

STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Bill J. Crouch Cabinet Secretary Bureau for Family Assistance
Office of Programs and Resource Development
Division of Family Assistance
350 Capitol Street, Room B-18
Charleston, West Virginia 25301-3705
Telephone: (304) 352-4431 Fax: (304) 558-2059

Janie M. Cole Interim Commissioner

March 17, 2022

Dear Water/Wastewater Vendor:

The purpose of this letter is to provide information about the new water/wastewater program that will soon be available to low-income households in West Virginia.

The <u>Consolidated Appropriations Act, 2021</u> (Public Law No: 116-260) signed on December 27, 2020, included funding with instructions for the Administration for Children and Families within the U.S. Department of Health and Human Services to provide funding to assist low-income households, particularly those with the lowest incomes and that pay a high proportion of household income for drinking water and wastewater services. Funding for the program is made available through a federal block grant and the use of the funds is subject to federal regulations.

The Act requires certain assurances be satisfied before assistance payments are made on behalf of eligible individuals to suppliers of drinking water and wastewater. An agreement defines the conditions that the Vendor must uphold so that the state agency can make assistance payments to the Vendor on behalf of the eligible households.

West Virginia's grant funds will be managed by the West Virginia Department of Health and Human Resources (DHHR) through the Low-Income Household Water Assistance Program (LIHWAP). The program will begin March 28, 2022. DHHR eligibility staff will conduct outreach activities, determine client eligibility, and process benefit payments to water service providers.

West Virginia's LIHWAP provides relief assistance to three priority groups:

- Priority One: Households with water or wastewater service that has been disconnected.
- Priority Two: Households that have a past due water or wastewater bill or disconnect notice.
- Priority Three: Households seeking assistance that have current water or wastewater bills with no past due balance.

Under West Virginia's LIHWAP, eligible households with services that have been disconnected or are pending disconnection may receive up to \$1,000 when their water and sewage is included in the same bill, or \$500 towards the payment of each of their water and sewage bills when the services are billed separately. Eligible households seeking assistance that have current bills with no past due balance may

receive up to \$500 when their water and sewage is included in the same bill, or \$250 towards the payment of each of their water and sewage bills when the services are billed separately. Payments will be paid by voucher. A one-time payment is made during a fiscal year period and the payment cannot create a credit balance. LIHWAP will be available for federal fiscal years 2022 and 2023 and will end September 30, 2023.

Should you choose to participate, a Vendor Agreement is provided with this informational letter which you may complete and return to DHHR's Bureau for Family Assistance. The parties to this Agreement acknowledge the responsibilities and will provide the accomplishment of this service in a mutually efficient manner.

We look forward to working with you and thank you in advance for your participation.

Sincerely,

Monica Hamilton

Director

Attachments

LIHWAP Desk Guide for Vendors

West Virginia Department of Health and Human Resources responsibility:

- Local DHHR offices process applications to determine if the customer is eligible for LIHWAP.
- If a customer is determined eligible, a voucher will be printed and signed and dated by the case worker and customer.
- Caseworkers will call the water/wastewater company and pledge the amount approved for LIHWAP.
- The Financial Clerk receives the voucher (DFA-67) from the caseworker and mails it to the water/wastewater vendor.
- The Financial Clerk receives a signed and dated voucher (DFA-67) from the vendor to process in our statewide payment data system.
- Payment to the vendor will be issued by check. Multiple customer payments may be issued on one check with related customer account numbers.

Water/wastewater Vendor responsibility:

- Once a vendor receives a voucher (DFA-67) signature and date are required.
- The vendor is required to mail a voucher (DFA-67) to the local DHHR office to be processed for payment.
- Vouchers (DFA-67) must be received within 60 days of issuance to the local DHHR office.
- Credit customer's account that has been terminated or facing disconnection as a priority.

Credit Balances:

No LIHWAP payment should create a credit balance.

Questions:

Contact Terri Vickers, LIHWAP Coordinator, 304-352-4431

Sample LIHWAP Voucher

	•	Julipic					
@ eRAPIDS : R4_MO	NTHLY_ACCEPTANCE Webp	age Dialog					X
							Print
		West Virgin	nia Department of Healt	h and Human I	Resources		
			Office of Family 5				
AUTHORIZATION OF	PAYMENT		Benefit Num	38874	Voucher Num	900	0011627
TYPE OF PAYMENT				V	Within 60 days of issuance remit to	5	
Program of Assistance		LIHWAP WATER ASSIST	T		TAMMY MABE-GOOD		
item of Need :		LIHWAP SEWER PROG	RAM		114 SO. HIGH ST., P.O. BOX 800 MORGAN TOWN WV 26507		
IDENTIFICATION:		4026686647					
Customer:		DJEDHEEGEJ F P	RD				
		1012 KANAWHA BI	LVID BLVD 2FLR,				
		CHARLESTON W			100044470		
Vendor:		WATER - TESTING	VENDOR	9	000011470		
Customer Account Nui	m ber	2007					
		TEST TEST WV 03301					
		(CD) AAA (1720 s					
RECORDING/REMITTA							
PAYMENT AUTHORIZA	ATION						
This is the vendor's autho	rization to deliver items specified a	bove in an amount not to e	xceed \$ \$\$\$\$155.00				
Purchase of goods and s	ervice under this youther are not a	subject to the West Virginia	consumer sales and service should retain a copy of this v	OUCUEL BI SICH DE	is not valid unless signed by the customer usiness records.		
The vendor hereby certifi	es the above services or merchan	dise to be correct as show se tax	n and that no part of the ch	arges listed has t	been paid or will payment be requested tro		
enumerated above for a p being made aware that a	period of not less than 30 days from emergency exists for which pa	m the date in the recording yment will be made by DH dated to SHDD HED a tariff a	HR. The vendor also agree	s to ensure that Public Service Co	ayment, agrees to provide on behalf of the lik fuel provider, the agreed upon amount of eligible households, in the normal billing p rrmission of West Viginia and payments the	rocess, will be ch supplier has rece	arged no more than the wed.
The vendor hereby certifi	es the above services or merchan	dise and the price of such	services or merchandise w	ere determined a	nd/or rendered wiknous regard to race cold	r. namonarongar, ge	elidel, age, religious of
The vendor understands the Department or any of	that payment of the above service its employees are liable or respons	or merchandise as receive ble for any damage or los	S to the venturi caused by u	f the customer f he customer in th	rom the Department of Health and Human F e use or receipt of the service or merchan	lesources does no dise listed above.	tin eny w ay impiy that
The customer hereby ack	now ledges recelpt of merchandise	or services in the amount	authorized.				
	Custom er Signature	Date			Vendor Signature	Date	
	-						
		Date			Date of Authorization Trans	mitted	
	Worker Signature	Date					
	Supervisor's Approval	Date			Authorizing Financial Clerk's S	signature	
DFA - 67 12/09							