

Non-Needy Relative Caregiver and Kinship Care

2600 INTRODUCTION

For either a Non-Needy Relative Caregiver (NNRC) or a Kinship Care case, a relative, other than a legal parent, is not requesting assistance for themselves but are requesting assistance for only a relative child(ren). The relative caregiver must be a relative of specified degree, as defined in manual section A-300 and the parent(s) of the child(ren) must not be in the home.

All TANF eligibility requirements must be reviewed to determine which are applicable to the households.

2620 NON-NEEDY RELATIVE CAREGIVER (NNRC)

2620.1 Budgeting – Income Limits and Deductions

2620.1.1 Income Limits and Eligibility Tests

The gross income test is 275% of the Federal Poverty Level. See manual section C-140 for the TANF Need Standard Chart. Apply the gross income test to the NNRC household's size as follows:

- at initial eligibility;
- when a change of countable income of related household members to the child(ren) is reported;
- at the redetermination (RD) if new or increased countable income of related household members is reported; or
- when an individual(s) joins the household who is related to the child(ren) and has countable income.

Determine the countable gross earned and unearned income of all adults and children in the household with a relationship (by blood or marriage) to the child(ren) for whom assistance was applied for. Also include any countable income of the child(ren) for whom assistance has been applied. See manual section A-700.

- Earned income disregards and work expense are not applied and
- TANF assistance is exempt

All adult household members whose income is countable in the gross income test, who did not sign the application form, are required to sign an Interface Consent, Form 2179-EE, allowing DWSS to interface with other federal and state records for eligibility and income verification.

If the total countable gross earned and unearned income of all members, including child(ren) for whom assistance is requested, exceeds the gross income test for the household size, the assistance unit is ineligible. See manual section C-140 for the 275% of the Federal Poverty level by household size.

If the total countable gross income is below the 275% income test, only the child(ren)'s, income and resources are used to determine eligibility and the payment. See manual section A-600 Budgeting, A-700 Income and C-140 for the Payment Allowance.

2630 KINSHIP CARE PROGRAM

2630.1 Who is Eligible

In addition to TANF and TANF NNRC eligibility requirements, the following Kinship Care requirements must be met.

The relative caregiver must:

1. Be 62 years of age or older (the age requirement is met for the month in which the NNRC turns 62 years of age) unless an undue hardship to the age requirement is claimed;

- **UNDUE HARDSHIP FOR MEETING AGE REQUIREMENTS**

A hardship waiver of the relative caregiver(s) age requirement for this program can be considered if the child or children for whom assistance is requested either have "special needs" or are a "hard to place" sibling group and an extreme financial hardship to the applicant is demonstrated.

The applicant must provide documentation substantiating the claim of undue hardship as requested by the case manager. This documentation will be forwarded to the Chief of Eligibility and Payments for a hardship waiver determination. The Chief will provide a determination, in writing, within 10 days of receiving the documentation requested by the case manager. The applicant may appeal the decision of the Chief of Eligibility and Payments within 10 days to the Administrator of the Division of Welfare and Supportive Services by providing a written request. The decision of the Administrator is final.

2. Reside in Nevada;
3. Have exercised parental care and control of the child in their home for a minimum of six consecutive months;
4. File for and obtain Nevada state or tribal court approval of legal guardianship and comply with the requirements imposed by the court. **Note:** An out-of-state guardianship does not satisfy the requirements of this program. Temporary and emergency guardianship orders must be followed up with a permanent order as they are only valid for a limited period of time; and

5. Read and sign the TANF Kinship Care Program, Form 2621, to acknowledge the Kinship Care Program requirements and inform them about support services that may be available.

No **adult** parent of a child for whom the NNRC has legal guardianship may reside in the household. If the parent(s) of the child(ren) reside in the home, Kinship Care requirements are not met, and Kinship Care is denied.

When a minor parent is in the home of an NNRC, who has guardianship of the minor, approve Kinship Care for the minor parent if all eligibility criteria is met. If the minor parent's child also meets Kinship Care requirements (the NNRC also has legal guardianship of the minor parent's child), the child is included in the Kinship Care case. When the minor's child does not meet Kinship Care requirements, determine eligibility for the minor's child under TANF or NNRC criteria in a separate sub-case.

A baby born to a minor parent receiving Kinship Care is eligible for TANF when the minor parent exercises parental care and control of their child. A separate TANF case is opened under the minor parent for the minor parent's child. The minor parent is not an eligible member of this case because TANF benefits for the minor parent are received under the Kinship Care case.

When a Division social worker determines the physical or emotional health or safety of the minor parent's child may be in jeopardy, the NNRC may be designated as the caregiver of the minor parent's child. In this situation, the minor parent's child would receive TANF under a NNRC case. In a case where a social worker is needed to determine the above, a referral must be made to the social work supervisor through OASIS.

Kinship Care applies only to children meeting the Kinship Care requirements. A relative caregiver may receive NNRC assistance for a child(ren) in the home who does not meet Kinship Care requirements while receiving Kinship Care assistance for a child(ren) who does meet the requirements. In these circumstances, two separate cases must be set up in NOMADS.

2630.2 Income Limits and Eligibility Tests

Determine the countable gross earned and unearned income of all adults and children in the household with a relationship (by blood or marriage) to the child(ren) for whom assistance was requested. Also include countable income of the child(ren) for whom assistance has been requested. (See manual section A-700.)

Exception:

- Earned income disregards and work expenses are not applied and
- TANF assistance is exempt

The gross income test is 275% of the Federal Poverty Level. See manual section C-140 for the TANF Need Standards Chart. Apply the Gross Income Test to the household size as follows:

- at initial eligibility;
- when a change of countable income of related household members to the child(ren) is reported;
- at the redetermination if new or increased countable income of related household members is reported; or
- when an individual(s) joins the household who is related to the child(ren) and has countable income.

All adult household members whose income is countable in the gross income test, who did not sign the application form, are required to sign an Interface Consent, Form 2179-EE, allowing DWSS to interface with other federal and state records for eligibility and income verification.

If the total countable gross earned and unearned income exceeds the gross income test limit for the household size, the assistance unit is ineligible.

If the total countable gross income is below the 275% income test, consider only the child(ren)'s, income and resources to determine the TANF Kinship Care Payment. See manual sections A-600 Budgeting, A-700 Income and C-140 for the Payment Allowance.

2630.3 Eligibility Dates

At initial application or when the NNRC requests an upgrade to Kinship Care:

- explain the Kinship Care program and requirements to the NNRC by reviewing and requesting them to sign the Temporary Assistance for Needy Families Non-Parent Kinship Care Program, Form 2621-EK;
- request verification(s) required to determine Kinship Care eligibility;
- while Kinship Care requirements are pending, evaluate NNRC assistance. If eligible, approve TANF under NNRC. Do not delay the approval of NNRC while awaiting Kinship Care verifications.
- once Kinship Care eligibility criteria is met, NNRC assistance is terminated as soon as administratively possible.
- if NNRC assistance is not terminated timely (worker did not act upon change timely or due to cut-off), the NNRC benefit is budgeted when determining the Kinship Care assistance payment.

Example 1: NNRC received \$476 assistance for two children ages 13 and 15. Only one of the children meets Kinship Care criteria. Calculate the difference between a one child NNRC payment from a two child NNRC payment. Subtract the difference in the NNCR payment from the Kinship payment for one child which will give the amount of the additional Kinship Care payment to supplement the ongoing case in the month of change only. $(\$476 - \$417 = \$59)$ $\$462 - \$59 = \$403$. The NNRC benefit amount for the other child must be reduced to \$417, the payment allowance for one child.

Kinship Care financial eligibility begins the first of the month following the month all Kinship Care eligibility requirements are met.

Example 2: A NNRC applies for TANF in October. The caretaker is referred to an attorney for guardianship services. NNRC assistance is approved effective October while pending Kinship Care. Nevada guardianship is not effective until January. Kinship is effective February.

When a child is being added to an existing Kinship case, the child is added the first of the month after the month they meet the Kinship Care eligibility requirements.

2630.4 Support Services

Support services are available to assist Kinship Care applicants/recipients. The need for support services must be identified in the screening and post-approval assessments, and be included in the TANF household's Personal Responsibility Plan (PRP).

When an applicant is in need of support services, they are referred to a contracted support service case manager. When the applicant requests DWSS to refer them to the contracted agency, the case manager completes a Participant Verification, Form 2142, to be provided to the contracted agency. The support service case manager organizes, coordinates, and sustains a network of support services and activities designed to optimize the functioning and well being of Kinship Care households. These services include:

1. Assistance in Obtaining Legal Guardianship

The Division offers qualified caregivers assistance in pursuing court approved guardianship by:

- referring the household to an attorney contracted with the State of Nevada, who will provide legal counsel at no cost to the household. For contracted attorneys with the State of Nevada, contact the “Employment & Support Services (E&SS) Unit,” at Central Office,

OR

- reimbursing the household up to \$750 for legal counsel sought independently. The household must provide a receipt/bill of their legal expenses detailing the services provided and the fee for each service. Only those fees directly related to the pursuit of legal guardianship will be considered for reimbursement. The case manager will forward the receipt/bill to the Chief, Eligibility and Payments, for consideration and payment.

2. Child Care

Kinship Care participants in need of child care for employment, education, or who are unable to care for the child due to incapacity/disability are provided written referral to child care program contract staff to obtain the necessary services. Child care is not guaranteed and all eligibility requirements for the child care program must be met. Refer to the Child Care Manual for eligibility requirements and services.

3. Transportation

Participants may receive transportation reimbursement or bus fare for approved sites. Examples of approved sites may include school meetings/appointments necessary for the development of an educational plan, or a meeting with the school counselor regarding behavioral issues. Approved transportation needs will be determined by the contracted case manager on a case-by-case basis.

NOTE: Transportation costs covered by Medicaid will not be covered under this program. Most medically necessary transportation may be paid/reimbursed by Medicaid if the household submits a “Prior Authorization Request” to the Medicaid office.

4. Respite Care

Relative caregivers may receive temporary relief from caring for a child. This is a vital family preservation and family support service for the continuum of family services intended to reduce family stress, support family stability, prevent abuse and neglect, and minimize the need for out-of-home placements. This service will be limited to five (5) days a year.

Exception: Respite care may extend to more than five days a year when a medical/family emergency disrupts the guardian's ability to provide appropriate supervision for the child. The need for additional days of respite care will be determined on a case-by-case basis by the contracted case manager.