



## **Title 18: Mississippi Department of Human Services**

### **Part 24: Low-Income Home Energy Assistance Program (LIHEAP) Policy Manual**

MISSISSIPPI DEPARTMENT OF HUMAN SERVICES

DIVISION OF COMMUNITY SERVICES

200 SOUTH LAMAR STREET

JACKSON, MISSISSIPPI 39201

Telephone: (601) 359-4768

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## **Part 24 Chapter 1: Introduction**

The Low-Income Home Energy Assistance Program (LIHEAP) is administered by the Division of Community Services (DCS) at the Mississippi Department of Human Services (MDHS). LIHEAP is designed to provide appropriate and timely assistance to eligible households by paying home energy bills and assisting with other energy related services. LIHEAP provides federal funds to subsidize the cost of energy bills for low-income families throughout the state of Mississippi. Information contained in this manual is in compliance with the Omnibus Budget Reconciliation Act of 1981, DHHS-OCS regulations, MDHS policies and procedures, and the LIHEAP state plan.

\*Due to technical aspects of the LIHEAP Weatherization program (WX) a separate manual is required.

### **Rule 1.1 Legal Authority.**

LIHEAP is authorized by the Low-Income Home Energy Assistance Act of 1981 (under Title XXVI of the Omnibus Budget Reconciliation Act of 1981, as amended.)

- A. Statute- Sections of the LIHEAP statute are listed below as amended through August 1, 1999. The LIHEAP statute was amended in 2005 by Subtitle B of the Energy Policy Act of 2005 (Public Law 109-58) which reauthorized LIHEAP through FY 2007. The LIHEAP statute is in the United States Code at: 42 U.S.C. § 8621-8630 (2008).
- B. Regulations- The HHS regulations for the LIHEAP block grant are found in Title 45 (Public Welfare) of the Code of Federal Regulations, Part 96 (Block Grants)(45 CFR 96)

*Source: 45 CFR 968; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

### **Rule 1.2 Program Purpose.**

The purpose of LIHEAP is to provide appropriate and timely assistance to eligible households to pay home energy bills and to assist with other energy related services. The amount of financial assistance an eligible household will receive will be determined by the amount of the bill at the particular time the bill is due. Assistance will be provided in the form of payments made directly to energy vendors on behalf of eligible households.

- A. LIHEAP is offered in each of the 82 counties in Mississippi, pending the availability of funds. Once income eligibility criteria are established, priority is then given to vulnerable households. Vulnerable households include those households with members who are elderly, disabled, or with children age 5 or younger.

The State of Mississippi may elect to use up to 12% of the state's LIHEAP allocation for

LIHEAP Weatherization (WX). \*The administration of LIHEAP WX follows the Department of Energy rules for weatherization. The eligibility criteria for LIHEAP WX is 200% of the federal poverty guidelines.

- B. Subgrantees are required to refer households with high energy bills to the weatherization program. WX funds are used to improve the conditions of eligible clients' homes. The program is designed to reduce home heating and cooling costs by improving energy efficiency and ensuring health and safety. Priority is given to low-income elderly, disabled individuals and households with children five (5) or younger.
- C. Program Operation Dates: LIHEAP is available year-round based on availability of funds. Clients are eligible to receive heating and cooling assistance regardless of season.
- D. The State allocates ten percent (10%) of the total state allocation for administrative cost and ninety percent (90%) for program cost. Administrative cost refers to the cost of central executive functions that do not directly support a specific project or service. The Cost are incurred for common objectives that benefit multiple programs administered by the organization and are not readily assignable to a particular funding stream.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: ~~May 2022~~ January 2026

**Rule 1.3 Manual Purpose.**

The purpose of this manual is to provide program policy to clients, subgrantees and the public, in order to implement a range of services and activities having a measurable and potentially major impact on the causes of poverty in the State of Mississippi. This manual provides clear policies for implementing LIHEAP. Subgrantees must comply with the rules and guidelines set forth in this manual, and all applicable Federal and State laws, policies and procedures

MDHS reserves the right to alter any policy during emergencies such as natural disasters, pandemics, or other circumstances deemed appropriate by the DCS Division Director or the MDHS Executive Director.

Any questions regarding this policy should be submitted in writing to:

Mississippi Department of Human Services  
Director, Division of Community Services  
200 South Lamar Street  
Jackson, Mississippi 39201

Source: 45 CFR ~~96.108-10~~; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: ~~May 2022~~ January 2026

**Rule 1.4 Prior Policy Clause.**

This policy replaces and supersedes all prior versions.

**Rule 1.5 Non-Discrimination Statement.**

As a recipient of Federal financial assistance, MDHS and its subgrantees do not exclude, deny benefits to, or otherwise discriminate against any person on the basis of: race, color, gender, sexual orientation, religion, sex, national origin, age, or disability; in admission to participation in, or receipt of the services and benefits under any of its programs and activities, whether carried out by MDHS and/or its subgrantees directly or through a contractor or any other entity with which MDHS and/or its subgrantees arranges to carry out its programs and activities. This statement is in accordance with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Regulations of the U.S. Department of Health and Human Services issued pursuant to these statutes at Title 45 Code of Federal Regulations Parts 80, 84, and 91.

*Source: 45 CFR ~~96.108-10~~; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4.*

*Revised: ~~May 2022~~ January 2026*

**Rule 1.6 Organizational Structure of LIHEAP.**

The following summarizes the Organizational Structure for LIHEAP:

A. MDHS as Lead Agency:

MDHS is the designated State agency to receive funds and administer the program covered in this manual. MDHS assists the Division of Community Services (DCS) by providing support services in a timely manner that is consistent with program goals, objectives and guidelines. MDHS awards LIHEAP subgrants based on the receipt of the Federal Notice of Award for LIHEAP, and the timely receipt and approval of subgrants for funding. MDHS is responsible for monitoring and evaluating the program performance of subgrants.

B. Division of Community Services (DCS):

The Division of Community Services provides the necessary interface between the subgrantee and other divisions of MDHS. Responsibilities include, but are not limited to:

- 1) Administering the program in accordance with all applicable federal and state rules, regulations and guidelines;
- 2) Informing the public of program rules, regulations, and guidelines through public hearings, announcements and publications;

- 3) Establishing criteria and processing ~~applications~~ subgrants for funding from subgrantees to implement programs;
- 4) Monitoring subgrantees' spending levels and processing claims requests to ensure compliance with Federal, State, and MDHS guidelines;
- 5) Reviewing subgrantees' ~~applications~~-subgrants for funding to ensure compliance with federal, state and MDHS guidelines;
- 6) Providing training and technical assistance to subgrantees;
- 7) Keeping subgrantees informed of changes in Federal, State and MDHS regulations and guidelines;
- 8) Providing responses to clients regarding inquiries concerning programs;
- 9) Preparing annual State Plan applications to receive the federal funds;
- 10) Collecting and disseminating information to appropriate funding sources and others as deemed necessary; and
- 11) Serving as a liaison between county, state, and federal agencies in regard to program implementation.

*Source: 45 CFR ~~96.108-10~~; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4.  
Revised: ~~May 2022~~ January 2026*

**Rule 1.7 Partner Roles in Administration of Program.**

LIHEAP must perform numerous federally mandated functions in order to remain compliant. MDHS enlists several partners through formal agreements to perform some of those functions. The following summarizes those roles:

A. Subgrantees/ Community Action Agencies (CAA):

The community action agencies are the subgrantees in the LIHEAP program. Each subgrantee is responsible for performing program activities in accordance with the terms and provisions of the grant. The responsibilities of the subgrantee include, but are not limited to:

- 1) Operate the program in accordance with the terms and provisions of the grant and all applicable federal and state rules, regulations and guidelines;

- 2) Process applications, determine eligibility and provide appropriate/timely service(s) with measurable outcomes;
- 3) Make referrals to and accept referrals from, and coordinate program information with other social service agencies;
- 4) Maintain all financial and program records;
- 5) Submit required reports to DCS in a timely manner;
- 6) Maintain administrative and internal controls;
- 7) Monitor its financial and programmatic activities;
- 8) Implement a fair hearing process for clients;
- 9) Cooperate with Federal/State investigating teams;
- 10) Establish emergency and disaster procedures;
- 11) Train and certify staff;
- 12) Use the Virtual ROMA system;
- 13) Have at least one intake site in each county of its service area with posted hours of operation;
- 14) Adhere to the terms of the “MDHS Subgrant/Agreement Manual.”  
(~~[www.mdhs.ms.gov/subgrantee-manual/](http://www.mdhs.ms.gov/subgrantee-manual/)~~)  
(<https://www.mdhs.ms.gov/support/procurement/resources/>)
- 15) Establish partnerships with local entities and organizations to assist in the provision of services to meet the needs of the clients they served. These partnerships should cover monetary or non-monetary services. Intra-office referrals should be made as most subgrantees have additional programs not funded by DCS (e.g., Head Start, Congregate Meals, Rural Housing Services and Transportation Program).
- 16) Make referrals to the WX agency that covers its service area on behalf of clients seeking WX services or have high energy bills.
- 17) Certify that all entities that they are in partnership with are not on the list for debarment. This information can be found in the Excluded Parties List System (EPLS), now known as System for Award Management (SAM). Proof of documentation of partnership verification with SAM shall be kept on file and the

debarment status shall be checked prior to submission of every subgrant and modification to DCS. The subgrantee must also understand that if ~~an entity they are in partnership with is on SAM~~ the partnered agency is on the debarment list, the agreement should be terminated immediately.

- 18) Conduct local public hearings regarding the LIHEAP program. Information such as LIHEAP funding for the county, services provided, income guidelines, etc. must be presented in efforts to reach low-income communities.
- 19) Conducting outreach activities to reach eligible people or households in need of services. Subgrantees may utilize the media (newspaper, TV, radio, flyers, internet, community meetings, etc.) to inform individuals of services available and eligibility requirements. Outreach materials should include the local and toll-free telephone numbers for subgrantee offices. Subgrantees should rely on their existing network of volunteers, community leaders, and faith-based groups to provide outreach to eligible people in the greatest need of assistance.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: ~~May 2022~~ January 2026*

## Part 24 Chapter 2: Definitions

### Rule 2.1 Definitions.

The Definitions below will assist both clients and subgrantees on the various terms used for LIHEAP:

- A. Abuse - Involves behavior that is deficient or improper when compared with behavior that a prudent person would consider reasonable and necessary business practice given the facts and circumstances. Abuse also includes misuse of authority or position for personal financial interests or those of an immediate or close family member or business associate.
- B. Administration Cost - Cost to support administrative operations, planning and development to include but not limited to: Fiscal operations (payroll, procurement, software, etc.), program and fiscal reporting, audit, personnel, registration and dues, training for executive and administrative staff, cost of executive and administrative staff (salaries, fringes, travel, supplies, equipment), consultants, staff meeting cost, etc.
- C. Assurance 16 Costs - Cost to support the direct staff providing outreach, energy education, budget counseling, advocacy with energy providers, and referral to include Salaries, Fringes, and Travel.
- D. Countable Income - Income that must be included when determining eligibility for LIHEAP.
- E. Elderly- An individual age 60 and over.
- F. Emergency - A natural disaster; a significant home energy supply shortage or disruption; a significant increase in the cost of home energy, as determined by the Secretary; a significant increase in home energy disconnections reported by a utility, a State regulatory agency, or another agency with necessary data; a significant increase in participation in a public benefit program such as the supplemental nutrition assistance program carried out under the Food and Nutrition Act of 2008 (7 U.S.C. 2011 et seq.), the national program to provide supplemental security income carried out under title XVI of the Social Security Act (42 U.S.C. 1381 et seq.), or the State temporary assistance for needy families program carried out under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.), as determined by the head of the appropriate Federal agency; a significant increase in unemployment, layoffs, or the number of households with an individual applying for unemployment benefits, as determined by the Secretary of Labor; or an event meeting such criteria as the Secretary, in the discretion of the Secretary, may determine to be appropriate.

- G. Energy burden - The expenditures of the household for home energy divided by the income of the household.
- H. Energy crisis - Weather-related and supply shortage emergencies and other household energy-related emergencies.
- I. Energy Crisis Intervention Program (ECIP) - Cost to provide direct client services for emergency and crisis situations. See policy on crisis. This activity does not include cost for staff.
- J. Exempt income - Income that should not be included when determining eligibility for LIHEAP.
- K. Expenditures - Funds spent by subgrantees; Funds paid for services or contracts; and Funds paid at the State level to contracts and salaries.
- L. Fraud - A type of illegal act involving the obtaining of something of value through willful misrepresentation. A false representation of a material fact, whether by words or by conduct, by false or misleading allegations, or by concealment of that which should have been disclosed, which deceives another so that he acts, or fails to act to his detriment.
- M. Unobligated funds- Funds that are not considered obligated or expended include: State administrative dollars that do not fall within the definition stated above; Vendor refunds are considered unobligated; and Funds transferred from one subgrantee to another are considered unobligated until funds are awarded in another subgrant.
- N. Highest home energy needs - The home energy requirements of a household determined by considering both the energy burden of such household and the unique situation of such household, such as having members of vulnerable populations, including very young children, individuals with disabilities, and elderly individuals.
- O. Home energy - A source of heating or cooling in residential dwellings.
- P. Household - Any individual or group of individuals who are living together as one economic unit for whom residential energy is customarily purchased.
- Q. Income - Income is money received on a regular and recurring basis by any household member. Income may be earned or unearned.
- R. Line Items - Line Items for LIHEAP as specified in the MDHS Subgrantee Manual are: Salaries, Fringes, Travel, Equipment, Contractual Services, Supplies, & Subsidies, Loans & Grants.

- S. Natural disaster - A weather event (relating to cold or hot weather), flood, earthquake, tornado, hurricane, or ice storm, or an event meeting such other criteria as the Secretary may determine to be appropriate.
- T. New Client- is a client that has never received assistance from a DCS funded subgrantee within the last three (3) years.
- U. Obligations - Amounts which may be legally required to pay out of its resources, including encumbrances, as well as accounts payable and accrued liabilities. Obligations may include: any funds issued in the Notice of Funding Availability (NOFA); any funds encumbered in a contract; and any funds committed to State Office FTEs. This does not include vacant positions.
- V. Poverty level - With respect to a household in any State, the income poverty line as prescribed and revised at least annually pursuant to section 9902(2) of this title, as applicable to such State.
- W. Program Assistance - Cost to provide direct client services to include energy assistance payments on behalf of eligible households; cost of purchase/repair/replacement of air conditioners, fans, furnaces, heaters, blankets, home meter bases, energy kits/incentives, and other energy-related expenditures to include disaster-related expenditures for eligible households; cost for a contractor to install the air conditioners, etc. Cost (salaries, fringes, supplies, equipment) for direct staff for intake, case management, case worker supervisors and file reviewers; and travel for this staff which includes training and home visits.
- X. Secretary - The Secretary of Health and Human Services.
- Y. State - Each of the several States and the District of Columbia.
- Z. State median income - The State median income promulgated by the Secretary in accordance with procedures established under section 1397a(a)(6) of this title (as such procedures were in effect on August 12, 1981) and adjusted, in accordance with regulations prescribed by the Secretary, to consider the number of individuals in the household.
- AA. Waste - Involves the taxpayers not receiving reasonable value for money in connection with any government funded activities due to an inappropriate act or omission by players with control over or access to government resources.

\* Clients and applicants may be used interchangeably throughout the policy.

\* Subgrantee, Agency and Community Action Agency (CAA) may be used interchangeably throughout the policy.

\* Application and Intake may be used interchangeably throughout the policy.

*Source: 45 CFR 968; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: ~~May 2022~~  
January 2026*

## Part 24 Chapter 3: Priority Populations

### **Rule 3.1 Priority Populations.**

Priority Population is a designated population treated differently than the general population for eligibility and access purposes, in order to address a particular need of that population. Priority Populations include:

- A. Elderly - Individuals age 60 and over
- B. Disabled - Individuals who have been determined disabled by authority- SS/SSI
- C. Children five (5) years of age and under
- D. Households with high energy burdens

*Source: 45 CFR ~~96~~8.46; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: ~~May 2022~~ January 2026*

## Part 24 Chapter 4: Appointments

### Rule 4.1 Appointments.

- A. The process by which appointments are given shall be determined by the subgrantee (i.e. mornings, days of the week, caseworker to be assigned to this population, etc). If a client is physically disabled and cannot come to the subgrantee, a caseworker can conduct a home visit to take the application, or the client can authorize someone to make an application on their behalf.
- B. ~~Applicants should be seen by appointment. Appointments must be given made on a first-come, first-served basis.~~ Appointments for a new client should be made on a first-come, first-served basis. Existing client appointments should be made 30 days after their current case in waiting on approval. Clients with a verifiable emergency (as listed in Section 7.10) should be worked in. ~~in the case of emergencies (as listed in Section 6.10) when subgrantees must comply with the 18-48 hour rule, or when a non-availability of funds waitlist opens up.~~
- C. Applicants arriving within 15 minutes of appointment time shall be seen according to ~~their~~ scheduled appointment. Applicants who arrive later than 15 minutes for a scheduled appointment may have to wait to be seen depending on the time of the caseworker's next scheduled appointment; or be rescheduled for the next available appointment if ~~they~~ the applicant cannot be worked into schedule for that day. The Subgrantee should make every effort to see the applicant that day if possible.
- D. If the subgrantee has a no-show or a cancellation after the 15-minute grace period, applicants waiting for ~~their~~ a appointment shall be seen immediately. The Subgrantee may then re-arrange their schedule to accommodate other applicants.
- E. If the client misses the appointment, no further benefits can be given until the client comes in for another appointment to have eligibility determined.
- F. The client should be advised at the time of appointment of the responsibility to report household changes within ten (10) days. Changes can be reported by mail, phone call, email, or office visit.
- G. All contact with the client must be documented in Virtual ROMA. Changes may include, but are not limited to:
  - 1) Increase or decrease in household members,
  - 2) Increase or decrease in household income,
  - 3) Household moved, or

- 4) Changes to case plan.
- H. **Significant changes in staffing that may impact a client's appointment for services (i.e. office closure due to staff being sick, on vacation or not having a person to cover county) must be communicated via a signed letter by the Board Chair to DCS.**

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

## Part 24 Chapter 5: Client Application Process

The State Division of Community Services (DCS) has one application for ~~four~~ three programs LIHEAP, CSBG, LHHWAP and Weatherization. Therefore, an applicant may apply for all programs during the intake process. If the weatherization agency is different from the LIHEAP agency will determine eligibility and then refer the file over to the LIHEAP agency refers to the weatherization agency to complete the assessment ~~for this program~~. Local Agencies should offer the client any additional all programs administered by that agency. Additionally, especially to the vulnerable populations of elderly, disabled, and families with children. Local agencies should refer applicants to other local programs such as SNAP and TANF, if the applicant is not currently receiving these services.

### **Rule 5.1 Client Application Process.**

The Subgrantees/ Community Action Agencies (CAAs) accept applications throughout the year. When funding is available, eligible families shall be served on a first-come, first-serve basis by the date of application. When funding is not available, ~~eligible families should be added to the waitlist~~ clients should still be scheduled for an appointment but denied based on “Grant Award Fully Expended”.

- A. As a general rule, only the applicant, spouse of the applicant, or authorized representative of a disabled or elderly applicant are the adults who can be present during the application. The Subgrantee reserves the right to require other adults to remain in the waiting room, especially if ~~they~~ the individuals are causing disruption during the application process.
- B. If the applicant cannot read, the caseworker must read all forms/declarations to the applicant to ensure the applicant understands what is being signed.
- C. The signature of the applicant must be on all applicable documents. A spouse may sign if the head of household is absent. The caseworker should document the reason the head of the household cannot come in for appointment. If the applicant cannot write, ~~they~~ the applicant may sign by making an “X” on the signature line. The name must be printed or typed under the “X” by the caseworker, and a witness should sign under the “X”.

\* Exceptions to this rule have been noted in Rule 7.9A.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

### **Rule 5.2 Before Initiating Application.**

- A. Applications are initiated through the Common Web Portal (CWP) for all first-time applicants. If an applicant was a previous household member in another case, but is now head of household, a new pre-application must be ~~done~~ completed. Pre-applications are

web-based and may be submitted on behalf of Mississippi residents only. Applicants may apply for services through the CWP at: [www.access.ms.gov](http://www.access.ms.gov)

- B. Pre-applications are required for applicants requesting service for the first time or if the applicant is no longer in the household of another client.
- C. Applicants submitting pre-applications ~~must~~ **should** receive notification of an appointment for services within (15) fifteen business of submission of the pre-application.
  - 1) If the applicant is elderly, disabled, or a family with a child five (5) and under, the appointment date must be within thirty (30) ~~calendar~~ **business** days. Non-elderly or non-disabled clients must be given an appointment date within forty-five (45) business days.
  - 2) For emergency situations, if the applicant's application status is life-threatening (LTE), the appointment date must be within 18 hours. If the applicant's application status is non-life threatening (NON-LTE), the appointment date must be within 48 hours. Verification of emergency must be provided, or the application will be treated as a "Normal" application. (see section 6.11 regarding explanations of LTE and NON-LTE cases)
- D. If an applicant does not have access to a computer to submit a pre-application, the subgrantee must complete the pre-application by phone or at the intake appointment. The subgrantee must provide the applicant with an intake appointment based on application status (LTE, NON-LTE, Normal).
- E. **Caseworkers must inform applicants at intake that another pre-application does not need to be completed for future assistance.**

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: **January 2026**

**Rule 5.3 Initiating Application.**

- A. Subgrantees must receive the pre-application from Virtual ROMA and schedule the applicant an appointment. **Appointments booked in IT Front Desk or other scheduling system must be entered in Virtual ROMA daily.** (Please view the Virtual ROMA **user policy** manual on scheduling appointments)
- B. If an applicant does not complete a pre-application (regardless of reason), the subgrantee must complete the pre-application during the application process. A manual appointment must be made for the applicant by the subgrantee and the appointment should be documented in Virtual ROMA after the pre-application has been completed.
- C. Under no circumstance should an applicant be denied services because ~~they~~ **the applicant has** not completed a pre-application. The subgrantee must assist the applicant with completing a pre-application.

- D. Paper Applications are prohibited, unless in case of a computer system failure or natural/manmade disasters. The subgrantee's Executive Director or appointee must submit a request in writing to the Director of the Division of Community Services for approval to take paper applications. Once the emergency situation is over, the paper applications must be entered into Virtual ROMA within two (2) business days, unless additional time is requested and approved. The subgrantee's Executive Director must submit a letter to confirm all paper applications have been entered. Otherwise, any paper applications taken may result in questioned or disallowed cost.
- E. The caseworker must complete the application in the Virtual ROMA system. If the applicant submits the requested information, the caseworker must give the applicant a Pending Notification of Services form (PNOS) which states the status of the application and amount of benefits the applicant may receive upon supervisory approval. This form must be generated through Virtual ROMA and signed and dated by both the applicant and caseworker. Subgrantees must provide the PNOS notice (written or email) to applicants regarding the status of their ~~the applicant's~~ application within seventy-two (72) hours of the appointment date. In emergency cases, notification must occur within 18 hours (life threatening) or 48 hours (non-life threatening) once the application is in waiting on approval status.
- F. If the applicant does not have all the required documentation, the caseworker must complete as many screens as possible up to the allocation screen in Virtual ROMA. The caseworker will not allocate after this point. A Request for Additional Information (RAFI) form must be generated through Virtual ROMA and signed and dated by both the applicant and the case worker. A copy must be given to the applicant, and a follow-up appointment must be given to complete the application process if necessary. Applicants may submit ~~their~~ information electronically; therefore, the subgrantee must provide an email address to the applicant. The caseworker must explain the documentation needed and the 10-calendar day timeframe to return the information. If the applicant does not return the information timely, the application must be denied, and ~~the denial notice, and~~ Notification of Services (NOS) form should be sent by mail or email by the case worker and uploaded to Virtual ROMA.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 5.4 After Submitting Application.**

- A. Once application is initiated, the client's application status must change to 'Waiting on Approval' within ten (10) business days. Then the application must be acted upon and changed to 'Approved' or 'Denied' within two (2) business days.
- B. If the supervisor sends a case back to the caseworker for Return for Correction (RFC), the caseworker will have two (2) business days to correct case and put back in "Waiting on Approval" status.

- 1) Any application placed in Return for Corrections (RFC) status must be addressed within two (2) business days. If no corrective action is taken within this timeframe, the RFC will be automatically voided by the system.
- C. If application is not acted upon in two (2) business days and it is negligence of the agency and the application is over 30 days, the client should not have to come back for another appointment. The agency must pay for services out of nonfederal funds.
- D. Subgrantee's cancellation of applications approved in error must occur within twenty-four (24) hours after application has been approved. The subgrantee must contact the vendor to notify them of non-approval status to prevent inaccurate payment. After (24) hours, the agency's Executive Director must submit a request on letterhead to Virtual ROMA via the concerns dashboard.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

#### **Rule 5.5 Notices from Subgrantee to Applicant**

- A. Notification of an appointment for services must be generated through Virtual ROMA and either mailed, emailed, or given to applicant in the office within fifteen (15) business days of the submission of a pre-application. A copy of the notification of an appointment for services must be scanned into Virtual ROMA.
  - 1) The notification must include the following:
    - i Name, address, phone number, and email address of Subgrantee office
    - ii Date and time of appointment
    - iii Eligibility information needed, as listed in Chapter 5.
- B. The Notification of Services form must be provided to the applicant either by letter or email within seventy-two (72) hours of the approval or denial of the application. This form must be scanned into Virtual ROMA and a copy placed in the applicant's file. In emergency cases, the form must be sent within 18 hours (life threatening) or 48 hours (non-life threatening).
- C. A copy of the fair hearing process must be given to all applicants at each appointment, regardless of the approval or denial status. The fair hearing process must be posted in the lobby so the process can be seen by the public.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: March 2024

#### **Rule 5.6 Non-Availability of Funds/ Waitlist**

- A. If the Subgrantee has run out of LIHEAP funds, the application must still be taken and denied. This must be done because of the federal reporting requirement to count all applicants, as part of the LIHEAP Household Report. When denying the case, the case

worker must select “Grant Award Fully Expended” as the denial code. ~~This will add the applicant’s name to an internal report in Virtual ROMA and this report will be known as the agency’s Waiting list. As soon as funding is available, the applicants on the waiting list must be given an appointment before any other appointments are given made.~~ If denied, the applicant should be referred to other local organizations that may be able to assist. All referrals must be documented in Virtual ROMA. As soon as funding is available, the applicants who were denied for this reason should be given an appointment before any other appointments are made.

- B. ~~An applicant should not be added to a waiting list if LIHEAP funds are available from the agency.~~
- C. Under no circumstance should an applicant not be allowed to apply because LIHEAP funds are not available.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

## **Part 24 Chapter 6: Client Eligibility Requirements.**

Households that consume energy for residential purposes and meet the requirements of the program will be eligible for assistance. Energy bills may include electricity, natural gas, propane/butane, wood, kerosene, and coal. LIHEAP funds may also be used to purchase fans, coats, blankets, air conditioners, heaters, energy deposits, and other energy-related products to be distributed to eligible households. The maximum amount of financial assistance and the cost of the energy-related products given to eligible households may be up to \$1,500, unless a client needs heating and/or cooling equipment. When supplemental funding is available, subgrantees must be aware that applicants may or may not be eligible for supplemental payments from different grants at the same time. In this case, the subgrantee's ~~Division~~ Program Director will determine, based on the amount of funding available, which grant will be used to assist the client's needs.

LIHEAP has two (2) components: program assistance known as regular assistance and the Energy Crisis Intervention Program (ECIP) that provides emergency assistance. Subgrantees are required to refer high energy usage households to Weatherization.

### **Rule 6.1 Eligibility Requirements.**

An applicant must meet the following requirements to receive a LIHEAP benefit:

- A. Have an obligation to pay an energy bill directly to a utility company, in subsidized housing where the energy cost is billed separate from rent or can provide evidence from the landlord stating utility is an undesignated portion of the rent,
- B. Be a U.S. citizen or have legal permanent resident status,
- C. Have income at or below the 60% state median income guidelines, and
- D. Be eighteen (18) years of age or older or an emancipated minor (through court action) who is considered head of household.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: May 2022*

### **Rule 6.2 Residency.**

An applicant must be a resident of the State of Mississippi and reside in the LIHEAP service area at the time the energy costs were incurred. The applicant must apply for services in the county in which **the applicant** lives. Homeless households may apply for services if **the applicant is** ~~are~~ trying to establish utility services.

- A. An applicant must give a street address to include a house/route number and street name, city, state, and zip code.

- B. LIHEAP services cannot be provided to temporary residents defined as:
- 1) Household traveling through the state,
  - 2) Household on vacation,
  - 3) Household visiting someone, or
  - 4) Residents of institutions, dormitories, fraternity or sorority houses, or boarding homes.
- C. A household with an address that straddles county lines may provide proof of Homestead Exemption, which verifies the county of residency. ~~Other~~ **Another** method of verifying county residence for an applicant who is not eligible for Homestead Exemption is by Voter Registration I.D. or documentation of the county in which the applicant receives other social services benefits. The subgrantee can also verify by using the internet in determining what county the applicant lives.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

**Rule 6.3 Immigration Status.**

- A. If the head of household is undocumented and is a single member of the household, the application must be denied.
- B. If the head of household is undocumented and has documented member(s) in ~~their~~ the household, the application shall not be denied for the entire household. The application must be determined eligible by using the household size of the documented household members and the income for all household members eighteen (18) years of age and older.
- C. If an individual within the household is undocumented and does not disclose citizenship or establish satisfactory immigration status, ineligibility exists only for the individual, but not the entire household. This individual is considered a “non-applicant” and should not be questioned about ~~his/her~~ citizenship/alien status. However, this individual must disclose and verify income and other information needed to establish the eligibility of the household. The income of this individual must be included in determining the household’s total income; however, this individual will not be counted in determining the household size.
- D. Eligibility cannot be determined when a “non-applicant” fails to disclose income; therefore, the application should be denied for the entire household.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

### **Rule 6.4 Renters.**

The State of Mississippi treats homeowners and renters equitably under the LIHEAP program. Eligibility requirements are the same for a renter as with a homeowner.

- A. If the utility bill is included in the applicant's rent, the applicant must provide either a copy of ~~their~~ **the** applicants' lease agreement or the "Landlord Verification Form" **must be** completed by the landlord detailing the heating/cooling arrangement with the renter. The lease agreement/Landlord Verification Form must include the amount of the utility cost as part of rent and the breakdown of the charges that make up the bill. All energy-related costs included in the bill will be the amount to be paid by LIHEAP to the energy vendor.
- B. If the lease agreement/verification form does not include an amount, the LIHEAP program will pay \$100 per intake until the amount of the benefit matrix has been met.
- C. If the landlord completes the "Landlord Verification Form", the landlord must agree to decrease the amount of the rent in the amount of the LIHEAP payment for the month after the LIHEAP payment has been made. If proof of deduction is not provided, the landlord will be in violation of ~~their~~ **the** agreement and will be reported to MDHS – Office of Inspector General to be investigated.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

### **Rule 6.5 Roomers/Boarders**

A roomer/boarder is an individual who is not a related household member and is paying an unrelated landlord to reside in ~~their~~ **the** residence.

- A. The roomer/boarder must obtain a "Landlord Verification Form" or written verification from the landlord if the energy cost is separate from the charge for room & board.
- B. If multiple roomers/boarders are in a household and ~~they~~ are responsible for a utility bill ~~in their name~~, the applicants can submit separate applications and the subgrantee can assist with each bill.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

### **Rule 6.6 Live-In Attendant**

- A. A live-in attendant should not be counted as a household member. The income of a live-in attendant will not count against an applicant applying for services when the live-in attendant is in the home solely for the applicant to be able to stay in ~~their~~ **the** home.
- B. Documentation must be provided along with a signed and notarized affidavit.

- C. In cases where the caretaker is the head of household and the person requiring care moves in, then the person requiring care should not be counted as a household member. Documentation must be provided along with a signed and notarized affidavit.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: May 2022*

**Rule 6.7 Employee Familial and/or Personal Interest Applicants**

Any employee, relative, or personal interest cases of employees or board members may apply for and receive assistance; however, there are policies and procedures for taking and processing these applications. No preferential treatment shall be granted to these applicants.

- A. An employee of a Subgrantee cannot complete the intake or be involved in the approval process of a relative. In this occurrence case, the caseworker should immediately recuse oneself from any involvement with the case.
- B. The Program Director/Supervisor is responsible for delegating the processing of applications for employees, relatives of employees, or personal interest cases and for submitting the case to the Executive Director for review and authorization of the approval or denial. The Executive Director is responsible for delegating the processing of Program Directors/Supervisors, Board Members, and/or their relatives requesting assistance. The Executive Director is responsible for approving the application of the Program Directors/Supervisors, Board Members, and their relatives.
- C. The relatives for whom the special procedures must be used include: employee's spouse, ex-spouse, parent(s), stepparent(s), grandparent(s), great and great-great grandparent(s), brother(s) and sister(s), stepbrother(s) and stepsister(s), half-brother(s) and half-sister(s), children, stepchildren, grandchildren, great and great-great grandchildren, aunt(s), uncles(s), nieces(s), nephew(s), first and second cousin(s), or these relatives of an employee's spouse who are related to this degree of marriage.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

**Rule 6.8 Eligibility Documentation.**

Applicants must verify eligibility through the submission of documents. ~~When possible, MDHS and/or the subgrantee will access other documentary evidence in available databases. However, proof of eligibility requirements is the applicant's responsibility. A document may serve to prove more than one requirement and should not be submitted more than once.~~ The following is a list of acceptable proof for each requirement:

- A. Social Security Cards are required for all household members. **Cards must be legible.**
  - 1) If the applicant is applying for assistance for the first time and cannot provide their a Social Security Card ~~the Social Security Number can be taken. To receive further~~

assistance, the applicant must provide their Social Security Card or supporting documentation. The subgrantee should work with the applicant to obtain this documentation, a printout from the Social Security office is acceptable.

- 2) The requirement to present a social security card is waived for foster children. The applicant must provide a social security number to apply for services. A letter or some documentation from Child Protective Services (CPS) is needed to verify the social security number.
- 3) For families where custody has been granted for children and Social Security Card is not available, if a social security number has been verified by another MDHS program or governmental agency documentation can be accepted. For subsequent services a physical card should be presented. The agency can assist in helping apply for card.
- 4) For newborns (less than 8 weeks old) who do not have a Social Security Card, the application can be processed without adding the child, but any income for the child must be counted when determining household income.
- 5) **Effective January 1, 2019, Subgrantees shall no longer keep copies of Social Security cards and Personal Identifiable Information (PII) documentation in clients' files. These documents must be scanned into the Virtual ROMA system only and given back to the client.**

#### B. Photo Identification Documentation

- 1) A photo I.D. is required for all household members eighteen (18) years of age and over. Acceptable documents include, but are not limited to:
  - i. Driver's license
  - ii. State-issued I.D.
  - iii. ~~U.S.~~ Passport
  - iv. Military I.D.
  - v. Employment I.D.
  - vi. College/School I.D.
  - vii. Tribal I.D.
  - viii. Alien: Photo I.D. plus Alien Registration/Permanent Resident Card
  - ix. Temporary Resident Card
  - x. Voter Registration I.D. with photo
- 2) An applicant shall receive services **even if they have an expired photo I.D is presented. However, when the picture should be is-clear. Subgrantee should work with the applicant** through case management or referral to obtain a valid I.D.

Please do not take pictures of elderly/disabled/homebound clients in lieu of photo I.D.

- 3) For applicants with a person in their household that has a disability that hinders them from getting a photo I.D., an affidavit is acceptable as an alternative to a photo I.D.
- 4) ~~For elderly/disabled/homebound clients, the photo I.D. can be expired. Please do not take pictures and do not deny the client if the photo I.D. is not available. Caseworkers should update notes to include the visit and state that some form of I.D. was secured. This can be used as a substitute for the required document scan of the photo I.D.~~

### C. Energy Bill

- 1) Applicants must present the energy bill to be paid, or subgrantee may access vendor portals to obtain ~~this~~ the bill. If accessing from portal, make sure full bill is uploaded into Virtual ROMA.
- 2) The bill(s) must be in the name of the applicant (head of household) or spouse.
- 3) If the bill is in the name of a deceased, incarcerated, divorced, or estranged spouse, the subgrantee can pay the bill for the initial application. Subgrantee shall assist the applicant with getting the bill changed into his/her name before any subsequent bills can be paid. In the case of a deceased spouse, the surviving spouse can request the vendor to put “in care of” for subsequent bills. An “in care of” bill shall be paid if the head of household or spouse’s name is listed on the bill.

#### i. Deceased Head of Household

If the applicant dies before the application for services is approved, the application shall be approved if **all apply**:

- All eligibility information received is accurate and meets income guidelines;
- The bill is for an outstanding balance, not a deposit, and
- There are other household members.

This will allow the household to become stable until a new intake can be done to name a new head of household. The agency may assist the new head of household with changing the service into ~~his/her~~ the name of the new head of household and paying any necessary deposits to do so.

If the application is for deposit for services, the application should be denied. If the household has another adult member, a new intake must be done to name a new head of household.

#### ii. Deceased Household Member (Spouse)

If an applicant spouse dies and the applicant is not listed on bill, the application shall be approved if:

- Spouse is listed as a household member in Virtual ROMA or;
  - If spouse is not listed as a household member an obituary or death certificate and marriage license is required.
- 4) If the bill is in the landlord’s name and the applicant is responsible for paying the bill directly to a vendor, documentation is needed to verify the tenant’s living status. This documentation can be a notarized statement from the landlord, a copy of the lease agreement stating the arrangement, or a Landlord Verification form can be completed by the landlord. The landlord cannot request services on behalf of the tenant/client.
  - 5) The bill cannot be paid if it is in the name of a child (under 18), even if the child lives in the household. The applicant is responsible for paying that bill, and the subgrantee can subsequently assist the applicant with getting the bill changed into his/her name by advocating with the energy vendor.
  - 6) ~~For households that heat with smaller propane tanks (less than 100-gallon tanks), the agency should approve the household for a minimum of 100 gallons.~~

Source: Miss. Code Ann § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 6.9 Authorization of Release of Information**

Applicant should sign the “Authorization of Release of Information Form” (Form ARF-001) annually to authorize the energy vendor(s) to release household energy usage and billing data to the subgrantee for purposes of reporting this data in the LIHEAP Performance Measures Report required by the Department of Health and Human Services. The subgrantee shall advise the applicant that if ~~they refuse~~ refusal to sign this form, ~~the subgrantee will~~ prevent the subgrantee from being ~~unable~~ to retrieve the applicant’s utility bills from the vendor. LIHEAP benefits cannot be denied to the applicant for refusal to sign this form. However, subgrantees must list the applicant’s name on a report to be submitted to MDHS so ~~their~~ requesting the applicant’s information is not be included in the federal report.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 6.10 Affidavits**

Affidavits are written declarations made under oath before a notary public or other authorized officer. Agencies should have a staff member who is a notary, and clients should not be charged. ~~They are~~ Affidavits are valid for thirty (30) days. Affidavits are to be obtained for the following reasons:

- A. Authorized Representative applying for services on behalf of an applicant: The representative must have an affidavit giving authority to act on behalf of the applicant. Original copies of documents required for eligibility must be presented. If the representative has a Power of

Attorney, an affidavit is not required. The Power of Attorney must be scanned into Virtual ROMA.

**For a person who is bedridden or homebound and unable to sign the form, a doctor's statement is acceptable as an alternative to an affidavit.**

- B. **Separation:** The State of Mississippi does not recognize legal separation. Applicants must obtain an affidavit which declares separation from the spouse.
- C. **Zero income household:** Applicant must obtain an affidavit when ~~they~~ declar**ing** zero income for the entire household.
- D. **Unemployed:** For each adult (18 years of age and older) that lives in the household, has no income and is not a student, an affidavit must be obtained confirming unemployment status for thirty (30) days. **For students over the age of 18, school verification must be provided.**
- E. **Guardianship:** If the applicant reports ~~they have~~ guardianship over any minors (grandchildren, nieces, nephews, etc.) in their home, an affidavit **MUST** be completed **AND** the applicant must obtain official documentation from a verifiable agency/source (CPS, attorney offices, school records, etc.) to confirm residency status of the child.
- F. **Other:** This option should be used if there are any circumstances where the subgrantee feels an affidavit is required.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

**Rule 6.11 Income Eligibility and Calculations.**

- A. Income is money received on a regular and recurring basis by any household member. Income may be earned or unearned.
- B. A household's total gross income shall be used to determine eligibility. The total gross income received for the thirty (30) days prior to application date must be verified.
- C. Countable Income is income (earned or unearned) that must be included when determining eligibility for LIHEAP. The following types of income shall be used:
  - 1) Salaries and wages, including overtime, tips, bonuses, commission, and 13<sup>th</sup> check;
  - 2) Self-employment income;
  - 3) Contract income;
  - 4) Unemployment insurance;
  - 5) Social Security benefits (including Medicare deduction);
  - 6) SSI,;
  - 7) SSDI;

- 8) Retirement benefits;
- 9) Alimony;
- 10) VA benefits;
- 11) Workers Compensation;
- 12) Private Disability (Short/Long Term Disability);
- 13) Money given to household; and
- 14) Any income whereas a W2 or 1099 is not received or otherwise documented.

D. Exempt income is income that should not be included when determining eligibility for LIHEAP. The following types of income shall not be considered:

- 1) Loans/Grants;
- 2) In-kind income;
- 3) Earnings from employment of a child under the age of 18, unless emancipated;
- 4) Infrequent income- if an individual receives it only once during a calendar year from a single source and the individual did not receive that type of income in the month immediately before that month or in the month immediately following that month (Examples of this would also be repayment of personal loans, etc.);
- 5) Reimbursement for business or medical expenses;
- 6) Payments made by others on behalf of household, unless payments were directly received by household;
- 7) Benefits received that must be excluded by federal law or incentives paid by TANF or Workforce Investment, earnings and allowances paid under Title IV-A, benefits received under Title VII, HUD, and educational grants;
- 8) Child support;
- 9) Payments made to the household for the care of a foster child;
- 10) Adoption assistance payments; and
- 11) Refunds such as energy refunds, income tax refunds and EITC, insurance refunds, etc.

E. Earned income is income that is received from wages or self-employment income and shall be used in determining eligibility. Computation of the monthly income shall be done by one (1) of the following methods, depending upon the frequency:

1) Regular Income- Frequency does not change from week to week, or month to month.

- i. Weekly: The four most recent consecutive paycheck stubs covering the four-week period prior to application, or the signed/dated statement from the employer.

To calculate: Sum the weekly gross earnings; Divide by 4, then multiply by 4.3333 to determine the monthly amount. Multiply the monthly amount by 12 to get the annual income.

Example: WK1 through WK4:  $(\$412 + 436 + 485 + 520) / 4 * 4.3333 * 12$  Monthly:  $\$2,007.26 * 12 =$  Annual income:  $\$24,087.15$

- ii. Semi-Monthly (Twice a month): The two most recent consecutive paycheck stubs covering the month prior to application. Individuals receive checks 24 times a year.

To calculate: Sum the gross amounts of two checks, multiply by 12 to get the annual income.

Example: Check for first 2 weeks- \$1,500 and Check for second 2 weeks- \$1,700.  $(1,500 + 1,700) = 3,200$  monthly.  $3,200 * 12 =$  Annual income:  $\$38,400$

- iii. Bi-Weekly (Paid every other week): The two most recent paycheck stubs covering a month prior to application. Individuals receive checks 26 times a year.

To calculate: Sum the gross amounts of two (2) checks and divide by 2 to get an average. Multiply by 2.1667 to get the monthly income. Multiply by 12 to get the annual income.

Example: Check for the first 2 weeks- \$1,000 and Check for the second 2 weeks- \$1,200.  $(1,000 + 1,200) / 2 = 1,100$ . Next-  $1,100 * 2.1667 = 2,383.37$  months. Next-  $2,383.37 * 12 =$  Annual income:  $\$28,600.44$

- iv. Monthly: The most recent paycheck stub.

To calculate: Multiply the gross amount by 12 to get annual income.

Example:  $\$900 * 12 =$  Annual income:  $\$10,800$

F. Unearned Income - is all income that is not earned. Unearned income shall be used in determining eligibility. Some common examples are:

- 1) ~~In kind support and maintenance (food or shelter)~~ Money and Inheritances given to an individual ~~or received by an individual because someone else paid for it, a contribution statement is required;~~
- 2) Private pensions and annuities;
- 3) Payments such as Social Security benefits, Railroad Retirement benefits, Department of Veterans Affairs benefits, civil service annuities, workers' compensation, unemployment insurance, retirement benefits, and payments based on need involving federal funds;
- 4) Life insurance proceeds and other death benefits, to the extent that the total amount is more than the expenses of the deceased person's last illness and burial, and other debts paid by the individual;
- 5) ~~Gifts and inheritances,~~
- 6) Support (not child support) and alimony payments in cash;
- 7) Prizes, awards and winnings;
- 8) Dividends and interest;
- 9) Rents and royalties (except those defined as earned income);
- 10) Certain payments not considered wages for Social Security purposes;
- 11) In-kind payments to certain agricultural worker; and/or
- 12) Jury duty payment.
- 13) ~~Money paid to individuals who are residents, but not employees of institutions.~~

G. Inconsistent Income - frequency varies from week to week, or from month to month due to hours worked. It is considered to be received regularly if an individual can reasonably expect to receive it. Calculation of this income should follow the policy of regular income. Occupations that may fit this description are horticulturist, woodcutter, or substitute teacher, and Gig economy (i.e. ride-share services, food or package delivery, sale of crafts and handmade items, etc.).

H. Seasonal Income – income that is regularly received for only part of the year. Calculation of this income should follow the policy of regular income.

I. Self-Employment Income – If an applicant is self-employed, a copy of the past year’s federal income tax return (to include Schedule C), purchase and sales receipt, or accounting books must be used to establish the source and amount of income.

- 1) The amount to be used in determining eligibility will be the net income available after deduction of business expenses. Subgrantee should include the amount on the Net Profit or (Loss) line from the Schedule C (Form 1040) Profit or Loss from Business (sole proprietorship), divided by 12.
- 2) If it is proven that a self-employed applicant’s current situation has substantially changed in either size or type of operation from the previous year, the current income should be used. Example: A farmer farmed 40 acres in 2017, but because of ill health did not plant a crop in 2018. The income earned in 2017 should not be considered. The farmer should be considered to have zero income.
- 3) If the applicant cannot provide the above items, a notarized statement of income must be provided. ~~they must provide a notarized statement of income.~~

J. Income of Minors

- 1) Earned Income – A minor’s (under 18 years of age) income is excluded in the determination of income eligibility.
- 2) Unearned Income - A minor who receives unearned income such as Social Security or SSI must be included and is listed under the parent or legal guardian in the household.

K. A **zero-income household** is one in which the applicant reports no income is being received by any household members. the subgrantee must confirm additional information from the applicant:

- 1) The applicant must verify how household bills and personal expenses are being paid for. ~~If they are applicant is receiving money or in-kind assistance from someone, an affidavit must be obtained from the person providing the assistance. The statement must include the name of the applicant, their phone number, amount of money received, frequency, and signed by the person providing the assistance.~~ a Contribution Statement Form must be completed and notarized. Money given to the household must be counted as unearned income. If the person pays the bills directly to the vendor, this is not included as unearned income.
- 2) Households may report zero income ~~as a result~~ because of a recent layoff, medical issues, or other events that have occurred within the last 30 days. Documentation shall be submitted to verify the event, and an affidavit signed by the applicant to

declare unemployment or zero-income status. Layoff documentation must be on the employer's letterhead and state the date of the layoff.

- 3) Non-priority households that report zero income **may** be referred to the Community Services Block Grant (CSBG) program to be put into case management, if the client agrees and the subgrantee determines eligibility. Case management is **not** a requirement for ~~eligibility in~~ the LIHEAP program.
- 4) ~~If a household has an open case with Social Security for disability determination, the applicant must show evidence of disability case pending, and present documentation from a medical physician stating the applicant is unable to work. The applicant may be referred to the local Ability to Work office to get an assessment if the applicant has been waiting on a disability determination from Social Security for more than one (1) year. The applicant should return the Residual Functional Capacity Assessment from the Ability to Work office to the subgrantee.~~

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

## Part 24 Chapter 7: Program Process and Procedures

### **Rule 7.1 Walk-ins.**

- A. Applicants should schedule an appointment for services. Walk-ins are discouraged unless in the case of emergencies that must be verified by the applicant. (Applicants must have documentation to verify emergencies in accordance ~~to~~ with Rule 7.10)
- B. ~~If there is a verifiable emergency and the applicant is unable to complete a preapplication, the subgrantee shall assist the applicant with submitting a preapplication and schedule an intake appointment within the 18-48 hour timeframe.~~
- C. An applicant shall not be denied an appointment because of inappropriate attire.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

### **Rule 7.2 Transfers.**

- A. There are two types of client transfers:
  - 1) Intra-agency transfers occur when a client's file is reassigned within an agency. A person with Virtual ROMA agency administration rights ~~is able to~~ can make the reassignment internally without DCS intervention.
  - 2) Inter-agency transfers occur when clients require services but the agency that last provided services does not provide the requested service. For instance, a client may seek weatherization services from an agency that only administers CSBG/LIHEAP. The requesting agency must contact the point of contact of the agency that has ownership to release the file. The agency that has ownership of the client's record must authorize release of the client to the requesting agency via "Concerns" in Virtual ROMA.
- B. Timely transfers are required to avoid any disruptions in client services. If there is an outstanding request for approval, it must be resolved before a transfer can be done. Transfers **must** occur with twenty-four (24) hours of the request. ~~If this is an emergency, it must follow the 18-48 hour rule.~~
- C. No household members shall be approved as part of another household during a 30-day period. Emergency situations should be supported with appropriate documentation.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

### **Rule 7.3 Virtual ROMA.**

LIHEAP subgrantees shall be Virtual ROMA compliant. This compliance includes, but is not limited to:

- A. Every user of the Virtual ROMA system must be registered upon authorization by the subgrantee Executive Director.
- B. Users must agree to the terms and conditions of the use of Virtual ROMA by signing the ‘Confidentiality Statement’ and returning to DCS.
- C. Users are prohibited from sharing user IDs and passwords.
- D. Users are prohibited from scheduling client appointments outside of Virtual ROMA, except in the case of disasters. The subgrantee’s Executive Director shall request in writing and receive approval from DCS in this case.
- E. Subgrantees must ensure that every application for service originates through Virtual ROMA. In the event Virtual ROMA is not available, such as natural disaster, system outage, etc., upon approval by DCS Director, paper applications may be taken. The paper applications shall be entered into Virtual ROMA within two (2) business days of system availability.
- F. Subgrantees generate the electronic GET/PUT files weekly to submit claim forms.
- G. Subgrantees reconcile the payment reports between the fiscal and program units prior to payment. The reconciliation process between outstanding applications in ‘Approved’ and ‘Pending Payment’ statuses must be done after the GET and PUT files have been created.
- H. Subgrantees must adhere to equipment and software specifications to operate Virtual ROMA effectively.
- I. Subgrantees must ensure that personnel with application approval rights thoroughly review applications prior to approval to minimize errors.
- J. Subgrantees must inactivate, within 24 hours, any user(s) who through termination, resignation, job reassignment, or other reasons user is no longer with agency.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

**Rule 7.4 Household Benefit.**

- A. Subgrantees should pay the amount of the bill. Past due amounts, transfer fees, late fees and reconnect fees may be paid. Non-energy related charges should not be paid using LIHEAP funds. If the utility vendor will transfer the old bill to a new account, this is allowable.

- B. For municipalities that have a combined bill (water, gas, electric, etc.) the past due amount must be itemized and only the gas and electric portion can be paid.
- C. ~~Propane households should receive benefits in the amount of 100 gallons plus any applicable fees, per request up to the benefit matrix amount. If a vendor has a minimum of over 100 gallons to receive services/assistance, an exception is allowed for the subgrantee to pay the vendor's minimum requirement. Proof from vendor must be uploaded to Virtual ROMA and a hard copy added to the client's file.~~

Propane clients must obtain a 12-month account printout of their account from the company. Also, an quote invoice for 100 gallons (on company letterhead or printout) with the price of gas per gallon, times the number of gallons (~~up to 100~~) plus any applicable fees must be obtained. Example: 100 gallons times \$3.00 per gallon = \$300.00 plus other fees (list them) \$15.00 = \$315.00. If the client cannot obtain this information, the agency must contact the propane company to obtain it.

- Tanks must be regulated and installed by a propane vendor.
- If a vendor has a minimum of over 100 gallons to receive services/assistance, an exception is allowed for the subgrantee to pay the vendor's minimum requirement. Proof from vendor must be uploaded to Virtual ROMA and a hard copy added to the client's file.
- For households with smaller propane tanks (less than 100-gallon tanks), the agency should approve the household for 100 gallons (cylinders, bottles and tanks that can be exchanged are not allowed).
- If a client has an outstanding propane bill, the amount of the bill should be paid. If the client needs additional propane gas the agency can allocate the 100 gallons of gas, as stated above up to the benefit matrix amount. Example: If a client has an outstanding balance of \$500, and a matrix benefit amount of \$700, the client can only receive \$200 towards the 100-gallon quote. (Agency must contact the propane company to negotiate the balance.)
- All propane payments must be based on immediate need. There should be no payments for several months in advance.
- In the event the price of propane changes prior to delivery by the vendor and receipt of payment from the agency, and the client does not receive the full 100 gallons of propane as a result, a 12-month history of propane deliveries should be obtained. This documentation will serve as sufficient verification.
- For Propane customers, the caseworker must contact the vendor to obtain a quote minus the credit amount. Electric and natural gas bills should not be paid if there is a credit balance.

**The agency is required to obtain proof of delivery including delivery amount from the vendor each time the client receives LIHEAP assistance with propane. The documentation (e.g. delivery ticket, invoice or current 12-month printout) must be uploaded to the client's Virtual ROMA score card before any additional propane assistance can be allocated.**

- D. Propane Budget Plan bills, the agency should only pay the current planned payment amount. Do not request a quote nor pay for 100 gallons of propane.
- E. Pre-pay accounts – Caseworker should access the company’s portal or website. A copy of the client’s account page should pull up. It will state an average bill amount which is an average monthly amount. **The average bill amount should be allocated, plus any past due amount.** The total amount allocated must not exceed the benefit matrix amount for the client. If an energy company does not have a portal/website to access this information, the client must obtain a printout from the energy company to state this information. The printout must be scanned into VR2 and tagged to Invoice/Bill for energy type.
- F. Subgrantees may use vendor portals, when possible, to verify the amount of the bill(s).
- G. In addition to the household benefit amount, additional benefits can be provided to the client. The additional benefits include Blankets, coats, heating/cooling system repair or replacement, furnaces, vented space heaters, hot water tanks, air conditioners, and fans. Additional energy related materials/services (such as home meter bases, utility poles/gas line hook-ups/repairs, and energy kits/incentives) may be provided depending on need and State Office approval.
- H. Other miscellaneous charges on the bill that are not energy-related cannot be paid, such as appliance purchases, ~~or~~ tampering fees, returned check fees, and charge/write offs.
- I. If a household uses part of the residence for self-employment or work-at-home, a prorated bill for residential use must be provided. Only the amount of the residential portion can be paid from LIHEAP funds.
- J. ~~Emergency LIHEAP Assistance for Life Threatening Medical Issues: In the event an applicant is at risk of disconnection of a utility that is a necessity for any medical equipment or devices needed to sustain life, the applicant should be treated as a Life Threatening Crisis case and should be interviewed same day and approved within 18 hours of their initial application. Supporting documents should be provided at the time of interview and scanned into Virtual ROMA and placed in the applicant's file.~~

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 7.5 Fees and Deposits.**

- A. Rental of propane tanks, pressure testing, surcharges, and any additional fees related to propane usage are considered allowable expenses.
- B. Reconnect fees or late fees resulting from a client's inability to pay can be paid from LIHEAP funds. The Subgrantee should advocate with energy vendors to ask for waivers of these fees.
- C. As part of the client's consumer education/energy conservation sessions, the case worker should communicate the importance of making timely payments or requesting extensions with energy vendors to avoid such fees.
- D. If reconnect fees or late fees are incurred because of the subgrantee's negligence or failure to make timely payments, these fees cannot be paid from LIHEAP funds. Fees must be paid from non-federal funds.
- E. Deposits may be paid more than once, depending on the household situation, such as emergency or life-threatening situations, as described in section 7.10. If a household has requested more than four (4) deposits, subgrantee should refer the household to case management to stabilize the household, however compliance/non-compliance with case management is not a requirement for additional LIHEAP services.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 7.6 Criminal/Illegal Activities**

- A. LIHEAP funds may not be used to pay for any criminal acts punishable with fines, fees, penalties, and/or imprisonment. An application that is submitted for a bill which explicitly states that part of the bill is inclusive of illegal activity such as tampering and other theft for services shall not be approved until the tampering fees/penalties are paid by the client.

The client must bring in receipt as evidence that fees have been paid prior to any LIHEAP funds being obligated. If a new bill cannot be generated with new balance, the caseworker must deduct the illegal fees as shown on the bill and attach receipt when uploading into Virtual ROMA.

- ~~B. The energy vendor may adjust the bill to remove caseworker must deduct the illegal fees as shown on the bill. and the Subgrantee can pay the portion that does not include such fees and penalties. Further, fees and penalties must be paid prior to any LIHEAP funds being obligated on behalf of the client's bill.~~

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 7.7 Client Confidentiality.**

- A. MDHS and its subgrantees are responsible for protecting the confidentiality of client information. ~~All client's personal information received must be processed within five (5) business days.~~
- B. Subgrantees must maintain client files under lock and key.
- C. Client appointments should be conducted in areas where the conversation cannot be overheard by others.
- D. Subgrantee staff should not discuss ~~client~~ confidential client information with other staff unless to coordinate or proceed with client services.
- E. Even though the Virtual ROMA system has a screen for all users to agree to confidentiality before entering client data, each subgrantee staff member is required to sign a 'Confidentiality Statement' and submit to DCS prior to being granted access to the Virtual ROMA system.
- F. Client information should only be discussed with other service organizations/partners when referring a household for additional services.
- G. The client must sign the 'Authorization of Release of Information Form' (Form ARF 001) ~~in order~~ for the subgrantee to refer the household for other services.

The only exception to the confidentiality requirement is if a client or household member discloses potential domestic abuse, child abuse/neglect, elderly abuse/neglect, or disabled abuse/neglect; the information must be reported to the proper authorities, regardless of the consent of the client.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

**Rule 7.8 LIHEAP Benefit Matrix**

- A. The LIHEAP Act stipulates that households with the highest energy costs and needs receive the greatest benefit. LIHEAP benefits are paid based on household income, size of household, energy type, and main heating fuel source. LIHEAP benefits shall not exceed \$1500 per program year for a household. See Benefit Matrix Attachment.
- B. Subgrantees should be careful during the intake process to select the appropriate energy type when asking applicants about ~~their~~ the homes' main heating fuel. The main heating fuel is not what bill the applicant is seeking to be paid, but it is how the applicant primarily heats the home. The main heating fuel must not be changed unless the household moves. Also, if a mistake was made by the Subgrantee or client, the main

heating fuel can be changed at the beginning of the next program year, once approval has been granted by DCS.

- C. A client cannot exceed their cap by energy type. For example, if, for a one-person household, the propane bill is \$900 and the overall cap is \$1,200, the agency cannot pay more than the propane limit of ~~\$600~~ 650 even if client has not reached the overall cap of ~~\$1,100~~ 1,200.

- 1) Example: If a client has an annual household income of \$14,500 and their household size is one (1), their maximum LIHEAP benefit for the program year of ~~2018~~ 2025 is \$1,100. How the home is heated, determines the following ~~Depending on how they home their home the~~ benefit caps by energy type:
- i. Propane: ~~\$600~~ 650
  - ii. Electric: ~~\$500~~ 550 or ~~\$1,100~~ 1,200 (for total electric households)
  - iii. Natural Gas: ~~\$500~~ 550
  - iv. Wood: ~~\$240~~ 280
  - v. The benefit amounts are recalculated as income changes if client returns for additional assistance during the program year.

- D. The “Total Electric” column represents the yearly amount that a total electric household may receive. All other households may receive a total of the electric column and the main heating source column that ~~they~~ is used.

- E. Propane households should receive benefits in the amount of 100 gallons, per request up to the benefit matrix amount.

- F. The cost for the replacement, repair, or purchase of heating or cooling equipment does not count against the benefit matrix amount for the program year.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

**Rule 7.9 Priority Population Procedures.**

- A. Elderly and disabled households should be seen in person once a year for regular appointments each time assistance is requested. For subsequent request for assistance, application should be via phone interview. Any changes in income can be verified by email, mail, uploading into CWP or delivered to the office. For subsequent request only “Signature on File” can be noted by caseworker in place of actual client signature.
- B. Subgrantees can send appointment notices to elderly and/or disabled clients in December to be seen in January because new Social Security and SSI income letters will be received. Should further assistance be needed during the year, the client must submit a new application and provide the required documentation. Subgrantees should allocate the full amount of the bill including applicable fees (past due, transfer, etc).

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 7.10 Crisis and Emergency Services.**

Mississippi offers a year-round crisis assistance component of LIHEAP, entitled the **Energy Crisis Intervention Program (ECIP)**, provides assistance to low-income households who have encountered a crisis situation within the last 30 days. **Agencies should utilize partnerships to alleviate crisis until client's eligibility is determined.**

A. Life Threatening Crisis (LTE) – Eligible households with a life-threatening energy crisis must have the crisis relieved within **18 hours** of an approved application. Resolution of a life-threatening crisis may include, but is not limited to: arranging for an immediate supply of fuel, securing a payment arrangement with the energy vendor, pledging the amount of the bill to prevent shutoff, or to restore service, purchase of heating/cooling equipment, etc. The following are considered life threatening.

- 1) Disaster (fire, gas, leak, etc.)
- 2) Person(s) on life support or medical devices that require electricity. **In the event an applicant is at risk of disconnection of a utility that is a necessity for any medical equipment or devices needed to sustain life, the applicant should be treated as a Life-Threatening Crisis case and should be interviewed the same day and approved within 18 hours of the applicant's initial application. Supporting documents should be provided at the time of interview and scanned into Virtual ROMA and placed in the applicant's file.**
- 3) Domestic violence, and/or
- 4) **The abuse/neglect of** elderly, disabled, or child ~~abuse/neglect~~

B. Non-Life-Threatening Crisis (NON-LTE) – Eligible households with a non-life-threatening energy crisis must have the crisis relieved within **48 hours** of an approved application. Resolution of a non-life-threatening crisis may include, but is not limited to: arranging for an immediate supply of fuel, securing a payment arrangement with the energy vendor, pledging the amount of the bill to prevent shutoff, or to restore service, purchase of heating/cooling equipment, etc. The following are considered non-life threatening.

- 1) Unexpected expense such as death of an immediate family member, funeral expenses, high medical expenses, etc;
- 2) Income loss within the last thirty (30) days (of the date the subgrantee was contacted) due to layoff or termination of benefits;
- 3) Services are disconnected or threatened to be turned off;
- 4) Theft;

- 5) Displacement of a minor child (under the age of 18) due to the client's inability to pay utilities, rent, etc.; and/or
  - 6) Other documented emergencies within the last thirty (30) days, as deemed acceptable by the subgrantee.
- C. LIHEAP Assistance for Disaster Relief – Disaster (fire, gas, leak, etc.); Natural disaster (fire, hurricane, tornado, flood, etc.) or extreme inclement weather conditions determined by the National Weather Service and/or declared by the President or Governor. Allowable uses of LIHEAP funds for home energy-related needs resulting from a natural disaster or disasters include:
- 1) Costs to temporarily house or shelter individuals in which homes have been destroyed or damaged
    - i. Hotels (up to 5 days),
    - ii. Apartments (1 month rent and deposit), or
    - iii. Other living situations that place people in settings to preserve health and safety and to move them away from the crisis situation
  - 2) Costs for transportation (such as cars, shuttles, buses, etc.) to move individuals away from the crisis area to shelters, when their health and safety is endangered by loss of access to heating or cooling
  - 3) Utility reconnection costs (does not include water and sewage),
  - 4) Repair or replacement cost for furnaces, air conditioners and heaters,
  - 5) Insulation repair,
  - 6) Coats and blankets, as tangible benefits to keep individuals warm,
  - 7) Crisis payments for utilities and utility deposits,
  - 8) Purchase and installation of fans, air conditioners and heaters,
  - 9) Purchase and installation of generators,
  - 10) Costs associated with mobile outreach, and
  - 11) Other needed items (contact DCS for approval).

The costs related to utility cost such as utilities, deposits, reconnect fees, and late fees are counted against the annual matrix amount per household. Other costs shall not be counted against the annual matrix benefit amount per household.

- D. Subgrantees shall, under no circumstances, state the applicant ~~tell a client they~~ must have a disconnect notice to apply for assistance. This may put a household in a crisis situation which could be avoided by assisting with regular LIHEAP assistance.
- E. Applicants who are ineligible for crisis benefits shall be referred to other organizations that may be able to assist, or the subgrantee may contact energy vendor(s) on the applicant's behalf to see if a payment arrangement or extension is available.
- F. Multiple emergency requests by a client may result in the subgrantee referring client to CSBG program for intensive case management. However, case management is not a requirement for LIHEAP services.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

## **Part 24 Chapter 8: Vendor Requirements**

### **Rule 8.1 Vendor Agreements.**

- A. Subgrantees must secure vendor agreements from energy vendors who receive energy payments on behalf of clients. New vendor agreements must be obtained annually, if terms change or by MDHS requirement.
- B. W-9 forms from each vendor must be added to the Virtual ROMA system by the Fiscal Officer/appointee. W-9 forms must be dated within the current year. DCS will approve all vendor request before services can be rendered.
- C. Subgrantees must maintain original vendor agreements indefinitely.
- D. Vendor agreements are not needed for equipment purchases such as air conditioners, heaters, etc.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

### **Rule 8.2 Vendor Refunds.**

- A. Vendor payments refunded to a subgrantee may occur as a result of a household moving, closing an account, other household circumstances, or instances of error or fraud.
- B. Accurate accounting of vendor refunds requires subgrantees and energy vendors to coordinate carefully.
- C. Subgrantees must inform energy vendors to send the refund checks to the agency that submitted the payment on behalf of the household.

- D. If the refund is for a deposit, the vendor can utilize the funds to offset the final bill. However, if there is an overage, the funds must be returned to the subgrantee.
- E. The **vendor must include the** following information ~~must be submitted~~ with each refund check, even if the refund check is for more than one household:
- 1) Household's name (name on the account)
  - 2) Address
  - 3) Account number
  - 4) Amount of household refund
  - 5) Year credit occurred
  - 6) Date of payment on account
  - 7) Reason for refund
- F. Subgrantees should account for these refunds separately in ~~their~~ **the subgrantees'** accounting system. It is very important that each refund be identified by the LIHEAP program year.
- G. ~~Effective immediately, with~~ **All LIHEAP grants that are still *open (current)*, the Vendor Refunds *must go back into the awarded amount at the agency level to be reissued as benefit to any household.* However, the agency must still request the required documents from the Vendor for your records and credit the client's account accordingly in the VROMA system.**
- H. **Agency Fiscal management user(s) are required to complete the vendor refund process within Virtual ROMA after receiving a refund check from the vendor.**
- I. **The refund amount should be credited back to the client's LIHEAP Benefit Matrix.**
- J. ~~Effective as of the 2015 LIHEAP grant year, subgrantees must return all vendor refunds~~ **Subgrantees *must return all vendor refunds for all grants where the period of performance has ended (closed)* to the Department of Human Services- Division of Community Services. *Subgrantees must submit one check for all refunds received for the previous year(s) closed LIHEAP grants no more than twice a year (June 30<sup>th</sup> and December 31<sup>st</sup> of each year).* current year LIHEAP grant (for program year January 1– December 31, 2018) by January 31, 2019. For grants that are extended (carried over), all refunds received from January 1– June 30, 2019) should be submitted in one check to be received by July 31, 2019. Subsequent years will follow this schedule.**

Subgrantees must submit the following information with each subgrantee refund check:

- 1) Vendor Name and Vendor check #
- 2) Household name for each refund
- 3) Address
- 4) Account number
- 5) Client ID number
- 6) Amount of household refund

- 7) Reason for refund
- 8) LIHEAP grant year
- 9) Date of benefit
- 10) Date refund received by Subgrantee, and
- 11) **The required Procurement Services document for processing payment. (See example in the Forms/Resources section Virtual ROMA)**

K. Subgrantee checks should be made payable to: Treasurer, State of Mississippi and mailed to:

Director, Division of Community Services  
200 South Lamar Street  
Jackson, Mississippi 39201

L. ~~Current year vendor refunds will be awarded to subgrantees in their modifications.~~  
MDHS-DCS will return any prior year refunds to the Department of Health and Human Services, Office of Community Services.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: March 2025*

### **Rule 8.3 Vendor Payments.**

Subgrantees must make payments on client accounts to vendors within twenty (20) business days of application approval. Failure to comply will result in a DCS request for ~~Program Integrity~~ **MDHS Division of Monitoring** to conduct an additional monitoring visit which may result in monitoring finding ~~questioned cost~~.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

## Part 24 Chapter 9: Program Compliance

### Rule 9.1 Reporting and Accountability.

- A. LIHEAP Household Report information collection is conducted in accordance with the Low-Income Home Energy Assistance Program (LIHEAP) statute (Public Law 97-35, as amended), and 45 CFR 96.82. Information received from this collection provides data to the Administration and Congress in its oversight of grantees' performance in administering the LIHEAP program. The responses to this collection are required in order to obtain LIHEAP funding in accordance with Section 2605(c) (1) (G) of the LIHEAP statute.

The purposes of the LIHEAP Household Report are to report on the number of households assisted with current federal fiscal year funds and those LIHEAP funds obligated in the prior federal fiscal year but not expended until the current federal fiscal year.

- B. Program Integrity Assessment is part of an effort by HHS to ensure that effective preventive controls, fraud detection, monitoring, and prosecution systems exist at all levels of the program's administration to prevent improper payments, fraud, waste or abuse. Subgrantees must specifically address how the plan will address key elements of an effective fraud prevention system.
- C. LIHEAP Performance Measures report is required by The Office of Community Services (OCS) as a part of the LIHEAP statute to report to Congress on program impacts annually, to develop performance goals, to ensure that benefits are targeted to those households with the greatest home energy need, and to assure that timely resources are available to households experiencing home energy crises.

OCS published a Federal Register notice on June 6, 2013, announcing ~~their~~ OCS's intent to seek authorization to require state LIHEAP grantees to report on several new outcome-based LIHEAP performance measures. OCS is now proposing to collect annual data that will establish four performance indicators of the impact of LIHEAP services on its recipients. The data collected will be synthesized to create the following performance measures:

- 1) Benefit Targeting Index for High Burden Households – measures the extent to which the highest benefits are provided to the LIHEAP recipient households with the highest energy burden (the percent of gross income spent on utility costs),

- 2) Energy Burden Reduction Index for High Burden Households – measures the extent to which LIHEAP benefits are adequate to deliver the same energy burden reduction to high burden recipient households as to low and moderate burden recipient households,
  - 3) Prevention of Loss of Home Energy Services - the unduplicated count of households where LIHEAP prevented the loss of home energy services, and
  - 4) Restoration of Home Energy Services - the unduplicated count of households where LIHEAP restored home energy services to the client.
- D. Leveraging Report - The State of Mississippi shall participate in the LIHEAP Leveraging Incentive Program. Subgrantees are required to report annually on leveraged resources/benefits received to further assist low-income households with energy-related services. Examples of leveraged resources/benefits include but are not limited to discounts, arrearage forgiveness, deposit waivers, weatherization material donations, reconnect fee waivers.
- E. Monthly Cost Sheets are required to be submitted monthly by Subgrantees to show expenditures by cost category and line items. These forms should be submitted to the Division of ~~Budgets and Accounting, Office of Procurement Services~~ Community Services.
- F. Closeouts - Please see the ‘MDHS Subgrant Manual’ found at <https://www.mdhs.ms.gov/support/procurement/resources> for closeout policy. Closeouts are due within 45 days of the subgrant end date to DCS per the manual.

*Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

**Rule 9.2 Client Complaints/Concerns.**

DCS receives client complaints and concerns from the MDHS Constituent Services unit, phone calls/emails from clients or other individuals. Subgrantees should follow these steps when responding to DCS:

- A. DCS will submit the client complaint/concern ~~form~~ in the DCS Client Tracker.
- B. The subgrantee must contact the client and provide a response and/or resolution in the client tracker within ~~one (1) to three (3)~~ two (2) business days depending on the severity of the case.
- C. If additional time is required to completely resolve the issue, the subgrantee must note in the tracker that additional time is needed.

- D. If the concern is not handled within ~~three~~ two days, an email will be sent to the Executive Director to notify them of concern and to provide a response within twenty-four (24) hours.
- E. If a client makes a complaint at the subgrantee's office, the subgrantee should attempt to resolve issues before giving the DCS number to the client.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 9.3 Case Files.**

- A. Applications and supporting documentation for applicants must be kept in individual case files. Case files must be filed in alphabetical order according to the last name. ~~They~~ Case files should always be maintained under lock and key and housed in the local county of residence of the client. Active case files and inactive case files should be maintained separately.
- B. Case files must not contain copies of client personal identity information (PII) such as social security cards, birth certificates, photo id, etc. These documents must be scanned into Virtual ROMA only and given back to the client.
- C. Please refer to the MDHS Subgrantee Agreement Manual for file retention requirements. However, as a general rule, case files must be maintained for three (3) years. If there is a documented case of waste, fraud, and abuse, audit findings, or if a fair hearing was conducted, the file must be maintained for ten (10) years.
- D. The following documents must be in a case file and scanned into Virtual ROMA:
  - 1) Proof of income for all household members,
  - 2) Copy of bill(s) to be paid or portal printout from energy vendor,
  - 3) Intake Form (signed and dated),
  - 4) Authorization of Release of Information form (signed and dated),
  - 5) RFAI form (signed and dated, if applicable),
  - 6) Notification of Services form, and
  - 7) Notification of Pending Services form.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

**Rule 9.4 Threatening Behavior**

- A. Any applicant who engages in the use of aggressive or disruptive language, threats, or behavior against a subgrantee agency, subgrantee staff, subgrantee contractor, or state/federal staff shall be prohibited from receiving services for one year from the date of the incident, for the first offense. That staff person must complete an incident report and

submit it to their Executive Director. The incident report should be uploaded into Virtual ROMA and the client case coded as sanctioned.

Any subsequent threats or disruptive behavior will permanently disqualify the client from receiving services. The staff must complete an incident report and submit it to their Executive Director. The incident report should be uploaded into Virtual ROMA and the client case coded as permanently sanctioned.

- B. ~~When a threat or occurrence of physical contact is made against a subgrantee agency, subgrantee staff, subgrantee contractor, or state/federal staff, that staff person must complete an incident report and submit it to the subgrantee's Executive Director. Any kind of physical contact or physical threats with firearms or weapons will disqualify an applicant or household from services permanently. During such an incident, the subgrantee's Executive Director must contact local authorities and file a police report.~~ Any kind of physical contact or physical threats with firearms or weapons made against a subgrantee agency, subgrantee staff, subgrantee contractor, or state/federal staff, will disqualify an applicant or household from services permanently. The staff must notify their Executive Director immediately. The Executive Director must contact local authorities and file a police report. A copy of the report and detailed account of the incident must be kept in the client's file, scanned into Virtual ROMA and coded as sanctioned, and a copy must be submitted to the Director of the Division of Community Services.

*Source: 45 CFR 98.20; Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

### **Rule 9.5 Waste, Fraud, and Abuse.**

The Mississippi Department of Human Services has zero tolerance for the commission or concealment of acts of waste, fraud and abuse. Allegations of such acts will be investigated and pursued until the logical conclusion, including legal action when warranted.

A. Definitions of Waste, Fraud and Abuse

Waste involves the taxpayers not receiving a reasonable value for money in connection with any government funded activities due to an inappropriate act or omission by players with control over or access to government resources.

Fraud is a type of illegal act of obtaining something of value through willful misrepresentation or a false representation of a material fact, whether by words or by conduct, by false or misleading allegations, or by concealment of that which should have been disclosed, which deceives another so that he acts, or fails to act to his detriment.

Abuse involves behavior that is deficient or improper when compared with behavior that a prudent person would consider reasonable and necessary business practice given the facts and

circumstances. Abuse also includes misuse of authority or position for personal financial interests or those of an immediate or close family member or business associate.

Additional examples of Waste, Fraud and Abuse include but are not limited to:

- i. Misrepresenting household size or income
- ii. Falsifying application
- iii. Forging documents needed to complete intake
- iv. Omitting client information
- v. Creating ghost clients
- vi. Charging application fees
- vii. Former employee having access to software and system
- viii. Receiving kickbacks from vendor
- ix. Gross mismanagement or gross waste of funds

B. General Reporting of Waste, Fraud and Abuse

DCS encourages and enables, without retaliation or the fear of retaliation, employees, board of directors, vendors, volunteers, clients and the general public to disclose information believed to be waste, fraud, and abuse of CSBG & LIHEAP funding.

Complaints of waste, fraud and abuse will be handled according to the process established in this policy.

Anonymous reports may be submitted to the Office of Inspector General via 1-800-299-6905 or by mail.

MDHS  
Office of Inspector General  
200 South Lamar Street  
Jackson, MS 39201

Providing specific occurrence details of suspected waste, fraud, and abuse will expedite investigative efforts. There is no requirement to submit identifying information from those who wish to report suspected waste, fraud, and abuse.

Tips will be investigated in the order that they have been received with no preference given to those who provided identifying information.

C. Agency Reported Suspected Waste, Fraud and Abuse

1) Reporting Suspected Client Fraud

If an agency suspects that a client has committed waste, fraud or abuse, it is incumbent upon the agency to do their due diligence to review and provide documentation in support of their claim (documentation should include but is not limited to proof of misrepresentation or falsified document). All suspected fraud should be reported immediately.

- i. All claims must be submitted to DCS for review. Documentation should be uploaded into Virtual ROMA for DCS to complete a review prior to notifying the agency of actions to be taken. The claim will either be substantiated, denied, or referred to the MDHS Office of Inspector General.
  - ii. For substantiated claims, clients will be denied assistance following program penalties and will be coded as sanctioned in Virtual ROMA.
- 2) Reporting Suspected Representative of an Agency Fraud - Representatives of an agency include employees, board members, or volunteers.

If it is suspected that a representative of an agency has committed waste, fraud or abuse, it is incumbent upon the individual reporting the fraud to provide documentation in support of their claim. Documentation should include but is not limited to proof of misrepresentation or falsified document. All suspected fraud should be reported immediately at [dcsfraudreporting@mdhs.ms.gov](mailto:dcsfraudreporting@mdhs.ms.gov).

- i. Suspected waste, fraud or abuse by an employee of an agency should be reported to their immediate supervisor. If the reporter's supervisor is suspected of fraud, it should be reported to the Executive Director. If it is believed that the Executive Director may be committing fraud, the activity should be reported to the Board of Directors. The Division of Community Services should also be notified when an executive director has been reported to the Board.
- ii. If it is believed that a member of the Board of Directors is involved, then the activity shall be reported to the Office of Inspector General at 1-800-299-6905 or by mail. The Division of Community Services should also be notified.

MDHS  
Office of Inspector General  
200 South Lamar Street  
Jackson, MS 39201

- iii. In the event that the agency is unable to support its claim but suspects that waste, fraud and abuse has taken place, the case **must** be referred to MDHS Office of Inspector General for investigation at 1-800-299-6905 or email [fraud@mdhs.ms.gov](mailto:fraud@mdhs.ms.gov).

3) Reporting Vendor Suspected Waste, Fraud, or Abuse

If it is suspected that a vendor has committed waste, fraud or abuse, it is incumbent upon the individual reporting the fraud to do their due diligence to provide

documentation in support of their claim. Documentation should include, but is not limited to, proof of misrepresentation or falsified document.

- i. All claims must be submitted to DCS for review. Documents must be uploaded into Virtual ROMA for DCS to review. Upon completion of DCS' review, a response will be provided to the agency indicating if the claim has been substantiated, denied, or referred. If the claim cannot be substantiated or denied by DCS, the claim will be referred to the MDHS Office of Inspector General.

D. Penalties for Waste, Fraud and Abuse

- 1) A client who has committed waste, fraud and abuse will be subject to the following sanctions:
  - i If it is the client's first offense, the individual's household will be ineligible for services for an entire year from the date of the decision and benefits will be recouped if necessary. Caseworkers must also code the client's case as sanctioned in Virtual ROMA.
    - If the client is an Employee/Board Member or Volunteer of the agency they must also be terminated, removed from the board or deemed as ineligible to volunteer with any of the agency's programs.
  - ii If it is the client's second offense, the individual's household will be ineligible for services for twenty-four months from the date of the decision and benefits will be recouped if necessary.
  - iii If it is the client's third offense, the individual will be disqualified permanently from all DCS funded programs and is subject to prosecution and/or recoupment of any benefits provided, following due process as defined in agency regulations.
- 2) If a representative of the Agency has committed Waste, Fraud and Abuse they shall be terminated or removed from the board. Additionally, they may be subject to prosecution and/or recoupment of any benefits provided, following due process as defined in agency regulations.
- 3) If a vendor has committed waste, fraud and abuse, the vendor will be suspended from participation and may be subject to prosecution and/or recoupment of any benefits provided, following due process as defined in agency regulations.
- 4) If there is an error that was caused by the agency's mistake, misrepresentation or fraud and it results in overpayment, the client or vendor must not be held responsible for repayment. The subgrantee is responsible for repayment from non-federal funds.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026*

**Rule 9.6 Whistleblower Protection.**

According to the Mississippi Code Section 25-9-173, et seq. an employer cannot dismiss or otherwise adversely affect the compensation or employment status of an employee who testifies or provides information to an investigative body.

Source: *Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: [January 2026](#)*

**Rule 9.7 Monitoring and Audit**

The Mississippi Department of Human Services (MDHS) is required to monitor the activities of its subgrantees by following the Single Audit Act Amendments of 1996, the Office of Management and Budget (OMB) Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, and the OMB Circular A-133 Compliance Supplement. MDHS shall monitor each project, program, subgrant, function, or activity supported by a Federal award to assure compliance with applicable Federal regulations and that performance goals are achieved.

A. Monitoring

- 1) The Department of Health and Human Services (DHHS) requires States to conduct on-site monitoring of LIHEAP subgrantee's once every three (3) years. MDHS elects to conduct an annual monitoring visit to ensure compliance with applicable Federal and State regulations, policies, and procedures.
- 2) MDHS has established uniform monitoring policies designed to ensure that all subgrants under the jurisdiction of MDHS are administered in compliance with Federal requirements and with the terms of the subgrant agreements. Monitoring subgrants, for compliance with the applicable Federal regulations, State laws, Agency policies, and the terms of the subgrant agreements, is the responsibility of the MDHS Division of Monitoring. Please see the 'MDHS Subgrant/~~Agreement~~ Manual' found at [www.mdhs.ms.gov/subgrantee-manual/](http://www.mdhs.ms.gov/subgrantee-manual/) <https://www.mdhs.ms.gov/support/procurement/resources/> for the complete monitoring policy.
- 3) Subgrant monitoring procedures may include several of the various options available. These options include reviewing reports submitted by the subgrantee; reviewing documentation supporting expenses reported under MDHS subgrants; reviewing the subgrantee's single audit or program-specific audit results and evaluating audit findings and the subgrantee's corrective action plan; performing on-site reviews of fiscal and programmatic records and observing subgrantee operations; and/or arranging for limited scope audits of specific compliance areas.

## B. Single Audit

- 1) The Director of the Division of Monitoring reviews the subgrantee's audit findings, and forwards them to the Division of Community Services and the Monitoring Supervisor.
- 2) The audit finding(s) is then placed on a spreadsheet, discussed during monitoring visits with the said subgrantee, and addressed on the monitoring report performed by the Division of Monitoring.
- 3) Please see the 'MDHS Subgrant/~~Agreement~~ Manual' found at [https://www.mdhs.ms.gov/administrative\\_codes/](https://www.mdhs.ms.gov/administrative_codes/) <https://www.mdhs.ms.gov/support/procurement/resources/> for specific Single Audit requirements.

## C. Federal Program Compliance Review

- 1) At any time, the Department of Health and Human Services, Office of Community Services, Division of Energy Assistance may conduct a program compliance review of the State.
- 2) During this review, subgrantees are selected to be monitored on program compliance. Subgrantees must cooperate fully with federal reviewers and provide any requested documentation.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

### **Rule 9.8 Fair Hearing & Appeal Process**

An applicant or recipient has the right to request a Hearing or Appeal if they are dissatisfied with the denial, delay, cancellation, or any adverse decision related to the client's application for services.

#### A. Types of Hearings

##### 1) Appeal (Agency Level)

###### i. Basis for an Appeal

- Incorrect bill submitted
- Information provided is insufficient to determine eligibility
- Requested additional information not returned within ten (10) calendar days
- Non-compliance with CSBG Case Management Plan

- Threatening behavior toward staff
- The client's claim for assistance was not acted upon with reasonable promptness

If a client submits a Fair Hearing request for any of the above-mentioned reasons their request will be automatically denied.

- ii. The client must submit a **request for an appeal** within **thirty (30) calendar days** of the denial or adverse action.

The request must be submitted on <https://virtualroma.mdhs.ms.gov/> and include all of the following:

- Name of Community Service Agency
- Full Name and Address
- Date of Denial or Adverse Action Notice
- Stated Reason(s) for Denial or Action
- Reason(s) for Appeal Request

The client's request will be submitted to the Executive Director and Board Chair. **The Executive Director and Board Chair will have 15 calendar days to contact the client to schedule an appeal. After scheduling and hearing the grievance, the Executive Director and Board Chair will then have 15 calendar days to make a final determination in regard to the appeal.**

## 2) Fair Hearing (MDHS Level)

### i. Basis for a Fair Hearing

- If the client was denied at the agency-level appeal process and has met all the criteria for a complete application, but still feels they are eligible for services for the following reasons:
  - Disagreement with the appeal denial itself
  - Incorrect information or assessment
  - Procedural error
  - Discrimination
  - Failure to make a timely decision
  - Changes in circumstances
  - Other \_\_\_\_\_

Clients must first exhaust the agency-level appeal process before requesting a Fair Hearing with the Mississippi Department of Human Services (MDHS).

ii. Requesting a Fair Hearing

The client can request a fair hearing by calling 601-359-4921 or by completing a MDHS Programmatic Appeal Request form at (<https://www.mdhs.ms.gov/wp-content/uploads/2023/12/MDHS-OIG-200-Programmatic-Appeal-Request-Form.pdf>)

iii. Submitting a Fair Hearing Request

The client can submit a MDHS Programmatic Appeal Request form by:

Email: [admin.hearings@mdhs.ms.gov](mailto:admin.hearings@mdhs.ms.gov)

Fax: 601-359-5047

Mail: Mississippi Department of Human Services  
Office of the Inspector General  
Administrative Hearings  
P.O. Box 352  
Jackson, MS 39201

iv. After submitting a Fair Hearing Request

The client will receive a notice letting them know a date and time for their fair hearing. Usually, fair hearings are conducted over the phone.

During the hearing, the client will be given the opportunity to present their position fully and explain why they believe that the decision made by Agency was wrong. The client may bring any evidence that they believe supports their position. MDHS may also present information about why the agency believes the decision was correct.

After hearing from both sides, the hearing officer will make a decision about whether the agency's decision was wrong and should be changed or the agency's decision was correct and should not be changed.

**Important Information**

If at any point during the appeals process, the initial denial or adverse action is reversed, appropriate corrective actions, including processing payments or reinstating services, will be taken by the Community Service Agency in a timely manner.

Please note: **Lack of available funding** in the client's county is not subject to a Fair Hearing. In such cases, subgrantees should:

- 1) Refer applicants to other service providers,
- 2) Utilize non-federal funds where possible,
- 3) Maintain a waitlist of applicants to prioritize once funds become available.

### **Contact Information**

If the client has questions about this notice or the appeals process, please have them to contact the local **Community Service Agency/Human Resource Agency** or the **Mississippi Department of Human Services** at [admin.hearings@mdhs.ms.gov](mailto:admin.hearings@mdhs.ms.gov).

\*A copy of the Fair Hearing & Appeal Process must be posted at each agency and county office for clients to view.

Source: Miss. Code Ann. § 43-1-2(4); Miss. Code Ann. § 43-1-4. Revised: January 2026

~~A. A fair hearing is available for any applicant or recipient upon written request. A fair hearing provides an opportunity for a more formal review by the subgrantee's Board of Directors concerning the point(s) of dissatisfaction. If the applicant or recipient is still dissatisfied from said Boards' decision, the decision may be appealed to the Division of Administrative Hearings.~~

~~B. Basis for a Fair Hearing~~

- ~~1) Applicant(s) or recipient(s) shall be provided a copy of the 'Fair Hearing Process' during each application or recertification. Upon denial of services, a copy of the 'Fair Hearing Process' will be mailed with the denial letter to the applicant. A copy of the process will also be clearly posted in all subgrantee office locations.~~
- ~~2) The basis for a fair hearing is listed below:
  - ~~a. An applicant or recipient whose application or recertification concerning eligibility assistance was denied;~~
  - ~~b. An applicant or recipient whose claims for assistance are not acted upon reasonable promptness; or~~
  - ~~c. Any other adverse action that detrimentally effects the applicant or recipient by the subgrantee and/or agency~~~~
- ~~3) Some issues are not subject to fair hearings, in which includes but not limited to, a subgrantee failing to have enough funds for the county that the applicant resides in.~~

~~In this case, said subgrantee should refer applicant(s) to other social service providers, or use non-federal funds if available. If a county runs out of funds before the end of the program year, said subgrantee must maintain a list of applicants who could not be served. These applicants must receive priority when scheduling appointments at the start of the new program year or if additional funds are awarded.~~

~~A. Appeal to the Subgrantee Level~~

- ~~1) After having exhausted all channels of resolution with the Executive Director of the Subgrantee, the applicant or recipient must submit a written request for a fair hearing to the subgrantee Board of Directors within thirty (30) calendar days that the adverse action occurred. The written request must include the following:
  - ~~a. Name and address of applicant or recipient,~~
  - ~~b. Name of subgrantee,~~
  - ~~c. Date of denial notice or adverse action taken,~~
  - ~~d. Reason for said action,~~
  - ~~e. Justification stating why action should not be taken,~~
  - ~~f. Statement requesting a fair hearing, and~~
  - ~~g. Two (2) signed and dated copies of the request (original and one copy).~~~~
- ~~2) Upon receipt of the applicant or recipient's request, the subgrantee Board of Directors must set the date of the fair hearing for the next scheduled board meeting. The fair hearing will be conducted at the discretion of the Board of Directors for the subgrantee. Said board shall render a written decision within five (5) business days of the fair hearing date.~~

~~B. Appeal to MDHS~~

- ~~1) Written Appeal to MDHS for Fair Hearing: After having exhausted all channels for resolution at the subgrantee level, the applicant or recipient has thirty (30) calendar days from the date of the subgrantee Board of Directors' decision letter to submit a written request. The written request must include a copy of the original hearing request and the Board of Directors' decision letter. The request should be submitted to:  
\_\_\_\_\_ Mississippi Department of Human Services  
\_\_\_\_\_ Director of Administrative Hearings  
\_\_\_\_\_ Post Office Box 352  
\_\_\_\_\_ Jackson, Mississippi 39205~~
- ~~2) Notice for the Fair Hearing: The recipient or applicant and subgrantee shall receive written notice of the hearing, in which will include a statement of the date and time the hearing is to be held. The hearing may be held telephonically unless a face-to-face hearing is requested. A fair hearing shall be scheduled within seven (7) calendar days the Director of Administrative Hearings receives a proper written request.~~

- ~~3) Evidence and/or Documents: All documents relating to any pending proceeding must be submitted to the Director of Administrative Hearings Division of MDHS at the address listed above.~~
- ~~4) Informal Disposition: Informal disposition may be made of any case by written stipulation, agreed settlement, consent order, or default.~~
- ~~5) Postponement/Continuance: The hearing officer may grant a postponement or a continuance of the fair hearing for good cause based upon a written, advanced request by either party.~~
- ~~6) Conduct of Fair Hearings: Subject to the hearing officer's ruling and recommended decision, opportunity must be given to all parties to respond, present evidence, argue all issues involved and call witnesses. A recording of each fair hearing should be made. If a party fails to appear, it may forfeit all rights.~~
- ~~7) Order of Hearing: The hearing officer calls the fair hearing to order; introduces himself/herself and gives a brief statement of the nature of the proceeding; states what documents the record contains; calls for opening statements by each party; questions witnesses at will, and adjourns the fair hearing after all evidence has been presented. During testimony, the applicant, recipient or subgrantee's representative(s) may question witnesses, cross-examine the other party's witnesses, and redirect if necessary.~~
- ~~8) Recommended Decisions and Final Decisions The hearing officer shall have the responsibility of preparing a statement summarizing the facts brought out in the fair hearing, indicating the policy governing the issue at hand, and making a recommended decision based on the evidence presented. The recommended decision shall be based only on evidence, testimony, and documents presented at the fair hearing. Following the fair hearing adjournment, the hearing officer will forward, both the record and recommended decision, to the MDHS Executive Director for adoption, modification, or reversal. The final decision of the MDHS Executive Director will be forwarded to the recipient or applicant along with the Executive Director of the subgrantee. The decision of the MDHS Executive Director shall be final and binding. The recipient or applicant has exhausted all administrative appeals after the decision from the MDHS Executive Director has been rendered.~~

~~C. Appeal to U.S. Department of Health and Human Services~~

- ~~1) If the final MDHS decision is not satisfactory, the applicant or recipient has ten (10) calendar days to submit a written request to U.S. Department of Health and Human Services. Said request should be sent to:~~

~~\_\_\_\_\_ Secretary  
\_\_\_\_\_ U.S. Department of Health and Human Services  
\_\_\_\_\_ Office of Community Services  
\_\_\_\_\_ 370 L'Enfant Promenade, S.W., 5th Floor  
\_\_\_\_\_ Washington, D.C. 20449~~

- ~~2) The written request must include a copy of the original hearing request, the Board of Directors' decision letter, and the final decision from MDHS. A decision and/or hearing will be issued and/or conducted based on the discretion of the U.S. Department of Health and Human Services.~~
- ~~3) Note: If at any point during the fair hearings process the original adverse action or denial decision is overturned, the proper actions will be taken by the subgrantee~~

# APPENDIX

**Federal Poverty Guidelines**

<b>FEDERAL POVERTY GUIDELINES</b>				
	<i>Effective Dates</i>	<b>07/1/2025</b>	<b>10/1/2025</b>	<b>10/1/2025</b>
		<b>WX: DOE, BIL &amp; LIHEAP</b>	<b>CSBG</b>	<b>LIHEAP</b>
<i>Number in Household</i>	<b>100% Category</b>	<b>200% Category</b>	<b>125% Category</b>	<b>60% State Median Income</b>
	<b>Percent of Poverty</b>	<b>Percent of Poverty</b>	<b>Percent of Poverty</b>	<b>Percent of Poverty</b>
1	\$15,650	\$31,300	\$19,563	\$26,740
2	\$21,150	\$42,300	\$26,438	\$34,968
3	\$26,650	\$53,300	\$33,313	\$43,196
4	\$32,150	\$64,300	\$40,188	\$51,424
5	\$37,650	\$75,300	\$47,063	\$59,651
6	\$43,150	\$86,300	\$53,938	\$67,879
7	\$48,650	\$97,300	\$60,813	\$69,422
8	\$54,150	\$108,300	\$67,688	\$70,965
9	\$59,650	\$119,300	\$74,536	\$72,507
10	\$65,150	\$130,300	\$81,438	\$74,050
11	\$70,650	\$141,300	\$88,313	\$75,593
12	\$76,150	\$152,300	\$95,188	\$77,136
13	\$81,650	\$163,300	\$102,063	\$78,678
14	\$87,150	\$174,300	\$108,938	\$80,221
15	\$92,650	\$185,300	\$115,813	\$81,764
16	\$98,150	\$196,300	\$122,688	\$83,306
17	\$103,650	\$207,300	\$129,536	\$84,849
18	\$109,150	\$218,300	\$136,438	\$86,392
19	\$114,650	\$229,300	\$143,313	\$87,935
20	\$120,150	\$240,300	\$150,188	\$89,477
<i>For each additional family member add:</i>	5500	11000	6875	Contact MDHS/DCS

LIHEAP Benefit Matrix

## 2026 LIHEAP BENEFIT MATRIX (Fuel Types)

Household Data	HH Size / Income	Energy Types					
	Household Size of 1	Propane	Electric*	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit**
	0 – 3,913	800	700	700	400	1500	1500
	3,914 – 7,825	750	650	650	360	1400	1400
	7,826 – 11,738	700	600	600	320	1300	1300
	11,739 – 15,650	650	550	550	280	1200	1200
	15,651 – 19,563	600	500	500	240	1100	1100
	19,564 – 26,740	550	450	450	200	1000	1000

Household Data	HH Size / Income	Energy Types					
	Household Size of 2	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
Income is between	0 – 5,288	800	700	700	400	1500	1500
	5,289 – 10,575	750	650	650	360	1400	1400
	10,576 - 15,863	700	600	600	320	1300	1300
	15,864 – 21,150	650	550	550	280	1200	1200
	21,151 – 26,438	600	500	500	240	1100	1100
	26,439 – 34,968	550	450	450	200	1000	1000

Household Data	HH Size / Income	Energy Types					
	Household Size of 3	Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
Income is between	0 – 6,663	800	700	700	400	1500	1500
	6,664 – 13,325	750	650	650	360	1400	1400
	13,326 – 19,988	700	600	600	320	1300	1300
	19,989 – 26,650	650	550	550	280	1200	1200
	26,651 – 31,313	600	500	500	240	1100	1100
	31,314 – 43,196	550	450	450	200	1000	1000

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 4</b>						
Income is between	0 – 8,038	800	700	700	400	1500	1500
	8,039 – 16,075	750	650	650	360	1400	1400
	16,076 – 24,113	700	600	600	320	1300	1300
	24,114 – 32,150	650	550	550	280	1200	1200
	32,151 – 40,188	600	500	500	240	1100	1100
	40,189 – 51,424	550	450	450	200	1000	1000

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 5</b>						
Income is between	0 – 9,413	800	700	700	400	1500	1500
	9,414 – 18,825	750	650	650	360	1400	1400
	18,826 – 28,238	700	600	600	320	1300	1300
	28,239 – 37,650	650	550	550	280	1200	1200
	37,651 – 47,063	600	500	500	240	1100	1100
	47,064 – 59,651	550	450	450	200	1000	1000

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 6</b>						
Income is between	0 – 10,788	800	700	700	400	1500	1500
	10,789 – 21,575	750	650	650	360	1400	1400
	21,576 – 32,363	700	600	600	320	1300	1300
	32,364 – 43,150	650	550	550	280	1200	1200
	43,151 – 53,938	600	500	500	240	1100	1100
	53,939- 67,879	550	450	450	200	1000	1000

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 7</b>						
Income is between	0 – 12,163	800	700	700	400	1500	1500
	12,164 – 24,325	750	650	650	360	1400	1400
	24,326 – 36,488	700	600	600	320	1300	1300
	36,489 – 48,650	650	550	550	280	1200	1200
	48,651 – 60,813	600	500	500	240	1100	1100
	60,814 – 69,422	550	450	450	200	1000	1000

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 8</b>						
Income is between	0 – 13,538	800	700	700	400	1500	1500
	13,539 – 27,075	750	650	650	360	1400	1400
	27,076 – 40,613	700	600	600	320	1300	1300
	40,614 – 54,150	650	550	550	280	1200	1200
	54,151 – 70,965	600	500	500	240	1100	1100

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 9</b>						
Income is between	0 – 14,913	800	700	700	400	1500	1500
	14,914 – 29,825	750	650	650	360	1400	1400
	29,826 – 44,738	700	600	600	320	1300	1300
	44,739 – 59,650	650	550	550	280	1200	1200
	59,651 – 72,507	600	500	500	240	1100	1100

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 10</b>						
Income is between	0 – 16,288	800	700	700	400	1500	1500
	16,289 – 35,325	750	650	650	360	1400	1400
	35,326 – 48,863	700	600	600	320	1300	1300
	48,864 – 65,150	650	550	550	280	1200	1200
	65,151 – 72,507	600	500	500	240	1100	1100

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 11</b>						
Income is between	0 – 17,633	800	700	700	400	1500	1500
	17,664 – 35,325	750	650	650	360	1400	1400
	35,326 – 52,988	700	600	600	320	1300	1300
	52,989 – 75,593	650	550	550	280	1200	1200

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 12</b>						
Income is between	0 – 19,038	800	700	700	400	1500	1500
	19,039 – 38,075	750	650	650	360	1400	1400
	38,076 – 57,113	700	600	600	320	1300	1300
	57,114 – 77,136	650	550	550	280	1200	1200

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 13</b>						
Income is between	0 – 20,413	800	700	700	400	1500	1500
	20,414 – 40,825	750	650	650	360	1400	1400
	40,826 – 61,238	700	600	600	320	1300	1300
	61,239 – 78,678	650	550	550	280	1200	1200

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 14</b>						
Income is between	0 – 21,788	800	700	700	400	1500	1500
	21,789 – 43,575	750	650	650	360	1400	1400
	43,576 – 65,363	700	600	600	320	1300	1300
	65,364 – 80,221	650	550	550	280	1200	1200

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 15</b>						
Income is between	0 – 23,163	800	700	700	400	1500	1500
	23,164 – 46,325	750	650	650	360	1400	1400
	46,326 – 68,488	700	600	600	320	1300	1300
	69,489 – 81,764	650	550	550	280	1200	1200

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 16</b>						
Income is between	0 – 24,538	800	700	700	400	1500	1500
	24,539 – 49,075	750	650	650	360	1400	1400
	49,076 – 73,613	700	600	600	320	1300	1300
	73,614 – 83,306	350	550	550	280	1200	1200

Household Data	HH Size / Income	Energy Types					
		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
	<b>Household Size of 17</b>						
Income is between	0 – 25,913	800	700	700	400	1500	1500
	25,914 – 51,825	750	650	650	360	1400	1400
	51,826 – 77,738	700	600	600	320	1300	1300
	77,739 – 84,849	650	550	550	280	1200	1200

Household Data	HH Size / Income		Energy Types					
	Household Size of 18		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
Income is between	0 – 27,288		800	700	700	400	1500	1500
	27,289 – 54,575		750	650	650	360	1400	1400
	54,576 – 84,849		700	600	600	320	1300	1300

Household Data	HH Size / Income		Energy Types					
	Household Size of 19		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
Income is between	0 – 28,663		800	700	700	400	1500	1500
	28,664 – 57,325		750	650	650	360	1400	1400
	57,326 – 87,935		700	600	600	320	1300	1300

Household Data	HH Size / Income		Energy Types					
	Household Size of 20		Propane	Electric	Natural Gas	Wood /Other Fuel	Maximum Benefit	Total Electric Benefit
Income is between	0 – 30,038		800	700	700	400	1500	1500
	30,039 – 60,075		750	650	650	360	1400	1400