Date | 12/20/2018 | Pay Begin Date | 11/30/2018 |
|--------------|------------|----------------|------------|
| Check # | 15022103 | Pay End Date | 12/13/2018 |
| Gross Amount | \$1,016.80 | Net Amount | \$680.75 |

\$630.75 was deposited in checking account #XXXXXX2028 \$50.00 was deposited in savings account #XXXXXX1456

| HOURS AND EARNINGS | | | | | |
|--------------------|---------|---------|------------|----------|-------------|
| Description | Rate | Current | Current | YTD | YTD |
| | | Hours | Amount | Hours | Amount |
| Flex Day O | | .00 | \$.00 | 16.00 | \$203.36 |
| Holiday | | .00 | \$.00 | 32.00 | \$406.72 |
| Overtime | \$19.00 | .00 | \$.00 | 264.14 | \$5,018.66 |
| Reg Ern | \$12.71 | 80.00 | \$1,016.80 | 1,969.94 | \$25,037.94 |
| Vacation | \$12.71 | .00 | \$.00 | 112.00 | \$1,423.52 |
| TOTAL | | 80.00 | \$1,016.80 | 1,346.08 | \$32,090.20 |

| TAXES | | |
|-------------|----------|------------|
| Description | Current | YTD |
| | Amount | Amount |
| MEDICARE | \$13.87 | \$229.61 |
| Soc Sec | \$40.43 | \$665.33 |
| MA SWT | \$105.37 | \$1,817.17 |
| TOTAL | \$159.67 | \$2,712.11 |

| BEFORE TAXES | | |
|--------------|----------|------------|
| Description | Current | YTD |
| | Amount | Amount |
| Med/PPO/PT | \$89.00 | \$1,513.00 |
| Dental – BT | \$10.72 | \$171.52 |
| 401kPreTax | \$9.93 | \$182.24 |
| TOTAL | \$109.65 | \$1,866.76 |

| AFTER TAX DEDUCTIONS | | |
|----------------------|---------|----------|
| Description | Current | YTD |
| | Amount | Amount |
| LTD | \$66.73 | \$995.03 |
| TOTAL | \$66.73 | \$995.03 |

Pay Stubs

Assets:

 Review the account number(s) listed on the pay stub to confirm that all assets have been properly reported.

Expenses:

- AAs may use pay stubs as verification of unreimbursed/out-ofpocket medical expenses such as medical or dental insurance.
- However, do <u>not</u> include the Medicare tax or long-term disability insurance as an unreimbursed medical expense.

Self-Employment Income Verification

Self-Employment Income

- Income from the operation of a business or profession by each selfemployed Household member after deduction for the ordinary and necessary expenses of the business or profession.
 - The deductible expenses of the business or profession shall not exceed 85% of the gross receipts of the business or profession.
 - Deductible expenses of the business or profession shall not include the rent or utilities paid for the Participant's unit if the business or profession is located in the Participant's unit.

Self-Employment Verification

- Business owners and self-employed persons should provide:
 - The most recent tax return with all attachments (i.e., W-2s, 1099s) and schedules (Schedules C, E, and/or F as applicable)
 - An audited or unaudited financial statement(s) of the business, and any supporting documents, such as manifests, appointment books, cash books, or bank statements.

Self-Employment Verification

- Verify that the claimed business expenses do not exceed 85% of the gross income from the business.
- Verify the location of the business and if the location of the business is in the unit, net income would need to be adjusted so that rent and utilities are not deducted from income.

Self-Employment Verification

 Generally, verify self-employment income using the line for Net Profit or Loss from Schedule C Form 1040

| | SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3. | | 2a All investment is at risk. 2b Some investment is not |
|----|--|------------|---|
| | If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule | | _ |
| 32 | If you have a loss, check the box that describes your investment in this activity. See instructions. | | |
| | If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. If a loss, you must go to line 32. | 3 | н |
| 31 | Net profit or (loss). Subtract line 30 from line 29. | | |
| | and (b) the part of your home used for business: Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30. | - 1 | 10 |
| | unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: | | |
| 30 | Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 88 | 29 | |
| 29 | Tentative profit or (loss). Subtract line 28 from line 7 | | 29 |
| 28 | Total expenses before expenses for business use of home. Add lines 8 through 27a | ▶ 2 | 28 |

Uber and Lyft Verification

- Income for Uber and Lyft drivers is considered Self-Employment.
 They are not employees of Uber or Lyft.
- If working for as an Uber or Lyft driver for more than one year, use the tax return to verify and calculate income
- If working for less than a year as an Uber or Lyft driver you will need weekly or monthly payment statements and verification of claimed expenses.

Uber and Lyft

- If a family member is a contractor for a company that uses monthly or weekly payment statements (i.e., Uber, Lyft):
 - Obtain the same number of payment statements as you would for pay stubs.
 - Determine Gross Income: Average the weekly or monthly income and annualize.
 - Determine Expenses: Average the weekly or monthly expenses and annualize. Determine if there are expenses that are not weekly or monthly that should be included (i.e., insurance).
 - **Determine Net Income:** Subtract the annualized expenses from the annualized gross income (if the amount is negative, enter \$0).

Uber and Lyft - Tolls

- Note that toll amounts listed on Uber and Lyft payment statements are generally reimbursements to the driver and should not be included as income.
 - Drivers pay the toll with their EZ Pass, and Uber/Lyft reimburse the driver for this. Since this is reimbursement, it is NOT income, and should be removed from the driver's gross pay.

Social Security Administration (SSA) Income

SOCIAL SECURITY

SSDI

SSI & SSP

OVERPAYMENTS

Social Security Administration Income

- Income from the Social Security Administration (SSA) generally includes the following, and is included in the calculation of income for MRVP:
 - Social Security (includes retirement, disability, survivor benefits, dual entitlement, etc.)
 - Social Security Disability Insurance (SSDI)
 - Supplemental Security Income (SSI)
 - Note: State Supplemental Program (SSP) income is also to be verified and included

SSA Benefit Letter

- MRVP applicants and participants receiving SSA benefits can request a *Proof of Income Letter* by:
 - Calling the Social Security Administration (SSN) at 1-800-772-1213; or
 - Logging onto the SSA website at https://www.ssa.gov/myaccount/

Verifying SSA Benefits

- Use the benefit letter to verify Social Security and SSI/SSDI benefits.
- The third-party verification form does not apply to verifying Social Security benefits.
- Bank statements cannot be used to verify Social Security and SSI/SSDI benefits.
- Self-certification cannot be used to verify Social Security, SSI or SSDI benefits.
- If the person receiving the Social Security or SSI income (the payee) resides in the unit, but the person for whom the benefit is being paid does not, **do not** include the income in household income.

Social Security

- For verification of Social Security only (not including SSI, SSP, or SSDI) the AA may accept the Participant's annual benefit letter, even if it is not dated within 90 days of receipt by the AA.
- Annual benefit letters are usually mailed at the end of each calendar year and outline the benefits for the next calendar year.
- The AA may use the benefit letter for the full calendar year described in the letter. Even if this letter is more than 90 days old, it may be accepted.

SSI & SSDI

- For SSI and SSDI, the AA may accept the Participant's annual benefit letter only if the household has no other income or income has not changed.
- Annual benefit letters are usually mailed at the end of each calendar year and outline the benefits for the next calendar year.
- The AA may use the benefit letter for the full calendar year described in the letter. Even if this letter is more than 90 days old, it may be accepted.

Your New Benefit Amount

BENEFICIARY'S NAME: JOHN DOE

SECOND CONTRACTOR OF SECOND CO

Your Social Security benefit will increase by **5.9%** in 2022 because of a rise in the cost of living. You can use this letter as proof of your benefit amount if you need to apply for food, rent, or energy assistance. You can also use it to apply for bank loans or for other business. Keep this letter with your important financial records.

| How Much You Will Get | |
|---|------------|
| Your monthly benefit before deductions | \$1,248.10 |
| Deductions: | |
| Medicare Medical Insurance (If you did not have Medicare as of November 18, 2021 or if someone else pays your premium, we show \$0.00) | -\$170.10 |
| Medicare Prescription Drug Plan (We will notify you if the amount changes in 2022. If you did not elect withholding as of November 1, 2021, we show \$0.00) | -\$0.00 |
| U.S. Federal tax withholding | -\$0.00 |
| Voluntary Federal tax withholding (If you did not elect voluntary tax withholding as of November 18, 2021, we show \$0.00) | -\$0.00 |
| After we take any other deductions, you will receive the payment you are due for December 2021 on or about January 3, 2022. | \$1,078.00 |

The information above shows your monthly benefit amount before and after deductions. Please remember, we will pay you in the month following the month for which it is due.

The Treasury Department requires Federal benefit payments to be made electronically. If you still receive a paper check, please visit the Department of the Treasury's Go Direct website at *www.godirect.gov* to request electronic payments.

If you disagree with any of these amounts, you must file an appeal with us within 60 days from the date you receive this letter. We will assume you got this letter 5 days after the date of the letter, unless you show us that you did not get it within the 5-day period. The fastest and easiest way to file an appeal is to visit https://secure.ssa.gov/iApplNMD/start online.

Your New Benefit Amount

BENEFICIARY'S NAME: JOHN DOE

Your Social Security benefit will increase by **5.9%** in 2022 because of a rise in the cost of living. You can use this letter as proof of your benefit amount if you need to apply for food, rent, or energy assistance. You can also use it to apply for bank loans or for other business. Keep this letter with your important financial records.

| How Much You Will Get | |
|---|------------|
| Your monthly benefit before deductions | \$1,248.10 |
| Deductions: | |
| Medicare Medical Insurance (If you did not have Medicare as of November 18, 2021 or if someone else pays your premium, we show \$0.00) | -\$170.10 |
| Medicare Prescription Drug Plan (We will notify you if the amount changes in 2022. If you did not elect withholding as of November 1, 2021, we show \$0.00) | -\$0.00 |
| U.S. Federal tax withholding | -\$0.00 |
| Voluntary Federal tax withholding (If you did not elect voluntary tax withholding as of November 18, 2021, we show \$0.00) | -\$0.00 |
| After we take any other deductions, you will receive the payment you are due for December 2021 on or about January 3, 2022. | \$1,078.00 |

The information above shows your monthly benefit amount before and after deductions. Please remember, we will pay you in the month following the month for which it is due.

The Treasury Department requires Federal benefit payments to be made electronically. If you still receive a paper check, please visit the Department of the Treasury's Go Direct website at **www.godirect.gov** to request electronic payments.

If you disagree with any of these amounts, you must file an appeal with us within 60 days from the date you receive this letter. We will assume you got this letter 5 days after the date of the letter, unless you show us that you did not get it within the 5-day period. The fastest and easiest way to file an appeal is to visit https://secure.ssa.gov/iApplNMD/start online.

Reminders!

Count the full amount = \$1,248.10 (do **not** round, even if rounded amount is stated on benefit letter).

Your New Benefit Amount

BENEFICIARY'S NAME: JOHN DOE

Your Social Security benefit will increase by **5.9%** in 2022 because of a rise in the cost of living. You can use this letter as proof of your benefit amount if you need to apply for food, rent, or energy assistance. You can also use it to apply for bank loans or for other business. Keep this letter with your important financial records.

| How Much You Will Get | |
|---|------------|
| Your monthly benefit before deductions | \$1,248.10 |
| Deductions: | \sim |
| Medicare Medical Insurance (If you did not have Medicare as of November 18, 2021 or if someone else pays your premium, we show $\$0.00$) | -\$170.10 |
| Medicare Prescription Drug Plan (We will notify you if the amount changes in 2022. If you did not elect withholding as of November 1, 2021, we show \$0.00) | -\$0.00 |
| U.S. Federal tax withholding | -\$0.00 |
| Voluntary Federal tax withholding (If you did not elect voluntary tax withholding as of November 18, 2021, we show \$0.00) | -\$0.00 |
| After we take any other deductions, you will receive | \$1,078.00 |
| the payment you are due for December 2021 on or about January 3, 2022 | |

The information above shows your monthly benefit amount before and after deductions. Please remember, we will pay you in the month following the month for which it is due.

The Treasury Department requires Federal benefit payments to be made electronically. If you still receive a paper check, please visit the Department of the Treasury's Go Direct website at **www.godirect.gov** to request electronic payments.

If you disagree with any of these amounts, you must file an appeal with us within 60 days from the date you receive this letter. We will assume you got this letter 5 days after the date of the letter, unless you show us that you did not get it within the 5-day period. The fastest and easiest way to file an appeal is to visit https://secure.ssa.gov/iApplNMD/start online.

Reminders!

Count the full amount = \$1,248.10 (do **not** round, even if rounded amount is stated on benefit letter).

Deduct \$170.10 as a monthly medical expense

Social Security Overpayments

- An overpayment occurs when the SSA pays an individual more than they should have been paid.
- The SSA will notify the individual and their representative payee, if applicable, and recover the overpayment.
- The family must provide the SSA notification of the overpayment.

Overpayment Recovery

- **Social Security**: Recovery of a Social Security overpayment is made by withholding the full monthly Social Security check until the overpayment is paid in full (unless the recipient requests a lesser holding amount).
- **SSI**: Recovery of an SSI overpayment is made by withholding 10% of the benefit each month.

Social Security Overpayments

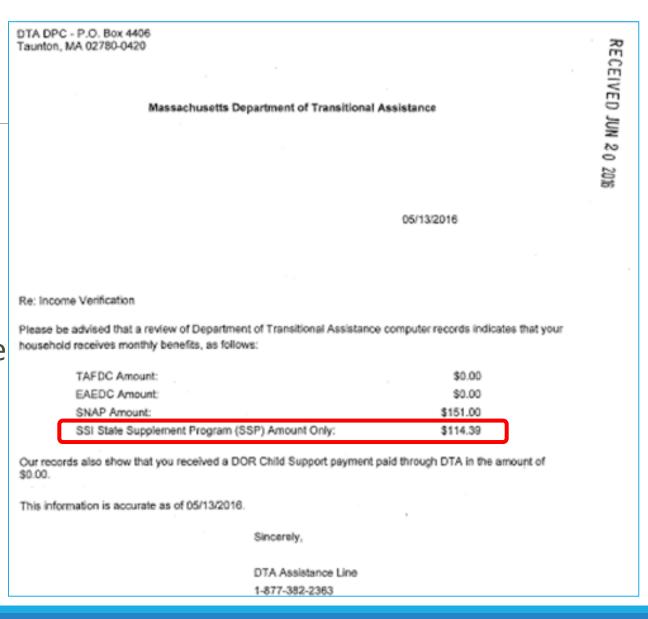
If a family reports their SS or SSI benefit has been reduced due to an overpayment:

- Conduct an interim reexamination and use the reduced benefit amount.
 Regardless of the amount withheld to repay SSA, the overpayment amount, or the length of the anticipated withholding period, the reduced benefit must be used.
- The reduced benefit amount is the amount paid after the overpayment is deducted.
- Make note of the overpayment amount and length of time the reduced payment will occur.
- Families are required to report the increase in Social Security and/or SSI benefit when the repayment is complete. Conduct an interim to recalculate the income when this occurs, but only if it results in an increase in income of 10% or more.

State Supplemental Portion (SSP)

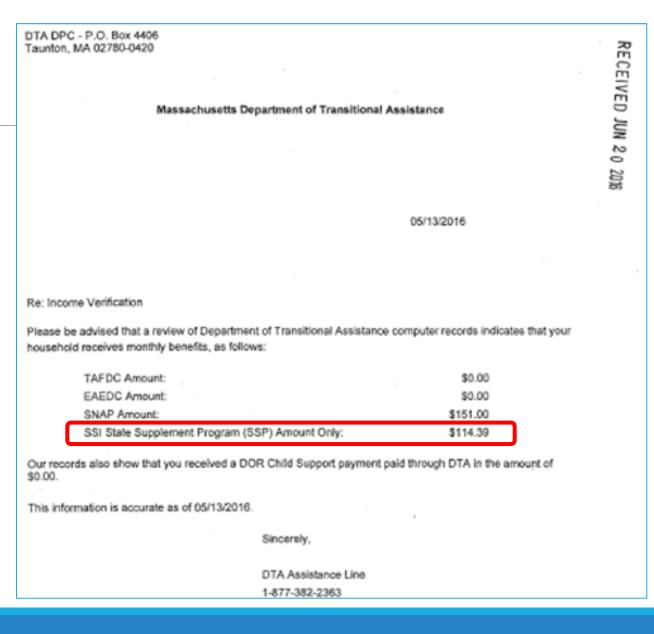
State Supplement Program

- SSI is generally separated into two parts: the Federal portion and the State portion, or State Supplement Program portion (SSP).
- A benefit letter from DTA or bank statement can be used to verify the State Supplement Portion (SSP).
- The third-party verification form does not apply to verifying SSP benefits.
- Self-certification cannot be used to verify SSP benefits.



State Supplement Program

 Include the SSP benefits in the calculation of the family's gross income by multiplying the monthly benefit by 12.



State Supplement Program

- DTA provides verification of the SSP.
- A DTA benefit letter will include the SSP whether or not the family receives cash assistance.
- Call the SSP Client Assistance Line at 1-877-863-1128 if the client or payee is present with you (SSP staff will speak briefly with the client or payee to confirm the request), and a Benefit Verification Letter will be sent.
- As applicable, use the Oral Verification Form and any AA-available written third-party form to record results.

Brain Teaser #3

What amount would you use to calculate this household's SSI income?

- A. \$480.27
- B. \$57.90
- **C.** \$538.17
- D. None of the above

SOCIAL SECURITY ADMINISTRATION

Date: November 9, 2022 Claim Number: XXX-XX-7891

ROSEMARY ANTHOS 246 MAIN STREET ANYTOWN, ST 99999

You asked us for information from your record. The information that you requested is shown below. If you want anyone else to have this information, you may send them this letter.

Information about Supplemental Security Income Payments

Beginning January 2023, the current Supplemental Security Income payment is \$480.27.

This is after we have withheld 57.90 to recover an overpayment.

This payment amount may change from month to month if income or living situation changes.

Supplemental Security Income Payments are paid the month they are due. (For example, Supplemental Security Income Payments for March are paid in March.)

Date of Birth Information

The date of birth shown on our records is February 20, 1948.

Type of Supplemental Security Income Payment Information

You are entitled to monthly payments as a disabled individual.

SUSPECT SOCIAL SECURITY FRAUD?

Please visit our website.

Brain Teaser #3

What amount would you use to calculate this household's SSI income?

- A. \$480.27
- B. \$57.90
- **C.** \$538.17
- D. None of the above

The deduction for the overpayment was already accounted for in the \$480.27 benefit.

SOCIAL SECURITY ADMINISTRATION

Date: November 9, 2022 Claim Number: XXX-XX-7891

ROSEMARY ANTHOS 246 MAIN STREET ANYTOWN, ST 99999

You asked us for information from your record. The information that you requested is shown below. If you want anyone else to have this information, you may send them this letter.

Information about Supplemental Security Income Payments

Reginning January 2023, the current Supplemental Security Income payment is \$480.27.

This is after we have withheld 57.90 to recover an overpayment.

This payment amount may change from month to month if income or living situation changes.

Supplemental Security Income Payments are paid the month they are due. (For example, Supplemental Security Income Payments for March are paid in March.)

Date of Birth Information

The date of birth shown on our records is February 20, 1948.

Type of Supplemental Security Income Payment Information

You are entitled to monthly payments as a disabled individual.

SUSPECT SOCIAL SECURITY FRAUD?

Please visit our website.

Child Support

Child Support Income

- Include all regular payments made on behalf of a minor for their support.
- Only count child support income that is received, even if the payments are more or less than the court-ordered amount.
- Child support can be court-ordered or not court-ordered.

Child Support

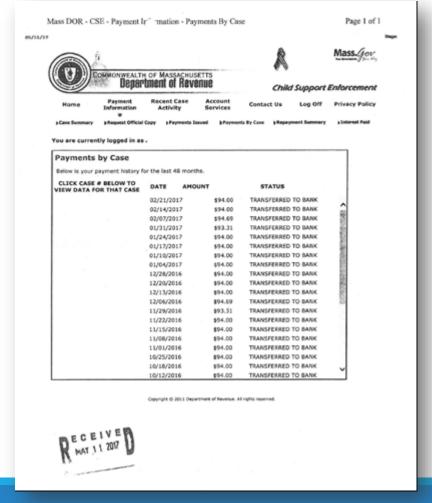
- Child support may be verified via:
 - Online printout from the Massachusetts Department of Revenue (DOR) showing the payment history;
 - A benefit letter from the Dept. of Transitional Assistance, or,
 - Third-party form or notarized letter from the parent paying support.
- The following cannot be used to verify child support benefits:
 - Court orders
 - Personal checks
 - Bank statements

Child Support

- Self-certification may NOT be used to verify court-ordered child support.
- Self-certification may be used to verify non-court ordered child support only if higher forms of verification are not available.

Court-Ordered Child Support

- The online printout from the MA Dept. of Revenue (DOR) can be used to verify and calculate court ordered child support.
- The printout can be accessed by the client using their ID and PIN.



Calculating Child Support - DOR

- Average the past 6 months of payments and annualize.
- If less than 6 months are provided, then use the number of full months provided.
- Use full calendar months, and count months where no payments were received.
- If no payments are made for six months, use \$0.

Mass DOR - CSE - Payment Ir mation - Payments By Case

Page 1 of 1

05/11/17







Child Support Enforcement

Information Activity Services Contact Us Log Off Privacy Police

You are currently logged in as ,

| Payments by Case | | | | | |
|--|----------------|---------|---------|---------------------|--|
| Below is your payment history for | or the last 48 | months. | | | |
| CLICK CASE # BELOW TO VIEW DATA FOR THAT CASE | DATE | AMOUNT | | STATUS | |
| | 02/21/2017 | , | \$94.00 | TRANSFERRED TO BANK | |
| | 02/14/2017 | | \$94.00 | TRANSFERRED TO BANK | |
| | 02/07/2017 | | \$94.69 | TRANSFERRED TO BANK | |
| | 01/31/2017 | | \$93.31 | TRANSFERRED TO BANK | |
| # | 01/24/2017 | | \$94.00 | TRANSFERRED TO BANK | |
| | 01/17/2017 | | \$94.00 | TRANSFERRED TO BANK | |
| | 01/10/2017 | | \$94.00 | TRANSFERRED TO BANK | |
| | 01/04/2017 | | \$94.00 | TRANSFERRED TO BANK | |
| | 12/28/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 12/20/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 12/13/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 12/06/2016 | | \$94.69 | TRANSFERRED TO BANK | |
| | 11/29/2016 | | \$93.31 | TRANSFERRED TO BANK | |
| | 11/22/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 11/15/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 11/08/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 11/01/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 10/25/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 10/18/2016 | | \$94.00 | TRANSFERRED TO BANK | |
| | 10/12/2016 | | \$94.00 | TRANSFERRED TO BANK | |

Copyright © 2011 Department of Revenue. All rights reserved



Using the DTA Benefit Letter to Verify and Calculate Child Support Income

- Child support income may show up on the DTA benefit letter if the family is also receiving public assistance.
- If the parent receiving support also receives public assistance, DOR collects and records the child support payment and sends it to DTA.
 - The client will receive their child support payment from the DTA.
 - When entering income information and processing the transaction, enter the TAFDC amount as separately from the child support.

| Massachusetts Department of Tr | ansitional Assistance |
|---|---|
| | |
| Isabel Wilson 123 Main Street Brookline, MA 02446 | |
| Brookline, WA 02440 | |
| | 12/23/2018 |
| Re: Income Verification | |
| Please be advised that a review of Department of Transitional Assistance monthly benefits as follows: | e computer records indicates that your household receives |
| TAFDC Amount: | \$478.00 |
| EAEDC Amount: | \$0.00 |
| SNAP Amount: | \$60.00 |
| SSI State Supplement F <mark>rogram (SSP) Amount Only.</mark> | \$0.00 |
| Our records also show that you received a DOR Child Support payment | paid through DTA in the amount of \$50.00 on 12/15/2018. |
| This information is accurate as of 12/16/2018. | |

Using the DTA Benefit Letter to Verify and Calculate Child Support Income

- If the child support amount paid is greater than \$50, DTA will give the client their regular TAFDC grant plus \$50 in child support.
 - The amount of child support provided to the client and listed on the benefit letter will generally not be more than \$50; however, it could be less than \$50.

Using the DTA Benefit Letter to Verify and Calculate Child Support Income

- It may take several weeks for any changes in payment status to be reflected in DTA benefit letters.
- If the client certifies that the amount being paid to them differs from the amount listed on the letter, it may be necessary to follow-up and request additional documentation from DTA and/or DOR.

Child Support – Not Court-Ordered

- Verify non-court-ordered child support using:
 - A notarized letter from the parent paying support.
 - Third-party verification form that identifies the payments and frequency, signed by the parent providing payments.
 - Self-certification only if higher forms of verification are not available.

Child Support

 Be sure to clearly document the file to explain the method used to calculate the amount of support received.

Re: Income Verification

Please be advised that a review of Department of Transitional Assistance computer records indicates that your household receives monthly benefits as follows:

| TAFDC Amount: | \$491.00 |
|---|----------|
| EAEDC Amount: | \$0.00 |
| SNAP Amount: | \$189.00 |
| SSI State Supplement Program (SSP) Amount Only: | \$0.00 |

Our records also show that you received a DOR Child Support payment paid through DTA in the amount of \$50.00 on 02/15/2023.

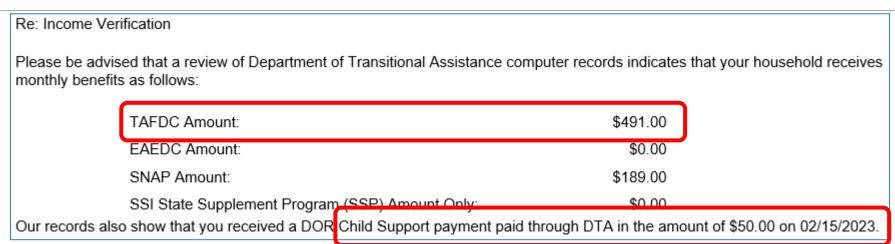
The client provides a DTA benefit letter (above). Which types and amounts will be included in annual income?

A. TAFDC: \$491

B. TAFDC: \$491; SNAP: \$189

C. TAFDC: \$491; SNAP: \$189; Child Support: \$50

D. TAFDC: \$491; Child Support: \$50



The client provides a DTA benefit letter (above). Which types and amounts will be included in annual income?

A. TAFDC: \$491

B. TAFDC: \$491; SNAP: \$189

C. TAFDC: \$491; SNAP: \$189; Child Support: \$50

D. TAFDC: \$491; Child Support: \$50

If this child support verification was processed by DOR on 9/4/2023, which months will you use to calculate the income?

- A. April September
- B. April August
- C. March August
- D. January September

| DATE | AMOUNT | STATUS |
|------------|----------|------------------------|
| | | |
| 08/27/2023 | \$190.00 | TRANSFERRED TO |
| 08/13/2023 | \$190.00 | BANK TRANSFERRED TO |
| | _ | BANK |
| 07/30/2023 | \$190.00 | TRANSFERRED TO BANK |
| 07/16/2023 | \$152.00 | TRANSFERRED TO BANK |
| 07/03/2023 | \$152.00 | TRANSFERRED TO BANK |
| 06/19/2023 | \$152.00 | TRANSFERRED TO BANK |
| 06/05/2023 | \$152.00 | TRANSFERRED TO BANK |
| 05/24/2023 | \$16.76 | TRANSFERRED TO BANK |
| 05/21/2023 | \$135.24 | TRANSFERRED TO BANK |
| 05/07/2023 | \$168.76 | TRANSFERRED TO BANK |
| 04/22/2023 | \$135.24 | TRANSFERRED TO BANK |
| 04/10/2023 | \$244.76 | TRANSFERRED TO BANK |
| 03/26/2023 | \$59.24 | TRANSFERRED TO BANK |
| 03/10/2023 | \$152.00 | TRANSFERRED TO BANK |
| 01/31/2023 | \$52.76 | TRANSFERRED TO BANK |
| 01/18/2023 | \$59.24 | TRANSFERRED TO BANK |

Training Module #2 BANK 7

If this child support verification was processed by DOR on 9/4/2023, which months will you use to calculate the income?

- A. April September
- B. April August
- C. March August
- D. January September

| DATE | AMOUNT | STATUS |
|------------|----------|------------------------|
| | | |
| 08/27/2023 | \$190.00 | TRANSFERRED TO BANK |
| 08/13/2023 | \$190.00 | TRANSFERRED TO BANK |
| 07/30/2023 | \$190.00 | TRANSFERRED TO BANK |
| 07/16/2023 | \$152.00 | TRANSFERRED TO BANK |
| 07/03/2023 | \$152.00 | TRANSFERRED TO BANK |
| 06/19/2023 | \$152.00 | TRANSFERRED TO BANK |
| 06/05/2023 | \$152.00 | TRANSFERRED TO BANK |
| 05/24/2023 | \$16.76 | TRANSFERRED TO BANK |
| 05/21/2023 | \$135.24 | TRANSFERRED TO BANK |
| 05/07/2023 | \$168.76 | TRANSFERRED TO BANK |
| 04/22/2023 | \$135.24 | TRANSFERRED TO BANK |
| 04/10/2023 | \$244.76 | TRANSFERRED TO BANK |
| 03/26/2023 | \$59.24 | TRANSFERRED TO BANK |
| 03/10/2023 | \$152.00 | TRANSFERRED TO BANK |
| 01/31/2023 | \$52.76 | TRANSFERRED TO BANK |
| 01/18/2023 | \$59.24 | TRANSFERRED TO BANK |

Training Module #2 BANK 79

- Another client brings in a child support printout on 10/29/2022.
 What do you notice about how frequently this household receives child support payments?
- A. The family did not receive payments in February, May, or July of the current year
- B. The family only recently began to receive payment after a year-long break

| DATE | AMOUNT | STATUS |
|------------|----------|------------------------|
| | | |
| 10/24/2022 | \$167.76 | TRANSFERRED TO BANK |
| 09/21/2022 | \$135.24 | TRANSFERRED TO BANK |
| 08/07/2021 | \$168.76 | TRANSFERRED TO BANK |
| 06/22/2021 | \$135.24 | TRANSFERRED TO BANK |
| 04/10/2021 | \$244.76 | TRANSFERRED TO BANK |
| 03/26/2021 | \$59.24 | TRANSFERRED TO BANK |
| 03/10/2021 | \$152.00 | TRANSFERRED TO BANK |
| 01/31/2021 | \$52.76 | TRANSFERRED TO BANK |
| 01/18/2021 | \$59.24 | TRANSFERRED TO BANK |

- Another client brings in a child support printout on 10/29/2022.
 What do you notice about how frequently this household receives child support payments?
- A. The family did not receive payments in February, May, or July of the current year
- B. The family only recently began to receive payment after a year-long break

| DATE | AMOUNT | STATUS |
|------------|----------|------------------------|
| | | |
| 10/24/2022 | \$167.76 | TRANSFERRED TO BANK |
| 09/21/2022 | \$135.24 | TRANSFERRED TO BANK |
| 08/07/2021 | \$168.76 | TRANSFERRED TO BANK |
| 06/22/2021 | \$135.24 | TRANSFERRED TO BANK |
| 04/10/2021 | \$244.76 | TRANSFERRED TO BANK |
| 03/26/2021 | \$59.24 | TRANSFERRED TO BANK |
| 03/10/2021 | \$152.00 | TRANSFERRED TO BANK |
| 01/31/2021 | \$52.76 | TRANSFERRED TO BANK |
| 01/18/2021 | \$59.24 | TRANSFERRED TO BANK |

- What would you need to do in order to calculate this income?
- A. Average and annualize the 09/2022 payment only
- B. Average and annualize both 2022 payments
- C. Ask the family about the situation and for a printout run in November 2022 and average and annualize the amounts from 09/2022 and 10/2022

| DATE | AMOUNT | STATUS |
|------------|----------|------------------------|
| | | |
| 10/24/2022 | \$167.76 | TRANSFERRED TO BANK |
| 09/21/2022 | \$135.24 | TRANSFERRED TO BANK |
| 08/07/2021 | \$168.76 | TRANSFERRED TO BANK |
| 06/22/2021 | \$135.24 | TRANSFERRED TO BANK |
| 04/10/2021 | \$244.76 | TRANSFERRED TO BANK |
| 03/26/2021 | \$59.24 | TRANSFERRED TO BANK |
| 03/10/2021 | \$152.00 | TRANSFERRED TO BANK |
| 01/31/2021 | \$52.76 | TRANSFERRED TO BANK |
| 01/18/2021 | \$59.24 | TRANSFERRED TO BANK |

- What would you need to do in order to calculate this income?
- A. Average and annualize the 09/2022 payment only
- B. Average and annualize both 2022 payments
- C. Ask the family about the situation and for a printout run in November 2022 and average and annualize the amounts from 09/2022 and 10/2022

| DATE | AMOUNT | STATUS |
|------------|----------|------------------------|
| | | |
| 10/24/2022 | \$167.76 | TRANSFERRED TO BANK |
| 09/21/2022 | \$135.24 | TRANSFERRED TO BANK |
| 08/07/2021 | \$168.76 | TRANSFERRED TO BANK |
| 06/22/2021 | \$135.24 | TRANSFERRED TO BANK |
| 04/10/2021 | \$244.76 | TRANSFERRED TO BANK |
| 03/26/2021 | \$59.24 | TRANSFERRED TO BANK |
| 03/10/2021 | \$152.00 | TRANSFERRED TO BANK |
| 01/31/2021 | \$52.76 | TRANSFERRED TO BANK |
| 01/18/2021 | \$59.24 | TRANSFERRED TO BANK |

Alimony

Alimony

- A notarized letter from the party paying support can be used to verify alimony.
- Court orders, personal checks and bank statements cannot be used to verify alimony income.

Public Assistance

Public Assistance

- Include all TANF and EAEDC payments received by or on behalf of any family member.
- Verification of SNAP benefits is **not** required since they are excluded from the calculation of gross income.
- Verify TANF and EAEDC benefits with a benefit letter.
- Bank statements cannot be used to verify public assistance benefits.
- Self-certification cannot be used to verify public assistance benefits.

Public Assistance

- The client can obtain a benefit letter through:
 - DTA's website: (https://dtaconnect.eohhs.mass.gov/)
 - Calling the DTA Assistance Line at 1-877-382-2363 to request a current benefit letter; or
 - Going to a local DTA office and request a benefit letter.

| Massachusetts Department of Transitional Assistance | | | | |
|---|---|--|--|--|
| Belinda Hutchinson 123 Commonwealth Cambridge, MA 021 | | | | |
| oumbridge, W/ 02 1 | | Agency ID: 123456 Central Eligibility Unit - DTA | | |
| | | 09/23/2019 | | |
| | | | | |
| Re: Income Verificat | tion | | | |
| | hat a review of Department of Transitional Assistance comp | outer records indicates that your household receives | | |
| Please be advised to monthly benefits as | hat a review of Department of Transitional Assistance comp | outer records indicates that your household receives \$362.00 | | |
| Please be advised to monthly benefits as | hat a review of Department of Transitional Assistance comp follows: | · | | |
| Please be advised the monthly benefits as | hat a review of Department of Transitional Assistance comp follows: FDC Amount: | \$362.00 | | |

- The letter must be dated within the past 90 days.
- All attempts to obtain copies of benefit letters from DTA and/or the tenant must be documented in the file.

Unemployment

Unemployment Benefits

- Include unemployment benefits in the calculation of the family's gross annual income.
- Annualize the weekly benefit by multiplying by 52 even if the document shows the benefit end date is sooner than 52 weeks. Clients can request an interim recertification when the benefits end.
- If there are dependent benefits, include these benefits in the calculation of annual unemployment income.
- If the client claims that benefits are ending, the benefit should be annualized. The client may opt for an interim reexamination when the benefits end.

Unemployment Benefits

- Use DUA documents or 5 unemployment benefit check stubs to verify unemployment benefits.
- Clients may call (617) 626-6338 or obtain a benefit letter online at https://uionline.detma.org/Claimant/Core/Login.ASPX (the family will need their SSN to log in).
- Ensure that verification is dated within the past 90 days.
- Bank statements cannot be used to verify unemployment benefits.
- Self-certification cannot be used to verify unemployment benefits.

Unemployment

- When a tenant loses a job and requests a rent reduction due to the job loss, request verification of unemployment benefits to determine if a claim has been or will be filed.
- If a claim has been filed, ensure that the unemployment benefits are included in the income calculation.
- If the benefits are not yet determined, require that the tenant provide updated verification of unemployment upon receipt.

- Using the unemployment benefit statement, what is the amount of unemployment benefits that to include in the family's income?
- Assume that the weekly benefit is consistent.
 - A. \$100/week
 - B. \$345/week
 - **C.** \$445/week
 - D. None of the above

Week Summary

Week Requested

Week Requested

Begin Date: 1/30/2023

End Date: 7/31/2023

Payment Distribution Summary

The payment information displayed is the summary for the week, not the individual payments you received as listed in the Payments Issued Section below.

| | | Payment Amount |
|---------------------------|----------|----------------|
| Weekly Benefit Amount | | \$245.00 |
| Dependent(s) Payment | \$100.00 | |
| Total Additional Payments | | \$100.00 |
| Earnings Deduction | \$0.00 | |
| Total Deductions | \$0.00 | |
| Pre-tax Authorized Amount | | \$345.00 |
| Total Withholdings: | \$0.00 | |
| Total Week Payment Amount | | \$345.00 |

Payments Issued for the Requested Week

The **Weekly Benefit Amount Paid** below displays how much of a payment was for the week above. You may receive multiple payments for 1 week if there are adjustments.

The **Total Payment Amount Issued** displays the total of the payment you received. One payment you receive may include multiple weeks paid.

| Payment Reference Number | Payment Method | Payment Date | Weekly Benefit Amount Paid | Total Payment Amount Issued | Payment Status | Select Link to Request a Replacement Payment |
|--------------------------------|-------------------|-----------------|-------------------------------------|--------------------------------------|-------------------|---|
| **** | Debit card | 3/23/2023 | \$345 | \$345 | Processed | Click to Request |

- Using the unemployment benefit statement, what is the amount of unemployment benefits that to include in the family's income?
- Assume that the weekly benefit is consistent.
 - A. \$100/week
 - B. \$345/week
 - **C.** \$445/week
 - D. None of the above

Week Summary

Week Requested Week Requested

Begin Date: 1/30/2023 End Date: 7/31/2023

Payment Distribution Summary

The payment information displayed is the summary for the week, not the individual payments you received as listed in the Payments Issued Section below.

| | | Payment Amount |
|---------------------------|----------|----------------|
| Weekly Benefit Amount | | \$245.00 |
| Dependent(s) Payment | \$100.00 | |
| Total Additional Payments | | \$100.00 |
| Earnings Deduction | \$0.00 | |
| Total Deductions | \$0.00 | |
| Pre-tax Authorized Amount | | \$345.00 |
| Total Withholdings: | \$0.00 | |
| Total Week Payment Amount | - | \$345.00 |

Payments Issued for the Requested Week

The **Weekly Benefit Amount Paid** below displays how much of a payment was for the week above. You may receive multiple payments for 1 week if there are adjustments.

The **Total Payment Amount Issued** displays the total of the payment you received. One payment you receive may include multiple weeks paid.

| Payment Reference Number | Payment Method | Payment Date | Weekly Benefit Amount Paid | Total Payment Amount Issued | Payment Status | Select Link to Request a Replacement Payment |
|--------------------------------|-------------------|-----------------|-------------------------------------|--------------------------------------|-------------------|---|
| **** | Debit card | 3/23/2023 | \$345 | \$345 | Processed | Click to Request |

 Using the unemployment benefit letter, what is the amount of unemployment benefits that you include in the family's income?

A. \$131/week

B. \$181/week

C. \$263/week

MONETARY REDETERMINATION

You are receiving this monetary redetermination due to new or corrected wage information.

Included in this correspondence are your base period wages and employer(s) according to our records. These wages were used to calculate your Weekly and Maximum Benefit Amounts. The amounts listed are based on wages paid during the base period: 7/1/2022 to 6/30/2023.

| Weekly Benefit Amount: | \$131.00 |
|--|------------|
| Maximum Benefit Amount available during your benefit year: | \$3,442.00 |
| Dependency Allowance: | \$50.00 |
| Additional Compensation: | \$0.00 |

| Benefit Year Effective Date: | 8/27/2022 |
|------------------------------|-----------|
| Benefit Year End Date: | 8/25/2023 |
| Pension Deduction: | \$0.00 |
| Earnings Exclusion: | \$43.67 |
| Average Weekly Wage: | \$263.00 |
| • | |

- Using the unemployment benefit letter, what is the amount of unemployment benefits that you include in the family's income?
- A. \$131/week
- B. \$181/week (ensure the dependency allowance is included)
- **C.** \$263/week

MONETARY REDETERMINATION

You are receiving this monetary redetermination due to new or corrected wage information.

Included in this correspondence are your base period wages and employer(s) according to our records. These wages were used to calculate your Weekly and Maximum Benefit Amounts. The amounts listed are based on wages paid during the base period: 7/1/2022 to 6/30/2023.

| Weekly Benefit Amount: | \$131.00 |
|--|------------|
| Maximum Benefit Amount available during your benefit year: | \$3,442.00 |
| Dependency Allowance: | \$50.00 |
| Additional Compensation: | \$0.00 |
| Benefit Year Effective Date: | 8/27/2022 |
| Benefit Year End Date: | 8/25/2023 |
| Pension Deduction: | \$0.00 |
| Earnings Exclusion: | \$43.67 |
| Average Weekly Wage: | \$263.00 |

 How many weeks would you use in your calculations to annualize the income?

- A. 52 weeks
- B. 26 weeks
- C. Cannot be determined

MONETARY REDETERMINATION

You are receiving this monetary redetermination due to new or corrected wage information.

Included in this correspondence are your base period wages and employer(s) according to our records. These wages were used to calculate your Weekly and Maximum Benefit Amounts. The amounts listed are based on wages paid during the base period: 7/1/2022 to 6/30/2023.

| Weekly Benefit Amount: | \$131.00 |
|--|------------|
| Maximum Benefit Amount available during your benefit year: | \$3,442.00 |
| Dependency Allowance: | \$50.00 |
| Additional Compensation: | \$0.00 |
| 1 | |

| Benefit Year Effective Date: | 8/2//2022 |
|------------------------------|-----------|
| Benefit Year End Date: | 8/25/2023 |
| Pension Deduction: | \$0.00 |
| Earnings Exclusion: | \$43.67 |
| Average Weekly Wage: | \$263.00 |
| | |

 How many weeks would you use in your calculations to annualize the income?

- A. 52 weeks
- B. 26 weeks
- C. Cannot be determined

MONETARY REDETERMINATION

You are receiving this monetary redetermination due to new or corrected wage information.

Included in this correspondence are your base period wages and employer(s) according to our records. These wages were used to calculate your Weekly and Maximum Benefit Amounts. The amounts listed are based on wages paid during the base period: 7/1/2022 to 6/30/2023.

| \$131.00 |
|------------|
| \$3,442.00 |
| \$50.00 |
| \$0.00 |
| |

| Benefit Year Effective Date: | 8/2//2022 |
|------------------------------|-----------|
| Benefit Year End Date: | 8/25/2023 |
| Pension Deduction: | \$0.00 |
| Earnings Exclusion: | \$43.67 |
| Average Weekly Wage: | \$263.00 |
| | |

Using the online printout, what amount should you use to calculate this client's unemployment income?

- A. \$350/week
- B. \$5,450/year
- C. \$298/week

Claim Information

10/17/2022 Claim Filed Date: Approved Dependents:

Overpayment Balance: \$0.00 Federal Tax Withholding: 0.00% State Tax Withholding: 0.00%

Click here to see your claim history

Potential Benefits by Program

| Program | Effective Begin Date | Effective End Date | Weekly Benefit Amount | Balance |
|------------|----------------------|--------------------|-----------------------|------------|
| Regular UI | 10/16/2022 | 10/15/2023 | \$350.00 | \$5,450.00 |

Payment Option:

Debit card

Payment Request Status

Select the Week End Date to view details of the week.

Select Update Earnings to view and update earnings for the week.

Your potential payment may change due to additional activity on your claim.

To view the information about the overpayment, select Mange Debt and Overpayment History

| | | | | | | | | | , | | | | | |
|--------------|---------------|-------|---------|---------|---------|---------|----------|--------|--------|------------|----------|----------|----------|-----------|
| Benefits | Week End | Claim | Current | Request | Current | Reason | Weekly | Addi- | Deduc- | Pre Tax | With- | Overpaid | Payment | Issued |
| Request Date | Date (View | ld | Program | Type | Week | | Benefit | tions | tions | Authorized | holdings | Amount | Amount | Payment |
| | Week Details) | | | | Status | | Amount | | | Amount | | | Issued | Status |
| 11/14/2022 | 11/15/2022 | 2022 | Regular | | Paid | | \$350.00 | \$0.00 | \$0.00 | \$350.00 | \$0.00 | \$0.00 | \$350.00 | Processed |
| | | -01 | Ul | | | | | | | | | | | |
| 11/07/2022 | 11/08/2109 | 2022 | Regular | | Paid | | \$350.00 | \$0.00 | \$0.00 | \$350.00 | \$0.00 | \$0.00 | \$350.00 | Processed |
| | | -01 | Ul | | | | | | | | | | | |
| 10/31/2022 | 11/01/2022 | 2022 | Regular | | Paid | | \$350.00 | \$0.00 | \$0.00 | \$350.00 | \$52.00 | \$0.00 | \$298.00 | Cleared |
| | | -01 | UL | | | | | | | | | | | |
| 10/24/2022 | 10/25/2022 | 2022 | Regular | | Not | Waiting | \$350.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | No |
| | | -01 | Ul | | Paid | Week | | | | - | | | | Payment |
| | | | | | | | | | | | | | | |

Using the online printout, what amount should you use to calculate this client's unemployment income?

- A. \$350/week
- B. \$5,450/year
- C. \$298/week

Claim Information

Claim Filed Date: 10/17/2022

Overpayment Balance: \$0.00 Federal Tax Withholding: 0.00% State Tax Withholding: 0.00%

Click here to see your claim history

Potential Benefits by Program

| Program | Effective Begin Date | Effective End Date | Weekly Benefit Amount | Balance |
|------------|----------------------|--------------------|-----------------------|------------|
| Regular UI | 10/16/2022 | 10/15/2023 | \$350.00 | \$5,450.00 |
| | | | | |

Approved Dependents:

Payment Option:

Debit card

Payment Request Status

Select the Week End Date to view details of the week.

Select Update Earnings to view and update earnings for the week.

Your potential payment may change due to additional activity on your claim.

To view the information about the overpayment, select Mange Debt and Overpayment History

| 10 11011 | To view the information about the overpayment, select mange best and overpayment rustory | | | | | | | | | | | | | |
|-----------|--|-------|---------|---------|---------|---------|----------|--------|--------|------------|----------|----------|----------|-----------|
| Benefit | ts Week End | Claim | Current | Request | Current | Reason | Weekly | Addi- | Deduc- | Pre Tax | With- | Overpaid | Payment | Issued |
| Request [| Date (View | / Id | Program | Type | Week | | Benefit | tions | tions | Authorized | holdings | Amount | Amount | Payment |
| | Week Details | s) | | | Status | | Amount | | | Amount | | | Issued | Status |
| 11/14/20 | 22 11/15/2022 | 2022 | Regular | | Paid | | \$350.00 | \$0.00 | \$0.00 | \$350.00 | \$0.00 | \$0.00 | \$350.00 | Processed |
| | | -01 | UI | | | | | | | | | | | |
| 11/07/20 | 22 11/08/2109 | 2022 | Regular | | Paid | | \$350.00 | \$0.00 | \$0.00 | \$350.00 | \$0.00 | \$0.00 | \$350.00 | Processed |
| | | -01 | UL | | | | | | | | | | | |
| 10/31/20 | 22 11/01/2022 | 2022 | Regular | | Paid | | \$350.00 | \$0.00 | \$0.00 | \$350.00 | \$52.00 | \$0.00 | \$298.00 | Cleared |
| | | -01 | UL | | | | | | | | | | | |
| 10/24/20 | 22 10/25/2022 | 2022 | Regular | | Not | Waiting | \$350.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | No |
| | | -01 | Ul | | Paid | Week | | | | | | | | Payment |

Worker's Compensation and Other Disability Income

Worker's Compensation & Other Disability Income

- Benefit letters or payment receipts can be used to worker's compensation and other disability income.
- If not available a third-party verification form can be used.
- Bank statements cannot be used to verify worker's compensation and other disability income.
- Self-certification may **not** be used to verify workers' compensation and other disability income.

Contributions or Gifts

Contributions or Gifts

- A notarized letter from the gift giver can be used to verify gifts.
- If not available, a third-party verification form can be used.
- Include regularly recurring contributions or gifts received from nonhousehold members in the calculation of gross income.
- To be regularly recurring a contribution or gift must:
 - Occur at least twice a year for two or more years; or,
 - Occur once a year from year to year for two or more years if the gift is in excess of \$2,000.
- Note that when income is received via a cash app for goods/services/wages, it should be included as self-employment income, not as a gift.

Rene reports regular contributions of \$50/month from a family member and provides a Venmo screenshot to verify this. What should staff do next?

- A. Accept the verification and include/annualize the reported income.
- B. Ask Rene how long they've received the contribution and request documentation of how long the contribution has been received, such as a Venmo statement covering the last two years.
- C. Ignore the screenshot since cash app contributions are not considered income.

Rene reports regular contributions of \$50/month from a family member and provides a Venmo screenshot to verify this. What should staff do next?

- A. Accept the verification and include/annualize the reported income.
- B. Ask Rene how long they've received the contribution and request documentation of how long the contribution has been received, such as a Venmo statement covering the last two years.
- C. Ignore the screenshot since cash app contributions are not considered income.

Contributions or Gifts

• Self-certification can only be used if higher forms of verification are not available, i.e., notarized letter from the gift giver or third-party form sent to the gift giver.

Sporadic or Seasonal Income

- Additional verification may be needed for income that is sporadic, seasonal or highly variable.
- Example: Alvina works for the local school district in the lunchroom. She is paid weekly, and her gross weekly pay is \$300. She does not work during the summer or school vacations and does not receive unemployment during those times. In total she works 38 weeks per year. Her anticipated annual income is \$11,400 (\$300 x 38 weeks).
 - \$11,400 should be used when determining her eligibility and calculating her Tenant Rent Share and should **not** be adjusted based on whether or not she is currently working.

Zero Income

Zero-Income

- A zero-income family is one in which no family members report any income, benefits, or contributions.
- Receipt of SNAP benefits is not considered income for the purposes of zero-income verification and therefore receipt of SNAP benefits as the only source of family income qualifies a family as a zeroincome household if no other income is received.

Zero-Income Definition

- Families with other fully-excluded income (and no additional income) will not be considered zero-income.
 - For example: Families with only excluded full-time student income are not considered zero-income families.

The Farrah family reports a small gross income, but their net income after adjustments is \$0. Would the family be considered a zero-income family?

A. Yes

B. No

The Farrah family reports a small gross income, but their net income after adjustments is \$0. Would the family be considered a zero-income family?

A. Yes

B. No

Zero Income

• There are different requirements for zero-income families and zero-income individuals.

Zero Income Individuals

 For any adult household member claiming zero income, the household member must sign a statement acknowledging that they are claiming zero income.

Zero Income Families

- If an entire household is claiming zero income, each adult household member must sign a statement acknowledging zero income.
- Contact the household every six months to inquire about the household's current income situation and request updated bank statements. All deposits shall be discussed with the household.
- Verify income of all adult household members claiming zero income with the Department of Unemployment Assistance and the Department of Transitional Assistance (DTA) every six months.

Zero-Income Family – Increase in Income

• If an entire household is zero income, all increases in income, including earned income, must be considered and an interim reexamination must be performed to include the new income.

- The Ramirez family consists of Jose, a 70-year-old head of household, and his 23-year-old grandson Eric. Eric is a full-time student (which has been verified), and works part-time, earning \$22,000/year. The household has no other income.
- Since Eric's income is excluded, is the family considered zero income?
- A. Yes
- B. No

- The Ramirez family consists of Jose, a 70-year-old head of household, and his 23-year-old grandson Eric. Eric is a full-time student (which has been verified), and works part-time, earning \$22,000/year. The household has no other income.
- Since Eric's income is excluded, is the family considered zero income?
- A. Yes
- B. No. Families with fully excluded income (other than SNAP) are NOT considered zero income and are not subject to zero income requirements.

- How often is income verification with the DUA and DTA required for zero-income families?
 - A. Every 3 months
 - B. Every 6 months
 - C. Every 12 months
 - D. Only at regular reexams

- How often is income verification with the DUA and DTA required for zero-income families?
 - A. Every 3 months
 - B. Every 6 months, and take action for unreported income
 - C. Every 12 months
 - D. Only at regular reexams

Foster Care Payments

Foster Care Payments

- Payment receipts and bank statements are acceptable verification of foster care payment.
- Annualize the foster care payments and include them in the household's gross income.

Assets

What are Assets?

- Assets include, but are not limited to, the following:
 - All money held in cash, saving, checking, money market or similar account;
 - The market value of equity in real property, stocks, bonds or other form of capital investment, whether person or business;
 - The value of equity in personal property such as boats, recreational vehicles, and luxury goods. Value is determined by taking the higher of the insured value or appraised market value;
 - Payment received or scheduled in settlement of personal or property loss;

What are Assets?

- Assets include, but are not limited to, the following (continued):
 - Money at interest and debts due to an Applicant by any person(s);
 - The value of a cash surrender insurance policy;
 - The value of any personal or business asset disposed of by any household member (including the disposition in trust) for less than fair market value during the two years prior to determination of eligibility. The value of such assets is the difference between the fair market value and the consideration received; and
 - The value of any interest in a trust fund benefitting any adult Household member.

What are Assets?

- Assets do not include the following:
 - Any automobile used as a primary means of transportation by one or more household members;
 - Money in an Individual Retirement Account, 401(k), pension, or similar retirement account subject to IRS regulation; and
 - The value of any interest in a special needs trust, as defined by state and federal law.
- Please note that the pension/retirement accounts and special needs trusts do not count towards the asset cap at eligibility.

Assets

- When determining net household income, consider only income from assets when the total combined value of all household assets is **over \$5,000**.
- Assets include all bank accounts, stocks and bonds, trusts, real estate, etc.

Calculating Asset Value

- The market value of an asset is its worth in the market; however, for real estate, the market value is the equity in the property.
 - The value of an investment account,
 - Equity in real property
 - Equity = Appraised value of the property minus debt.
 - Current savings account balance.
- When calculating assets, use the market value of the asset.

Bank or Credit Union Accounts

 To calculate the value of a bank account (checking, savings, or credit union account), use the current balance on the current bank statement or the amount provided by the bank on the third-party form.

Self-Attestation of Assets

- When determining net Household income, consider income from assets only when the total value of household assets is over \$5,000.
- Households may self-attest that they do not have more than \$5,000 in assets using the Asset Self-Attestation Form.
- If a Household self-attests that they do not cumulatively have more than \$5,000 in assets, the AA shall only request bank statements if there is other reason to do so.
 - For example, if the entire Household has zero income.

Revised 2022

Asset Self-

Attestation Form

Training Module #2

Commonwealth of Massachusetts Department of Housing and Community Development Massachusetts Rental Voucher Program ASSET SELF-ATTESTATION

Massachusetts Rental Voucher Program counts actual income from assets over \$5,000. If you have less than \$5,000 in assets, you may not be required to provide verification of your assets, such as bank statements. Head of Household: Is the value of all household assets more than \$5.000? □ No Regardless of value, please list the monetary amount of all assets below. Description Asset Value Actual Income from Asset Checking accounts Saving accounts Stocks and/or bonds Cash value of life insurance policies **Burial plots** Inheritances, lottery winnings, insurance settlements Lump sum payments from insurance settlements or legal claims Cash value of trusts IRA, Keough, or other retirement savings Real property total equity Personal property held as an investment, such as gems, jewelry, coins, antique cars Assets disposed of at less than fair market value within past 2 Years Other: Total I certify to ______(AA) that information given to DHCD on my household's assets is accurate and complete to the best of my knowledge and belief. I understand that false statements or information may result in investigation and possible prosecution for fraud and/or in the termination of my participation in the Massachusetts Rental Voucher Program.

Date

132

Signed under the Pains and Penalties of Perjury.

Signature of Head of Household

Exhibit 8.2: Asset Self-Attestation

Assets

• If the Household has more than \$5,000 in assets, they must supply at least 2 consecutive months of bank statements.

What asset income amount is included in the Harris family's income calculations if the family's assets include:

- Savings account with a balance of \$2,500 earning interest of \$25/year.
- Checking account with a balance of \$1,777 earning no interest.
- A. \$0
- B. \$25
- **C**. \$3

What asset income amount is included in the Harris family's income calculations if the family's assets include:

- Savings account with a balance of \$2,500 earning interest of \$25/year.
- Checking account with a balance of \$1,777 earning no interest.
- A. \$0, since total assets are less than \$5,000
- B. \$25
- **C**. \$3

Part II: Verification of Non-Income Factors

Custody or Guardianship

Custody or Guardianship

- The AA must receive any relevant custody or guardianship paperwork for minors. Acceptable documentation may include:
 - Notarized letter by the minor's guardian
 - Foster care agreement
 - Letter from the Department of Human Services
 - Letter from foster care agency

Custody or Guardianship

- If a minor is being added to the household (other than through birth to an existing household member), the AA must receive paperwork granting custody of the child to a household member.
- For the purposes of MRVP, custody does not need to be determined by a court and may be granted in a notarized letter by the minor's guardian.
- In some cases involving foster or adopted children, the Head of Household may not have a minor's Social Security number and/or birth certificate. The AA may waive the requirement for the documents if it verifies with the foster or adoption agency that the documents were not given to the Head of Household.

Deductions

- MRVP Households are eligible to have deductions from income considered when calculating tenant rent. The deductions a household is eligible for varies according to their household type, composition, and other factors.
- Any deductions used in calculating a Household's net income must be verified.

Types of Deductions

- Deductions
 - Elderly/Disabled
 - Medical Expenses
 - Work-Related Day-Care Costs
 - Tuition & Fees
 - Child Support/Alimony Payments
 - Personal Care Expenses
 - Travel Expenses

Elderly/Disabled Deduction

- Households that contain at least one member who is at least 62 years old (elderly) or disabled will be eligible for a deduction equal to 5% of the household's gross income.
- In order to be eligible for the elderly/disabled deduction, the AA must have verification that at least one Household member is at least 62 years old and/or disabled.

Verification of Age (Elderly Status)

- Age can be verified through the household member's date of birth verification.
- The household member must be age 62 or older as of the date of the certification in order to be eligible for the deduction.
- The elderly household member can be any member of the household (not limited to just the head of household).

Verification of Disability

- An individual is considered to have a disability if they:
 - Have a physical or mental impairment which substantially limits one or more major life activities of a person;
 - Have a record of having such impairment; or
 - Are being regarded as having such impairment.
- Current, illegal use of a controlled substances is **excluded** from the definition of an individual with a disability. However, a past history of substance abuse may be considered a disability.

- Self-certification may not be used to verify disability status, unless the disability is obvious or otherwise known.
- If a person's disability is obvious or otherwise known and if the need for the requested accommodation is also readily apparent or known, no further verification is required.

- Receipt of EAEDC, SSP, SSI, and/or SSDI benefits is sufficient to demonstrate an individual meets the definition of disability used by MRVP.
- If the individual does not receive EAEDC, SSP, SSI or SSDI: third-party verification must be obtained from an individual identified by the household who is competent to make the determination.
- Verification of a disability may be provided by a doctor or other medical professional, a peer support group, a non-medical service agency, or a reliable third-party who is in a position to know about the individual's disability.

- When verifying a disability, request only information that is necessary to evaluate the disability-related need for the accommodation. Do not inquire about the nature or extent of any disability.
- Do not accept or retain medical records in the participant file.

- If confidential information about a person's specific diagnosis, treatment, or the nature or severity for the disability, is received, dispose of the information.
- In place of the information, note in the file that the disability and other requested information have been verified, the date the verification was received, and the name and address of the knowledgeable professional who sent the information.
- Follow the confidentiality policies in the Admin Plan.

Other Deductions: General Verification Requirements

- Use the household's actual expenditures over the past year, to determine their future actual expenditures.
- Where insurance premiums are concerned, used a current benefit letter and annualize.
- Generally, if the deduction is being automatically withheld from pay or benefits, a detailed pay stub or benefit letter is sufficient verification.
- If third-party documents cannot be provided to verify the deduction, send a written third-party verification form to the provider.
- Attempts to obtain third-party verification must be documented before any lower forms of verification can be accepted.

Medical Expense Verification

Medical Expense Deduction

- MRVP follows IRS Publication 502 to determine what medical expenses are allowable, with the exception that households may deduct expenses for:
 - Assistance and support animals (not just guide dogs and service animals), and
 - Medical marijuana that has been prescribed in accordance with state law.
- All eligible medical expenses over 3% of the Household's gross annual income may be deducted from the Household's gross income.
- Medical expenses include all eligible expenses that are not covered by insurance or otherwise unreimbursed from any source.

Medical Expense Deduction

- Health insurance premiums are considered medical expenses.
- The Household does not need to have either elderly or disabled members in order to receive this deduction.
- Except for insulin, do not include medical expenses amounts for a drug that isn't prescribed. A prescribed drug is one that requires a prescription by a doctor for its use by an individual.

Medical Expense Verification

The following types of verification of medical expenses may be used:

- Receipt showing payment made;
- Pay stubs showing insurance premiums paid;
 - Medical, vision and dental insurance premiums can be deducted

Verifications must show whether payments were made in the previous 12-month period.

- Payments for the care of child(ren), defined as minors ages 12 or under, or of a sick or incapacitated household member.
- Child care expenses may be deducted from the Household's gross income if the care is necessary for the employment of another Household member who would otherwise have provided such care.
- Before allowing deduction of unreimbursed childcare expenses, a family must first certify that they are eligible to deduct the unreimbursed expenses.

 To be eligible for the deduction for the care of a sick or incapacitated household member, obtain verification from a knowledgeable provider that the individual cannot be left alone due to their sick/incapacitated status.

- To be eligible for child care deduction:
 - The child being cared for (including foster children) age 12 and under.
 - The costs claimed are not reimbursed by any source.
 - The costs enable a family member(s) to work.
 - The costs are for an allowable type of child care and are reasonable.
 - Reasonable means consistent with the rate of subsidized care in the area as well as reasonable in terms of hours claimed for care.
 - The child care provider is not an assisted family member.
 - Amounts must be verified.

- The child care schedule must correspond to the claimed employment.
 - A family cannot deduct 40 hours of child care for a family member who works 10 hours per week
- For school age children, verify that the costs are not for child care during standard school hours.
- Upon verifying that a family is eligible for the child care deduction, verify the actual cost incurred by the family.

Child Care Vouchers

- Eligible families may receive subsidies from the State of Massachusetts to help cover the cost of child care.
- If eligible, participants receive a child care voucher based on the family's income and size.
- In some cases, parents/guardians must pay a parent fee or copayment based on income and family size.
- The parent fee on the voucher is a daily amount.

Verification of Work-Related Day-Care Costs

- Paid receipts
- Invoices showing payments received
- Notarized letter (if care is provided in the home)
- Verify age of minor
- Verify employment of person who is able to work (pay stubs)

Which of the following situations qualify for the deduction?

| No. | Situation | Qualifies? |
|-----|--|------------|
| 1 | Sadie works full time and pays \$100/week for her 2-year-old to attend day care | |
| 2 | Jasmine attends school part time and pays \$50 a week for her neighbor to watch her 7-year-old son while she is in class | |
| 3 | Lorinda works full time and pays her mother (who lives with her) to watch her two children, ages 8 and 9 | |
| 4 | Mimi works full time, and pays \$75/week for her 14-year-old to be in an afterschool program | |
| 5 | Betty is working, and pays \$90/week for her 4-year-old to be in day care, even though her mother (who lives with her) is retired. | |

Which of the following situations qualify for the deduction?

| No. | Situation | Qualifies? |
|-----|--|------------|
| 1 | Sadie works full time and pays \$100/week for her 2-year-old to attend day care | Yes |
| 2 | Jasmine attends school part time and pays \$50 a week for her neighbor to watch her 7-year-old son while she is in class | |
| 3 | Lorinda works full time and pays her mother (who lives with her) to watch her two children, ages 8 and 9 | |
| 4 | Mimi works full time, and pays \$75/week for her 14-year-old to be in an afterschool program | |
| 5 | Betty is working, and pays \$90/week for her 4-year-old to be in day care, even though her mother (who lives with her) is retired. | |

Which of the following situations qualify for the deduction?

| No. | Situation | Qualifies? |
|-----|--|------------|
| 1 | Sadie works full time and pays \$100/week for her 2-year-old to attend day care | Yes |
| 2 | Jasmine attends school part time and pays \$50 a week for her neighbor to watch her 7-year-old son while she is in class | No |
| 3 | Lorinda works full time and pays her mother (who lives with her) to watch her two children, ages 8 and 9 | |
| 4 | Mimi works full time, and pays \$75/week for her 14-year-old to be in an afterschool program | |
| 5 | Betty is working, and pays \$90/week for her 4-year-old to be in day care, even though her mother (who lives with her) is retired. | |

Which of the following situations qualify for the deduction?

| No. | Situation | Qualifies? |
|-----|--|------------|
| 1 | Sadie works full time and pays \$100/week for her 2-year-old to attend day care | Yes |
| 2 | Jasmine attends school part time and pays \$50 a week for her neighbor to watch her 7-year-old son while she is in class | No |
| 3 | Lorinda works full time and pays her mother (who lives with her) to watch her two children, ages 8 and 9 | No |
| 4 | Mimi works full time, and pays \$75/week for her 14-year-old to be in an afterschool program | |
| 5 | Betty is working, and pays \$90/week for her 4-year-old to be in day care, even though her mother (who lives with her) is retired. | |

Which of the following situations qualify for the deduction?

| No. | Situation | Qualifies? |
|-----|--|------------|
| 1 | Sadie works full time and pays \$100/week for her 2-year-old to attend day care | Yes |
| 2 | Jasmine attends school part time and pays \$50 a week for her neighbor to watch her 7-year-old son while she is in class | No |
| 3 | Lorinda works full time and pays her mother (who lives with her) to watch her two children, ages 8 and 9 | No |
| 4 | Mimi works full time, and pays \$75/week for her 14-year-old to be in an afterschool program | No |
| 5 | Betty is working, and pays \$90/week for her 4-year-old to be in day care, even though her mother (who lives with her) is retired. | |

Which of the following situations qualify for the deduction?

| No. | Situation | Qualifies? |
|-----|--|------------|
| 1 | Sadie works full time and pays \$100/week for her 2-year-old to attend day care | Yes |
| 2 | Jasmine attends school part time and pays \$50 a week for her neighbor to watch her 7-year-old son while she is in class | No |
| 3 | Lorinda works full time and pays her mother (who lives with her) to watch her two children, ages 8 and 9 | No |
| 4 | Mimi works full time, and pays \$75/week for her 14-year-old to be in an afterschool program | No |
| 5 | Betty is working, and pays \$90/week for her 4-year-old to be in day care, even though her mother (who lives with her) is retired. | Yes |

Tuition & Fees

Full-Time Student

- Under MRVP, a *full-time student* is a Household member:
 - Between the ages of 18 and 25,
 - Who is the dependent of another Household member (not the Head of Household), and
 - Who is enrolled in and attending an accredited educational or vocational institutional and is carrying a course load that is considered full-time for students under the standards and practices of the institution.

Tuition Deduction

- The tuition deduction applies to unreimbursed payments for tuition and fees for vocationally related post-secondary education for a household member, including the HOH, who are **not** FT students as defined by MRVP.
- Tuition deduction is applicable to tuition and fees for:
 - Part-time students, and
 - Full-time students over the age of 25.
- Each individual institution defines full- and part-time status. Credit hours may be different.
- Vocationally related, post-secondary education may include community colleges, career/technical schools, vocational/trade schools, centers for continuing education, campus transition programs, and apprenticeship program.
- Vocationally related is defined as education that is directly related to a specific career.

Verification of Tuition Deduction

- Verify that the program is a vocationally related, post-secondary program using school curriculum information.
- Verify student status using:
 - A third-party form or letter from educational institution, or
 - And invoice showing payment from the educational institution.
- If this is verified during the summer, verify enrollment for the coming term.
- Deduct only unreimbursed tuition which has been paid by the participant.

Support Payments

Support Payments

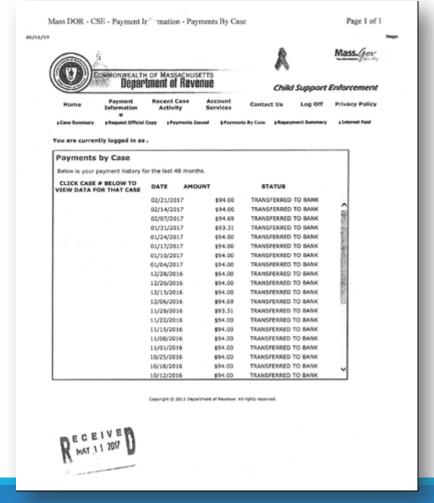
- Payments for support of a minor child, spouse or ex-spouse not residing in the household may be deducted.
- Only deduct support payments that are paid, even if the payments are more or less than the court-ordered amount.
- Follow the same calculation guidelines for court-ordered child support income when calculating court-ordered child support payment deductions.
- Average the last 6 full months of actual payments.

Court-Ordered Support Payments

Court-ordered support may be verified using Massachusetts
Department of Revenue (DOR) printout, provided by the client,
showing the payment history.

Court-Ordered Support

- Use the printout from the MA Dept.
 of Revenue (DOR) as the first
 resource to verify and calculate court
 ordered support.
- The printout can be accessed by the client using their ID and PIN.



Support Payments – Not Court-Ordered

- Verify using:
 - Copies of checks/money orders from the providing adult.
 - Third-party form completed by the person providing the support.
 - Use the same guideline for the number of required checks/money orders as with pay stubs.

Verification of Support

- Self-certification may NOT be used to verify court-ordered support.
- Self-certification may be used to verify non-court-ordered support only if higher forms of verification are not available.

Personal Care Expenses

Personal Care Expenses

- Non-reimbursable payment for reasonable and necessary housekeeping or personal care services for a Household member may be deducted from the Household's gross income.
- The disabled Household member must be unable to perform the housekeeping or personal care tasks due to a disability.
- No other Household member may be reasonably available to perform these services.
- If the other members of the household are working, this expense is allowed.

Personal Care Expenses

- Verify unreimbursed payments for necessary housekeeping or personal care services.
- Verify that no other household member is available to perform the services.
- Obtain copies of:
 - Paid invoices;
 - Paid receipts.

Travel Expenses

Travel Expenses

- Deduct from gross income, travel expenses, in excess of the cost of the least expensive available transportation, for a Household member with a disability.
- Generally, the least expensive method is the "T" or the bus.
- The disabled Household member must be unable to use the least expensive available transportation due to their disability.
 - For example, if the household member is wheelchair-bound and the least expensive form of transportation is the "T", the household member would be justified in taking a cab to the grocery store. If the "T" is \$5 and the cab costs \$20, \$15 would be the travel deduction.
- Additionally, the transportation must be used for necessary activities which cannot be performed by another Household member.
 - For example, the household would get a transportation deduction for transportation to the laundromat.

Travel Expenses Verification

- Verify that the household member is unable to use the least expensive mode of transportation.
- Verify the actual travel cost incurred.
- Verify the cost of the least expensive travel option; for example:
 - Get an Uber estimate,
 - Confirm the cost of a ticket for the T or bus,
 - Call a cab company and get an estimate.
- Verify that the transportation was used for necessary activities which cannot be performed by another household member.
 - Determine that the receipts for travel and the necessary activity are on the same date and that the activity is in fact necessary.

Questions?

Key Takeaways

- All information that a Household is required to submit for MRVP, including documentation of income, assets, household composition, expenses, disability status, and other information must be verified by the AA.
- Generally, all information provided must be no more than 90 days old (except for Social Security and/or certain other SSA income as discussed)
- AAs shall conduct a Wage Match for every adult Household member (aged 18 and over) who has a Social Security number.

Key Takeaways

- For all types of income or assets required to be verified by the AA, if an applicant/participant provides acceptable documentation (i.e., written third-party verification) to verify a source of income or assets, the AA does not need to make additional attempts to independently verify income or assets.
- Oral verification is not required; however, it can be used to clarify information provided in writing by third party or as independent verification when written third-party verification is not received.
- Self-certification is only allowable in certain circumstances, as described here, and only once third-party verification has been attempted.

Key Takeaways

- MRVP Households are eligible to have deductions from income considered when calculating tenant rent. The deductions a household is eligible for varies according to their household type, composition, and other factors.
- Any deductions used in calculating a Household's net income must be verified.

Acceptable Documentation for Common Sources of Income

| Income Source | Acceptable Documentation | Unacceptable Documentation |
|---|--|---|
| Earned Income | Pay stubs (5 weekly, 3 biweekly or bimonthly, 2 monthly) | Offer letter, Salary letter, Projected earnings, Bank statement |
| Self Employment | Tax return, Business ledger | Bank statement |
| Social Security | Annual Benefit letter | Bank statements |
| SSI or SSDI | If no other income change, annual benefit letter If income changes, benefit letter < 90 days old | Bank statements |
| SSP | Bank statement, Benefit letter | |
| Child Support & Alimony | DOR Printout (child support), notarized letter from parent paying support, personal checks, bank statements Self-attestation only if no other verification available | Court order |
| TANF | Benefit letter | Bank statements |
| EAEDC | Benefit letter | Bank statements |
| Food Stamps | Verification not required | |
| Unemployment | 5 check stubs w/ deductions, DUA Printout | Bank statement |
| Worker's Compensation or Other Disability Income | Benefit letter, Payment receipts | Bank statement |
| Gifts | Notarized letter from gift giver | |
| Foster Care Payments | Payment receipts, Bank statements | |
| Assets | Self-attestation of < \$5,000 in assets Two months of account statements | |

Deductions

| Deduction Type | Description | Verification |
|----------------------------------|--|---|
| Elderly/Disabled | 5% deduction from gross income if any member of household is over age 62 or disabled. | Proof of age (DOB verification) Receipt of EAEDC, SSP, SSI, or SSDI Letter from knowledgeable third-party |
| Medical Expense | Unreimbursed medical expenses (over 3% of household gross income). Household does not need to be elderly or disabled to receive deduction | Receipt showing payment made Pay stubs may be used for insurance premiums Medical, vision and dental insurance premiums can be deducted |
| Work-Related Day-Care Costs | Childcare for minors 12 and under or for sick or incapacitated household member to enable another household to be employed | Paid receipts Invoices showing payments received Notarized letter (if care is provided in the home) Verify age of minor |
| Tuition Deduction | Unreimbursed payments for tuition and fees for vocationally related post-secondary education for a household member, including the HOH, who is not a full-time student | Third party form, letter, or invoice from educational institution |
| Child Support / Alimony Payments | Payments for support of a minor child, spouse or ex-spouse not residing in the household | Receipts or printouts from court showing payment |
| Personal Care Deduction | Unreimbursed payments for necessary housekeeping or personal care services | Paid invoice or paid receipts Verify that no other household member is available to perform the services |
| Travel Expenses | Unreimbursed travel expenses, in excess of the cost of the least expensive available transportation, for a household member with a disability | Verify that the household member is unable to use the least expensive mode of transportation and that transportation was used for necessary activities which cannot be performed by another household member. |

Upcoming Sessions

| # | Topics | Admin Plan Chapter(s) | Date |
|----|--|-----------------------|------------|
| 1. | Training Introduction, MRVP Regulations & Governance Eligibility, Issuance Briefing & Voucher | Chapters 1, 4, 6 | March 2023 |
| 2. | • Verification | Chapters 7-8 | March 2023 |
| 3. | Calculation of Voucher Payment & Tenant Rent Share | Chapter 7 | April 2023 |
| 4. | General Leasing Procedures & MRVP Lease Addendum | Chapters 9-10 | April 2023 |
| 5. | Voucher Payment ContractRent Reasonableness & Rent Increases | Chapters 11 & 12 | May 2023 |
| 6. | Relocation & Project Based Voucher Transfers | Chapters 12 & 14 | May 2023 |
| 7. | Redetermination of Tenant Rent Share | Chapter 16 | June 2023 |
| 8. | Terminations & Grievances | Chapter 17 | June 2023 |
| 9. | Program Administration & Program Integrity | Chapters 18-19 | July 2023 |



Thank you for your participation!