**10-144 DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Chapter 323: MAINE GENERAL ASSISTANCE MANUAL**

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**SECTION I.** **INTRODUCTION**

Pursuant to 22 M.R.S. §4323 the Department of Health and Human Services (DHHS), in conjunction with the municipalities, is responsible for the proper administration of the Maine General Assistance Program. The authority to promulgate these rules is granted by 22 M.R.S. §42(1), and M.R.S. §§ 4301 *et seq*.

**SECTION II.** **DEFINITIONS**

ADDRESS CONFIDENTIALITY PROGRAM

The Address Confidentiality Program (ACP), administered by the Secretary of State, provides confidentiality for victims of domestic violence, stalking or sexual assault and requires state and local agencies and the courts to accept a designated address as the program participant’s address when creating a public record. When an applicant or recipient verifies that they are a certified participant in the Address Confidentiality Program, the designated address is the only address accepted and provided. Any correspondence with the applicant or recipient is sent to the designated address. If the municipality releases information by permission from the applicant or recipient or due to a subpoena, the only address provided is the designated address.

ADMINISTRATOR

A person or persons selected by a municipality responsible for the operation of their General Assistance Program.

ALLOWABLE EXPENSES

The applicant’s cost for basic necessities up to the maximum levels of assistance as provided in municipal ordinance. In addition to items listed at 22 M.R.S. §4301(1) and (7)(B), allowable expenses include verified expenses for mandated child support or alimony.

APPLICATION FORM

A form, paper or electronic based, provided by the administrator upon which a General Assistance applicant provides the information required to make a determination of eligibility.

AVAILABLE RESOURCES

Any asset, income or other source of support that can be accessed by the applicant to alleviate the need for General Assistance. Potential Resources are not considered Available Resources.

BACK BILLS

Outstanding charges for goods and services received prior to the current General Assistance application.

BASIC NECESSITIES

Food, clothing, shelter, fuel, electricity, non-elective medical services as recommended by a physician, nonprescription drugs, telephone where it is necessary for medical reasons, and any other commodity or service determined essential by the overseer in accordance with the municipal ordinance, 22 M.R.S. Ch. 1161 and this manual.

BUDGET

A mathematical calculation comparing income and expenses for the applicable time period.

CASE RECORD

Official file containing forms, correspondence, narrative records and all other relevant information pertaining to an applicant or recipient. The case record must include all signed General Assistance applications, determinations of initial or subsequent eligibility, reasons for decisions, actions by the General Assistance administrator, types of assistance provided to each recipient, and all other verifications required in this manual, statute or municipal ordinance.

DEFICIT

The difference resulting from subtracting a household’s net income from the municipal overall maximum for the appropriate household size.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

The Maine Department of Health and Human Services (DHHS), also referenced as “The Department,” provides health and social services to individuals in Maine, including children, families, older Mainers, and individuals with disabilities, mental illness, and substance use disorders.

EARNED INCOME

Wages or Income in Kind derived by providing goods or services to an individual, company, organization, or other entity.

ELIGIBLE PERSON

1. “Eligible person” does not include a person who is a fugitive from justice as defined in 15 M.R.S. §201(4).
2. Unless ineligible per A above, an Eligible person may be either—
3. A U.S. Citizen or Lawful Permanent Resident or
4. In accordance with 8 U. S. C. §1621(d), an individual pursuing a lawful process to apply for immigration relief, except that assistance for those pursuing a lawful process may not exceed 24 months—

to qualify to receive General Assistance from the municipality or the Department of Health and Human Services according to the standards of eligibility set forth in statute, Department of Health and Human Services policy, and municipal ordinance.

EMERGENCY

Homelessness, or any other life-threatening situation; or a situation beyond the control of the individual which, if not alleviated immediately, could reasonably be expected to pose a threat to the health or safety of a person; a situation which is imminent and which may result in homelessness, undue hardship, or unnecessary cost if not resolved immediately.

FAMILY DEVELOPMENT ACCOUNTS (FDA)

Are the same as those defined in 20-A M.R.S. ch. 412-B[[1]](#footnote-1). The first $10,000 of funds and any accrued interest in an FDA cannot be used when determining eligibility for General Assistance.

GOOD CAUSE

Valid reasons for non-compliance with certain program requirements.

HOMELESSNESS

A situation in which a person or household is—

1. Living in a place that is not fit for human habitation, including, but not limited to, a car, abandoned building, park, or bus or train station;
2. Living in an emergency shelter;
3. Living in temporary housing, including but not limited to a hotel, motel, campground, unlicensed campsite or rehabilitation facility;
4. Exiting a hospital or institution licensed under 22 M.R.S. Ch. 405, a correctional facility, or a recovery residence when either;

1. The person or household was in an emergency shelter or a place not fit for human habitation before entering the hospital, institution, correctional facility, or recovery residence; or

2. The person or household does not have permanent housing available upon exiting the hospital, institution, correctional facility or recovery residence

1. Losing the person’s or household’s primary nighttime residence and lacking the resources or support networks to remain in that residence; or
2. Fleeing or attempting to flee violence, exploitation in the form of human trafficking, or persecution as a member of any group or category protected under law, and has no other residence.

HOUSEHOLD

Has the same meaning as defined in 22 M.R.S. §4301(6)[[2]](#footnote-2).

Residents of a Recovery Residence are not considered a shared household and do not have income calculated as pooled for the purposes of determining eligibility.

HOUSING ASSISTANCE

Payments made by, or on behalf of an individual, for rent or mortgage.

INCOME

Any form of income in cash or in kind (as defined below) received by the household, including net remuneration for services performed, cash received on either secured or unsecured credit, any payments received as an annuity, retirement, or disability benefits, veterans' pensions, workers' compensation, unemployment benefits, benefits under any state or federal categorical assistance program, supplemental security income, social security, and any other payments from governmental sources, unless specifically prohibited by any law or regulation, support payments, income from pension or trust funds and household income from any other source, including relatives or unrelated household members and any benefit received pursuant to 36, M.R.S. §5219-KK and ch. 907. For repeat applicants, it also includes unverified expenditures or misspent money from the 30-day period prior to application. Federally funded Supplemental Nutrition Assistance Program (SNAP) benefits cannot be considered as income or a resource (7 C.F.R. §272.1).

IN KIND INCOME

Payments made to, or on behalf of, an applicant either monetary or in the form of a commodity.

LAWFULLY PRESENT

A person lawfully present is a person described in 45 C.F.R., §152.2(1) to (7) or a person with deferred action under the United States Department of Homeland Security's deferred action for childhood arrivals process, as defined in the Secretary of Homeland Security’s June 15, 2012 memorandum.

LUMP SUM PAYMENT

A one-time payment issued to an applicant or recipient prior to or subsequent to applying for General Assistance. Lump sum payment includes, but is not limited to— retroactive or settlement portions of social security benefits, worker's compensation payments, unemployment benefits, disability income, veterans' benefits, severance pay benefits, or money received from inheritances, lottery winnings, personal injury awards, property damage claims or divorce settlements. A lump sum payment includes only the amount of money available to the applicant after payment of required deductions has been made from the gross lump sum payment. A lump sum payment does not include conversion of a non-liquid resource to a liquid resource if the liquid resource has been used or is intended to be used to replace the converted resource or for other necessary expenses. Funds contributed to Family Development Accounts (see above) are not to be considered lump sum payments.

MAINECARE

Maine’s Medicaid Program.

MARKET BASKET SURVEY

An acceptable method for determining food costs in a municipality. All the basic food groups shall be included in the market basket survey to ensure a balanced and nutritionally sound diet. Sources of information on nutrition may be the University of Maine Extension Services, Department of Education Nutrition Program, the Department of Health and Human Services nutritionist, nutritionist at the local hospital, etc. The food standard shall be flexible enough to allow additional foodstuffs for people with special dietary needs such as— diabetics, elderly, no cooking facilities, etc.

MAXIMUM LEVEL OF ASSISTANCE

The maximum benefit level, as established by ordinance, for an eligible household or for each individual basic necessity.

MINOR

Someone under the age of 18, who has not married.

MISSPENT INCOME

Misspent income includes income-in-kind received, or paid for, by a General Assistance repeat applicant from sources, including friends or relatives, for the payment of bills that are considered unnecessary costs, such as cable bills, credit card debt, court fines and related court costs, payments to reimburse a municipality for false representation, tobacco and alcohol products, etc., and will be considered as available to the applicant when determining use of income for the previous 30-day period.

NARRATIVE STATEMENT

A brief, written statement that explains case actions. Narrative statements are required for all applications for General Assistance.

NEED

The condition whereby a person’s income, money, property, credit, assets or other resources available to provide basic necessities for the individual and the individual’s family are less than the maximum levels of assistance established by the municipality.

NET GENERAL ASSISTANCE COST

The total amount of General Assistance paid by a municipality excluding any administrative costs.

NET INCOME

An applicant’s 30-day projected income after allowable deductions, credits, taxes and work related expenses are subtracted from the applicant’s gross income. For repeat applicants, net income includes income either misspent or not accounted for during the prior 30-day period.

OVERSEER

“Overseer” means an official designated by a municipality to administer a General Assistance Program. The municipal officers shall serve as a board of overseers if no other persons are appointed or elected.

PERIOD OF ELIGIBILITY

The time for which a person has been granted General Assistance. Such period begins on the date of application for General Assistance and continues for the period stated on the decision. The period of eligibility may vary depending on the type of assistance provided; however, in no event shall such a period extend beyond 30 days.

POOLING OF INCOME

The financial relationship among household members who are not legally liable for mutual support in which there occurs any commingling of funds or sharing of income or expenses. There is a rebuttable presumption that persons sharing the same dwelling unit are pooling their income. Applicants who are requesting that the determination of eligibility be calculated as though one or more household members are not pooling their income have the burden of rebutting the presumption of pooling income by providing verification that they are not doing so. Applicants who request assistance while residing in a Recovery Residence are not considered to have commingling funds.

POTENTIAL RESOURCES

Sources of financial assistance, including programs, services, non-liquid assets or trusts which typically require people to apply in writing and/or wait a period of time before eligibility is determined or the potential income is released.

PROPERTY TAX FAIRNESS CREDIT

For tax years beginning on or after January 1, 2013, a Maine resident individual is allowed a property tax fairness credit as computed by the Maine Revenue Service (36 M.R.S. §5219-II). Any benefit received under Title 36, chapter 907 and Title 36, Section 5219-II, unless used for basic necessities as described above, will counted as income.

PURSUING A LAWFUL PROCESS TO APPLY FOR IMMIGRATION RELIEF

The act of taking reasonable, good faith steps to apply for immigration relief, within twelve months of arrival to the United States, with the U.S. Citizenship and Immigration Services or before an immigration judge or federal court.

1. For an applicant in good faith pursuing a lawful process to apply for immigration relief through the courts, proof shall consist of a completed application. Alternatively, for those who have not yet filed a completed application, proof shall consist of (1) a notice to appear in court, issued subsequent to an individual’s request for asylum, from a U.S. Government official such as a border patrol agent or immigration officer, and (2) a copy of an alien’s completed change of address form (EOIR-33/IC), if applicable, and (3) a confirmed date for a “master calendar hearing,” if scheduled, and (4) an affidavit attesting to the good faith pursuit of asylum or other legal immigration status, which may be accompanied by supporting documentation, including but not limited to— medical records, birth or death certificates, newspaper articles, or reports from national or international human rights organizations.

or

1. For an applicant in good faith pursuing a lawful process to apply for immigration relief with the U.S. Citizenship and Immigration Services, proof shall consist of a completed application. Alternatively, for those who have not yet filed a completed application, proof shall consist of the applicant (1) providing an alien number, if one has been issued; and (2) an affidavit as described in the paragraph above attesting to the good faith pursuit of asylum or other legal immigration status.

PRESUMPTIVE ELIGIBILITY

Municipalities shall provide emergency benefits prior to full verification when—

1. The applicant applies for General Assistance and reports that they have an emergency situation that requires immediate assistance to alleviate or prevent any threat to life safety and;
2. The administrator can reasonably presume, after an initial interview, that the applicant will be eligible for General Assistance upon full verification and;
3. The duration of presumed eligibility shall not exceed
   1. 30 days in a 12-month period, for applicants who are not shelter guests, with full verification of eligibility upon the next available business day or;
   2. 30 days in a 12-month period, for shelter guests residing in a shelter located in that municipality, with full verification of eligibility no later than 30 days from the initial date of application.

RECIPIENT

A person who has applied for and currently receives General Assistance.

recovery residence

A shared living residence for persons recovering from substance use disorder that is focused on peer support, provides to its residents an environment free of alcohol and illegal drugs and assists its residents by connecting the residents to support services or resources in the community that are available to persons recovering from substance use disorder.

REHABILITATION FACILITY

An inpatient facility that is operated for the primary purpose of assisting in the rehabilitation of disabled persons through an integrated program of medical services and other services that are provided under competent professional supervision.

RELOCATION

The granting of financial assistance by a municipality to relocate and/or making arrangements for a person to relocate to another municipality. This includes finding shelter in another municipality or referral to a shelter in another municipality.

RESIDENT

A person who is physically present in a municipality with the intention of remaining in that municipality to maintain or establish a home and who has no other residence; or, a person who maintains a home in a municipality even if they are temporarily absent and they intend to return.

SHELTER COSTS

Rent, mortgage, taxes, and, if necessary, security deposits.

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)

A food benefit program for needy households.

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF)

A financial assistance program for needy families with dependent children.

UNEARNED INCOME

Unearned income is income acquired from investments and other sources unrelated to employment. Unearned income also includes unemployment compensation, taxable social security benefits, pensions, annuities, and distributions of unearned income from a trust or any other income not meeting the definition of earned income.

UNMET NEED

The difference between an applicant’s allowed expenses for basic necessities and the applicant’s available resources. Unmet need is calculated by subtracting a household's projected 30-day net income from the household's 30-day need, which is the sum of the applicant’s actual 30-day expenses for basic necessities, up to the specific ordinance maximums.

UNNECESSARY COST

Costs added to basic necessities that are not allowable for General Assistance budget computations, such as late fees added to an eviction or repayment of General Assistance funds obtained through false representation.

WORKFARE

As a condition of eligibility, a municipality may require that an otherwise eligible person who is capable of working be required to perform work for the municipality or work for a nonprofit organization, commonly referred to as workfare.

**SECTION III. RESPONSIBILITIES**

### The Department and the municipalities are jointly responsible for the administration of the Maine General Assistance Program. The respective duties and legal responsibilities for such administration are set forth as follows.

### Municipal Responsibilities.

* 1. Every municipality must administer a General Assistance Program.
  2. Ordinance. The municipal officers of each municipality must adopt an ordinance, after notice and hearing, as provided in Section VIII.
  3. Eligibility. Municipalities must use the standards established by ordinance to determine eligibility, as set forth in Section IV.
  4. Assistance. Municipalities shall provide assistance in accordance with statute and rule (Sections IV and V) for eligible applicants for which they bear responsibility (Section VI).
  5. Reimbursement. To receive reimbursement from the Department for General Assistance expenditures, municipalities must comply with all applicable laws and regulations, and follow the procedural requirements in Section XII.
  6. Records. Municipalities shall maintain case records in accordance with Section VII.
  7. Review. Municipalities shall cooperate with the Department’s review, as provided in Section IX. When a municipality is found to be out of compliance with statute and/or rule, they will submit a corrective action plan to be approved by the Department.

1. Department of Health and Human Services Responsibilities.
   1. The Department shall administer the General Assistance Program in accordance with federal, state and local laws.
   2. The Department shall assist municipalities in complying with statutory requirements by reviewing the administration of General Assistance.
   3. The Department of Health and Human Services is responsible for the administration of General Assistance in the unorganized territories.

The Department may enter into contractual agreements to administer General Assistance to the unorganized territories, and contractors will be reimbursed 100% for direct General Assistance costs for those residents.

Residents of an unorganized territory are eligible for General Assistance in the same manner as provided in statute.

* 1. The Department may intervene on behalf of General Assistance applicants and other municipalities if a municipality fails to comply with General Assistance requirements. Departmental intervention will be in accordance with the ordinance adopted by the municipality and Section XI of this manual.
  2. The Department must provide appropriate reimbursement to municipalities for their General Assistance Program at the rate set forth in 22 M.R.S. §4311.
  3. The Department of Health and Human Services, General Assistance Program staff represents the Department in administrative fair hearings.
  4. The Department shall collect from each municipality emergency contact information for use by municipal residents in applying for assistance under this section. The Department shall forward the municipal emergency contact information periodically to the statewide 2-1-1 telephone number designated pursuant to Title 35-A, section 7108.

**SECTION IV. ELIGIBILITY**

1. Applications.

In order to receive General Assistance from any municipality, an individual or a duly authorized representative must file a written application with the overseer, except as provided in 22 M.R.S. §4304(3).

* 1. Any person eligible pursuant to 22 M.R.S. §4301(3) who makes an application for General Assistance, who has not applied for General Assistance in any municipality or unorganized territory within the state, shall have their eligibility determined solely on the basis of need.
  2. Requests for General Assistance beyond the initial 30-day eligibility period require a recipient to submit a new application, and the municipality to make a new eligibility determination, at the start of each new 30-day eligibility period.
     1. A municipality determines the period of eligibility, which cannot exceed 30 days.
        1. If eligibility is determined on a weekly or daily basis, the municipality must calculate the amount of unmet need using figures applicable to that same time period.
        2. If eligibility has been determined for a 30-day period, but assistance is given for shorter intervals, the municipality is not required to re-determine eligibility during that shorter time period.
        3. Nothing in this section prohibits a municipality from re-determining eligibility at any time during that 30-day period.
     2. Every re-application must be determined without regard to past decisions. In the event that an error was made in the past and General Assistance was provided when it should not have been, this does not set a precedent for prospective determinations.
  3. Decisions are to be rendered within 24 hours of application, even if the next business day falls outside of that timeframe.
     1. If there is insufficient or questionable information, and a determination of eligibility cannot be made, a denial shall be issued based on the fact that the administrator is unable to determine eligibility.
        1. If denied for insufficient information, the applicant shall be directed to obtain the necessary information and submit it the next business day.
     2. In the event of an “emergency,” sufficient assistance to alleviate the emergency shall be provided until the next business day.
  4. Emergency Applications. Some applications could be treated as an emergency.
     1. The municipality may determine that there is an emergency that, if not alleviated immediately, could pose a threat to the health and safety of the applicant or a member of the household. The municipality may also determine that an emergency is imminent and that the failure of the municipality to provide assistance may result in undue hardship and unnecessary cost.
        1. If, after discussion with a potential applicant, the municipality determines that an emergency or imminent emergency exists, the municipality must ensure that the applicant is allowed to apply for General Assistance that same day.
        2. When the municipality determines that an emergency or an imminent emergency exists, and the applicant is eligible for General Assistance, assistance adequate to alleviate the emergency must be granted immediately.

a) When necessary, municipalities may disregard their maximum levels of assistance during an emergency or an imminent emergency situation. It is not necessary to provide long term assistance or a permanent solution in an emergency. Assistance of a type and amount that will alleviate the immediate threat to life or safety or that will help to alleviate any undue hardship or unnecessary cost will suffice.

* + 1. It is the responsibility of the applicant to supply the municipality with any information necessary to determine if an eligible household is in an emergency situation.
    2. When a household member is currently disqualified for false representation, not meeting work requirements, or not using potential resources, the disqualified member is not eligible for emergency assistance.
       1. The remaining household members may still be eligible.
    3. When the applicant household could have averted the emergency situation by using their income or resources for basic necessities, the municipality is not required to grant emergency assistance.
    4. Municipalities shall presume eligibility for persons who are provided shelter in an emergency shelter for the homeless located in that municipality.
       1. Municipalities may arrange with emergency shelters for the homeless to presume eligibility on behalf of the municipality when there is an individual agreement on file and available for review.
       2. When residents of an emergency shelter apply for assistance, the municipality must inform them that any income or resources they have are to be utilized for current needs, including emergency shelter costs. The same rules of eligibility are to be utilized as with other applications.
       3. The duration of presumed eligibility shall not exceed 30 days within a 12-month period.
       4. Full eligibility must be verified prior to assistance issued subsequent to the presumed period of eligibility.
       5. When presumptive eligibility is determined under this subsection, no other municipality may be determined to be the municipality of responsibility during the 30-day period of presumption.

1. Budgeting.

Determining eligibility for General Assistance requires calculating an applicant’s deficit and unmet need.

* 1. An applicant’s deficit is determined by subtracting their net income , from the appropriate overall maximum.
     1. If this results in a negative number, the applicant has no deficit and is not eligible for General Assistance.
  2. An Applicant’s unmet need is determined by subtracting their net income, from the household’s verifiable, allowable expenses (up to the categorical maximums) for the next 30 days.
     1. If this results in a negative number, the applicant has no unmet need and is not eligible for General Assistance.
  3. If both the deficit test and the unmet need test result in positive numbers, the applicant is eligible for the lessor amount of the two.

1. Available and Potential Resources.
   1. Available resources are used in the budget when calculating the applicant’s eligibility.
   2. Potential resources—
      1. are not used in the budget when calculating eligibility, but
      2. Actions necessary to realize a potential resource will be conditions of eligibility for the applicant for future applications.
2. Income.
   1. Income includes, but is not limited to—
      1. net remuneration for services performed;
      2. cash received on either secured or unsecured credit;
      3. any payments received as an annuity;
      4. retirement or disability benefits;
      5. veterans' pensions;
      6. workers' compensation;
      7. unemployment benefits;
      8. benefits under any state or federal categorical assistance program;
      9. supplemental security income;
      10. social security, and any other payments from governmental sources, unless specifically prohibited by any law or regulation;
      11. support payments;
      12. income from pension or trust funds;
      13. household income from any other source, including relatives or unrelated household members;
      14. any benefit received pursuant to 36, M.R.S. §5219-KK and ch. 907, unless it is used for basic necessities; and
      15. in kind contributions to the household or on behalf of the household.
   2. All income of post-secondary student applicants must be considered available.
   3. For repeat applicants, income from the previous 30-day period that is unaccounted for, or not spent on basic necessities, will be considered misspent and/or available.
      1. If the applicant later submits verification that unaccounted for income was spent on basic necessities, it will no longer be considered available income. If this verification is provided within the eligibility period and need still exists, benefits may be recalculated.
   4. Lump sum payments are income and will be prorated over future months.
      1. When a lump sum is received, the municipality will calculate the number of months it shall be pro-rated over (as prescribed below) to determine the period of ineligibility.
         1. All income received by the household between the receipt of the lump sum payment and the application shall be added to the lump sum and included in the calculation of proration.
         2. Verifiable expenditures for basic necessities from the date of receipt of the lump sum until the date of application and payment of bills for which purpose the lump sum was paid shall be deducted from the lump sum in the calculation of proration. Basic necessities for purposes of determining proration of lump sum include but are not limited to— all basic necessities provided by general assistance; reasonable payment of funeral or burial expenses for a family member; reasonable travel costs related to the illness or death of a family member; repair or replacement of essentials lost due to fire, flood or other natural disaster; repair or purchase of a motor vehicle essential for employment, education, training or other day-to-day living necessities; repayments of loans or credit, the proceeds of which can be verified as having been spent on basic necessities; and payment of bills earmarked for the purpose for which the lump sum is paid.
         3. The total from ii. will be subtracted from i.
         4. The remainder (iii) will be divided by the verified, actual, prospective, 30-day budget for all of the household’s basic necessities. The result is the number of months the lump sum will be prorated over (and the applicant household will be ineligible for). This shall not exceed twelve months from the date of application.
      2. If the date of receipt and amount of the lump sum are known, but expenditures are not, the same calculations shall be used and the length of denial shall not be longer than what the calculation allows.
      3. If an applicant, whether an initial or repeat applicant, receives a lump sum payment and cannot verify the amount, date of receipt, and expenditures from the lump sum, a denial shall be placed on the case for up to twelve months from the application date, until the information is received.
      4. The household of an initial applicant that is otherwise eligible for emergency assistance may not be denied emergency assistance solely on the basis of the proration of a lump sum payment. In such cases, subsequent applications are subject to proration and all other standards established under General Assistance law, regulations and municipal ordinance.
   5. Earned Income Tax Credit (EITC) received by an applicant household, whether in a paycheck or in the form of a tax return, is income. Until received, EITC is a potential resource.
3. Some Resources Are Not Counted When Calculating Eligibility
   1. Support Service payments received by ASPIRE participants are not to be counted as income, whether paid directly to the vendor or issued to the ASPIRE participant through Electronic Benefit Transfer (EBT), if used as and when intended.
   2. Federally funded Supplemental Nutrition Assistance Program (SNAP) benefits cannot be considered as income or a resource (7 C.F.R. §272.1).
      1. General Assistance applicants shall be required to apply for SNAP benefits.
   3. Housing assistance paid directly to a landlord cannot be considered as income or a resource.
   4. Student financial aid provided through the school system that is specifically earmarked for required expenditures, such as tuition, books and lab fees shall not be considered as income or a resource.
      1. Municipalities shall require applicants to provide detailed financial aid information to determine that which is specifically earmarked for school and which portion is, or can be used for living expenses.
4. Deductions.

Allowable deductions are subtracted from income prior to calculating eligibility. Optional deductions are considered available to the applicant when calculating eligibility.

* 1. Upon receiving earned income verification, usually in the form of check stubs, the administrator shall determine whether deductions are to be considered allowable or optional.
     1. Court or Department of Health and Human Services ordered child support and alimony deductions from earned (or unearned) income are not optional and are not considered available income.
        1. Child support payments in excess of the ordered amount will be considered available to the applicant household.
        2. If, as the result of making ordered child support payments, the applicant is eligible for General Assistance, a requirement shall be made to petition the Department of Health and Human Services or the court, whichever is appropriate, to have the ordered payment lowered.
     2. Optional deductions for health or dental insurance are considered allowable.
  2. When determining net income, necessary, verifiable, work related transportation and dependent care costs from the past 30 days shall be deducted from earned income.
     1. Do not allow additional insurance coverage necessary due to a poor driving record or driving convictions such as OUI offenses.
     2. The municipal officer shall project transportation costs (at the capped mileage rate as determined by municipal ordinance) and child care costs as work related expenses when budgeting prospectively.
     3. Unless otherwise specified in the municipal ordinance, the budgeted allowances for prospective transportation costs are to be capped at the allowed mileage rate in the ordinance.
  3. If public transportation is available, deductions for transportation shall not exceed the public transportation expense.
  4. Work related expenses may not be deducted from unearned income.
  5. Deductions for deposits to banks or credit unions; payments for optional services; and payments for loans or other creditors are to be considered optional and available.

1. Allowable Expenses. Expenses that are verifiable and spent on basic necessities are considered allowable and will not be considered available to the applicant when calculating eligibility.
   1. Income from the past 30 days that can be verified as being spent on basic necessities shall not be considered available to the applicant.
   2. Income from the previous 30 days that was not spent on basic necessities or other allowable expenses or that cannot be verified at all will be considered available to repeat applicants.
   3. When deciding which payments made are allowable expenses, only the basic amount shall be considered. For example—
      1. Do not allow long distance calls unless made to a physician, or data or text plans, unless deemed necessary by the municipality.
      2. Do not allow late fees for otherwise allowable expenses.
   4. If the applicant is not working or looking for work and has a vehicle, it shall be determined whether or not the applicant can get to a food store or to a doctor, when necessary, by means other than the applicant’s vehicle.
      1. Such elements as distance, remoteness, availability of family and neighbors shall be factored into a decision.
      2. If a vehicle is not deemed necessary after considering these factors, income spent on that vehicle shall be considered misspent and available to the applicant.
2. Verifications shall be provided by the applicant household for anything pertinent to eligibility that may be considered questionable.
   1. Applicants will be responsible for providing any and all information and documentation concerning eligibility including, but not limited to, household composition, citizenship status, verification that the applicant is pursuing a lawful process to apply for immigration relief, resources, assets and liabilities, employment, income and use thereof, expenses and any changes in information previously given for all members of the household that would affect eligibility.
   2. Income may be verified by paystub, tax returns, government documentation, employer statement, bank statements, Department of Health and Human Services or any other way deemed credible by the General Assistance administrator.
   3. Citizenship status shall be verified by official government or court documentation or may be confirmed by Department of Health and Human Services.
   4. Allowable Expenses must be verified by receipts. Municipalities shall inform repeat applicants in writing that they are required to provide receipts for all expenditures at the next application.
      1. The administrator shall view receipts and may retain copies in the case file.
      2. If receipts for food show that some of the food was purchased with Supplemental Nutrition Assistance Program (SNAP) benefits, this portion shall not be considered in determining use of income.
   5. When receipts are not available, other methods may be used to verify expenditures, such as phone calls made to utility companies, fuel dealers and landlords. Written signed statements from a vendor are acceptable to verify expenditures.
   6. Municipalities shall verify with Department of Health and Human Services that new applicants have not been disqualified by another municipality.
3. Interim Assistance
   1. The Department and the Social Security Administration (SSA) have instituted an Interim Assistance Reimbursement (IAR) program to repay state and local funds expended for assistance to Supplemental Security Income (SSI) applicant/recipients while the SSI payments are pending or suspended.
      1. Under this agreement, any General Assistance funds expended for a recipient who is later found eligible for SSI must be repaid from the retroactive SSI check.
   2. Municipal General Assistance Administrators must obtain written authorization for subsequent SSI reimbursement from each applicant who, to the Administrator’s knowledge, may be eligible for SSI, has applied for SSI, or who is waiting for benefits which have been suspended.
      1. An applicant meeting one of these criteria is not eligible for General Assistance until such an authorization is signed, and assistance will be provided for the time period beginning with the date that the authorization is signed.
         1. Current recipients of SSI are not subject to this requirement.
      2. If an applicant’s SSI monthly payments are suspended or terminated, the applicant shall be required to appeal or file again.
         1. The applicant must sign a post-eligibility authorization for reimbursement of moneys from a potential lump sum.
      3. If two or more people in the household are applying for SSI, each must sign a separate authorization form.
      4. If the SSI applicant is a child, the authorization form is completed and signed by the parent or legal guardian.
         1. The social security number used on the form is that of the child.
      5. IAR forms must be signed by a recipient every 12 months and after every denial by the SSA.
   3. The Department of Health and Human Services will provide the municipalities the necessary forms to obtain this authorization from the applicant.
   4. The authorization is not effective unless the form is filled out correctly.
      1. Only one box shall be checked off and the form must be signed by both the applicant and the administrator.
   5. The authorization is not effective unless received from the municipality by the Social Security office within 30 days of signing the form.
   6. When the SSA notifies the Department that a recipient has been found eligible for SSI benefits and will be receiving a retroactive check, the Department will request the following information from the municipality by month for each month of receipt:
      1. The amount of General Assistance provided for the recipient, which shall be pro-rated if it is not a household of one; and
      2. The number of hours that the recipient performed workfare for the municipality and the monetary value placed on each hour of workfare performed.
         1. The recipient must be credited with at least the state or federal minimum wage, whichever is higher, for each hour of workfare.
         2. The value of workfare performed by the recipient during the applicable time period will be subtracted from the General Assistance amount reported.
4. Applicant Eligibility When Parental/Spousal Responsibility Exists
   1. A parent of a child under 25 years of age living in or owning property in Maine shall support their children in proportion to their respective ability. If assisting a child would, in turn, make the parent eligible for General Assistance they will not be liable to provide and/or reimburse said assistance.

Likewise, a spouse living in or owning property in Maine shall support their spouse in proportion to their respective ability. If assisting a spouse would, in turn, make them eligible for General Assistance they will not be liable to provide and/or reimburse said assistance.

* + 1. Parents/spouses may be contacted in order to inform them of their financial responsibility and determine their ability to provide assistance to the applicant.
    2. The applicant must be informed that the responsible party will be contacted to inform them that they are financially responsible to support the applicant.
    3. Applicants may withdraw the application if they do not want certain contacts to be made.
  1. In no event should a parent or spouse be contacted if the separation involves any type of documented abuse – physical, mental, or emotional.
     1. Documentation of abuse may be supplied by Department of Health and Human Services, police, counselors etc.
     2. If the abuse is evident to the administrator through apparent bruises or knowledge of the applicant’s family history, further documentation shall not be required.
  2. If the parents are willing to provide assistance to the applicant removing the need for General Assistance, the application may be denied.
  3. In determining ability to pay of the responsible parents or spouse, the municipality shall use actual expenses of the parents or spouse and not use maximum limits for basic necessities as used for the General Assistance applicant.
  4. Parents or spouses who refuse to provide financial information may be billed for the assistance issued on behalf of their children or spouse.
     1. Applicants shall not be denied solely because parents or spouses refuse to release financial information.

1. Minors.
   1. Minors including minors with dependent children applying for General Assistance are eligible only if the minor is residing in the home of the minor’s parent, legal guardian, or other adult relative (in which case the entire household will be evaluated for eligibility), unless

a. The minor is residing in a foster home, maternity home, or other adult supervised living arrangement; or

b. the minor has no living parent or the whereabouts of the parents are unknown; or

c. no parent will permit the minor to live in the parent’s home; or

d. the minor lived apart from both parents for at least one year prior to application; or

e. the municipality or the Department of Health and Human Services determines that the physical or emotional health or safety of the minor or the minor’s dependent child or children would be jeopardized if the minor or the minor and the minor’s children lived with a parent; or

f. The minor has a similar justifiable reason, or other good cause, for not residing with either parent that has been approved by the Department.

* 1. In no event should a parent be contacted if the separation involves any type of documented abuse – physical, mental, or emotional.
     1. Documentation of abuse may be supplied by Department of Health and Human Services, police, counselors etc.
     2. If the abuse is evident to the administrator through apparent bruises or knowledge of the applicant’s family history, further documentation shall not be required.

1. Work Requirements, Work Search and/or Workfare.
   1. An applicant is ineligible for assistance for 120 days in all municipalities in the State when any municipality establishes that the applicant, without good cause—
      1. Refuses to search for employment when that search is reasonable and appropriate;
      2. refuses to register for work at a CareerCenter or online through Maine JobLink;
      3. refuses to accept a suitable job offer;
      4. refuses to participate in a training, educational or rehabilitative program that would assist the applicant in securing employment;
      5. refuses to or willfully fails to perform a workfare assignment; or
      6. willfully performs a workfare assignment below the average standards of that assignment.
   2. An applicant, whether an initial or repeat applicant, who quits work or is discharged from employment due to misconduct as defined in Title 26, section 1043, subsection 23, is ineligible to receive assistance for 120 days after the applicant’s separation from employment.
   3. Municipalities may operate a workfare program making it a condition of eligibility.
      1. Workfare can be performed for the municipality or for a non-profit organization, if that organization has agreed to participate as an employer in the municipal work program.
         1. A person may not be required to work for a non-profit organization if that work would violate a basic religious belief of that person.
   4. The maximum length of time which can be required of a participant in a municipal work program is determined by dividing the General Assistance benefit by an amount equal to at least the state or federal minimum wage whichever is higher.
      1. Once assignment is made to the municipal work program or a work requirement is established, a recipient is responsible for completing the assignment. If subsequent action(s) by the recipient result in incarceration and they cannot complete the assignment, good cause is not be granted. Failure to fulfill any eligibility requirement due to incarceration as a result of a recipient’s action after the requirement has been made does not result in good cause.
      2. Expenses related to work performed under this section must be considered in determining the amount of General Assistance to be provided to the individual.
   5. When a recipient is responsible for repaying assistance from a lump sum (E.g. after an SSI or Worker’s Compensation determination), that debt is reduced by the value of the workfare performed by the recipient.
      1. When a recipient who has signed an agreement to repay assistance is awarded a Worker’s Compensation award, the value of the work performed in the municipal work program during the applicable time frame is deducted from the amount of General Assistance paid out on behalf of the recipient prior to reimbursement.
      2. Recipients who sign an Interim Assistance Reimbursement agreement and then receive an SSI retroactive payment will have the value of the work performed in the municipal work program during the applicable time period deducted from the amount of General Assistance paid out on their behalf prior to reimbursement.
   6. Workfare participants are not employees of the municipality and are not covered under Workers’ Compensation.
      1. Medical bills for workfare injuries not due to municipal negligence are to be submitted to the Department.
   7. An eligible person performing work under this section may not replace regular municipal employees or regular employees of a participating non-profit organization.
   8. An eligible person in need of emergency assistance may not be required to perform workfare prior to receiving General Assistance; however, an applicant not in need of emergency assistance may be required to satisfactorily complete workfare prior to receiving assistance.
   9. General Assistance provided by a municipality for work performed by an eligible person must be included in the reimbursable net General Assistance costs and itemized separately in reports to Department of Health and Human Services.
   10. The municipality may require recipients to participate in training, educational or rehabilitative programs that would assist the recipient in securing employment.
       1. Participation in such training, educational or rehabilitative programs will not be considered workfare for reimbursement purposes.
   11. Student applicants are not exempt from work requirements, work search or workfare.
       1. If a student of post-secondary education, other than those involved with the Department of Labor or Department of Health and Human Services programs, applies for General Assistance, the applicant must be available to seek and accept full-time employment.
   12. In no instance may any work requirement, training or educational program under this section interfere with a person’s—
       1. Existing employment;
       2. ability to pursue a bona fide job offer;
       3. ability to attend an interview for possible employment;
       4. classroom participation in a primary or secondary educational program intended to lead to a high school diploma or HiSet; or
       5. classroom or on-site participation in a training program that is either approved or determined, or both, by the Department of Labor to be reasonably expected to assist the individual in securing employment. This does not include participation in a degree granting program, except when that program is a training program operated under the control of the Department of Health and Human Services or the Department of Labor.
   13. Good cause for failure to meet a work requirement must be found when there is reasonable and verifiable evidence of—
       1. Physical or mental disability;
       2. compensation below minimum wages;
       3. sexual harassment;
       4. physical or mental inability to perform required job tasks;
       5. inability to work required hours or to meet piece work standards established by the employer;
       6. lack of transportation to and from work or training;
       7. inability to arrange for necessary child care or care of an ill or disabled family member;
       8. a determination of good cause made by the Department of Labor; and
       9. any other evidence that is reasonable and appropriate.
   14. The administrator shall not require medical verification of medical conditions that are apparent or are of such a short duration that a reasonable person would not ordinarily seek medical attention. In any case in which medical verification is required and the applicant has no means of obtaining such verification, the overseer shall grant assistance for the purpose of obtaining that verification.
2. Disqualification.

Except as provided below, applicants who have been disqualified by a municipality are ineligible for General Assistance including Emergency General Assistance statewide, unless the disqualifying municipality has lifted the sanction.

* 1. When an applicant has been disqualified, regardless of the reason, the disqualifying municipality must issue a written disqualification notice to the GA applicant/recipient.
     1. Disqualification notices must give the reason for the disqualification, the time period involved, and information regarding the establishment of good cause and fair hearing rights.
  2. Municipalities must report disqualified applicants to the Department of Health and Human Services.
  3. An applicant who has been disqualified because of non-compliance with any work requirements is ineligible anywhere in the state until the 120-day disqualification period ends, unless the applicant becomes employed or complies with the work requirements.
     1. An applicant who has been disqualified by a municipality for not complying with a work requirement may regain eligibility during the 120-day disqualification period by becoming employed or otherwise complying with the work requirement.
     2. An applicant who has been disqualified due to failure to comply with the municipal work program may be given only one opportunity to regain eligibility during the 120-day disqualification period. If that applicant who regains eligibility is again disqualified for failing to comply with the municipal work program within the initial period of disqualification, the applicant is ineligible for assistance for 120 days from the subsequent disqualification determination and does not have the opportunity to re-qualify during that 120-day period.
  4. Any member of an applicant or recipient household who knowingly and willfully makes any false representation of a material fact to the overseer of any municipality or to the Department or its agents for the purpose of causing that household to be granted assistance by the municipality or by the State shall reimburse the municipality for that assistance.
     1. Further assistance shall be denied until that person—
        1. Reimburses the municipality for the assistance; or
        2. enters into a written agreement that is reasonable under the circumstances to reimburse the municipality for that assistance; and
        3. the applicant has been disqualified for a minimum of 120 days.
     2. Disqualification notices involving false representation will include the amount obtained through false representation and a proposed repayment plan which will allow the applicant time to enter into an agreement and make payments before the minimum 120-day disqualification is served.
        1. The amount of General Assistance obtained through false representation is determined by subtracting the amount the recipient should have received under General Assistance rule from what they did receive by false representation.

a) This calculation may have to be completed for multiple months depending on the circumstances of the case and when the false representation was discovered.

* + - 1. Funds used to repay the General Assistance obtained through false representation will be considered misspent income for budgeting purposes.
  1. Any recipient whose assistance has been terminated or denied has the right to appeal that decision by requesting a fair hearing.
  2. No recipient who has been granted assistance, in accordance with 22 M.R.S. Ch. 1161, may have that assistance terminated prior to the decision of the fair hearing officer, when a fair hearing has been requested within five working days of receiving the written notice.
  3. An applicant who is ineligible for unemployment compensation benefits because of a finding of fraud by the Department of Labor pursuant to Title 26, section 1051, subsection 1, is ineligible to receive General Assistance to replace the forfeited unemployment compensation benefits for the duration of the forfeiture established by the Department of Labor.
  4. A fugitive from justice, as that term is defined in 15, M.R.S. §201, subsection 4, is not eligible for General Assistance.
  5. When an applicant is disqualified, the dependents of that person may still apply for and, if eligible, receive a prorated amount of assistance.

1. Immigration Status.
   1. Lawfully present persons and those pursuing a lawful process to apply for immigration relief are eligible for General Assistance, provided that they meet all other eligibility requirements. Those pursuing a lawful process for immigration relief have a lifetime eligibility limit of 24 months. Only months of assistance provided after July 1, 2015 will be counted towards this limit.
   2. Verification, Records Retention, and Reporting Responsibilities. Municipalities will not receive reimbursement for expenditures for those lawfully present or pursuing immigration relief unless—
      1. The applicant provides to the municipality satisfactory proof that they are either lawfully present, or that they are pursuing a lawful process to apply for immigration relief in accordance with Section II of this manual;
      2. For an applicant eligible as pursuing a lawful process for immigration relief the municipality tracks and documents the number of assistance months received by that applicant in that municipality;
      3. The municipality provides to the Department all information that the Department has requested on recipients of General Assistance who are either lawfully present or pursuing a lawful process to apply for immigration relief, for the purpose of program integrity and the coordination and prevention of duplication of services; and
      4. The municipality will retain this documentation for a period of no less than three years.
2. Recovery Residence.
   1. A person is not ineligible for General Assistance solely because they reside in a recovery residence.
      1. Beginning July 1, 2022, a municipality may not provide housing assistance to a person residing in a recovery residence that has not been certified in accordance with 5 M.R.S. §20005(22)[[3]](#footnote-3), except that the person may receive housing assistance while residing in an uncertified recovery residence for one 30-day period only. The applicant may receive assistance for necessities other than housing if the applicant is otherwise eligible while residing in an uncertified recovery residence. The overseer shall inform the applicant of the certification requirement and shall verify certification status prior to rendering a decision of eligibility.

2. The managing operator of a certified recovery residence is not ineligible to receive payment on behalf of an applicant solely because that managing operator is not the legal property owner of the recovery residence.

**SECTION V. MAXIMUMS, CATEGORIES AND LEVELS OF ASSISTANCE**

1. Overall Maximums
   1. The overall maximum used to calculate an applicant’s deficit and unmet need as provided in Section IV(B) is also the maximum benefit amount that may be provided in non-emergency situations.
   2. Municipalities must establish an aggregate maximum level of assistance in accordance with 22 M.R.S. §4305(3-B).
      1. The Commissioner will accept as standards and practices for those persons in the unorganized territories, the same as those presented in the Maine Municipal Association (MMA) model ordinance, unless they are found to be unacceptable by the Department.
2. Categorical Maximum Levels for the General Assistance Program
   1. In addition to overall maximums, a municipality may elect to incorporate maximum levels of assistance for each individual basic necessity as part of its ordinance, but there is no requirement to do so. If a municipality does not incorporate categorical maximums, it shall use the actual costs of the basic necessities in determining need.
      1. If a municipality establishes maximum levels of assistance for specific basic needs, those levels must be adequate to allow General Assistance recipients who utilize all available resources, as defined herein, in the community to acquire goods and services necessary to maintain health and to provide a safe and habitable dwelling.
      2. The maximum levels of assistance established by a municipality are subject to review by the Department, upon complaint, to ensure compliance with the statutes.
      3. Maximums are subject to regular departmental reviews and municipalities shall be prepared to demonstrate:
         1. The method by which they measure standards of health and decency; and
         2. how they arrived at the maximum level figures.
   2. If an applicant for assistance is applying because of an emergency, municipalities may find it necessary to disregard their maximum levels of assistance to provide help during the emergency situation.
3. Food
   1. Municipalities may adopt the current Thrifty Food Plan amounts as issued by the Food and Nutrition Service (FNS) of the United States Department of Agriculture (USDA). A municipality’s maximum assistance level for Food may not be below the Thrifty Food Plan.
      1. These figures are published after study to cost of food for various family sizes and are updated annually. The Department shall consider these amounts current for up to one year following the date of issuance.
      2. A market basket survey may be used to establish food maximums if the maximums provided by the USDA are insufficient to maintain health in the municipality.
      3. Municipalities may adopt food allowances that restrict the purchases of particular items.
         1. If a municipality chooses to do so, it shall explain its rational for these restrictions.
4. Shelter Cost
   1. Suggested shelter maximums are provided to the municipalities on an annual or biannual basis by the Department or the Maine Municipal Association. These maximums are derived by using The Department of Housing and Urban Development (HUD) fair market rent figures minus utilities as calculated by the Department or the Maine Municipal Association.
   2. A municipality may set maximums based on its own analysis of rent in the municipality, using figures other than HUD’s, by conducting a survey of landlords or using classified advertisements.
      1. The survey may not be limited to those landlords who provide housing to General Assistance recipients as it may produce distorted rent figures.
      2. If a municipality sets a maximum for housing assistance using figures that are lower than HUD fair market rent figures, it must substantiate in writing to the Department that the figures are reasonably and adequately sufficient to maintain health and decency.
   3. The maximum level of shelter costs for home owners/buyers is the same as the maximum level of rentals.

4. The maximum level of shelter costs for applicants in a recovery residence is 75% of the 1-bedroom allowance set pursuant to Paragraph 1 or 2 above.

5. Municipalities shall set limits, not to exceed 120 days, whereby an applicant’s shelter maximums may not exceed the maximums that applied when the applicant lived in subsidized housing, if:

* + 1. The applicant voluntarily leaves subsidized housing for housing with increased shelter cost without good cause, or
    2. the applicant is required to leave subsidized housing because of fraud, misrepresentation, or a knowing or intentional violation of or refusal to comply with regulations of the housing authority.

6. Security Deposits. Security deposits are not to be paid with General Assistance funds except if there is no permanent lodging available unless a security deposit is paid.

1. A security deposit shall not be authorized until:
   * + 1. All possible alternate sources for security deposit payments have been contacted (such as Maine State Housing Authority (MSHA), TANF, Emergency Assistance (EA), etc.); and
       2. the municipality has contacted the landlord and attempted to obtain a waiver or to make arrangements for delayed or partial payments of the security deposit over a prolonged period of time.
2. These contacts must be made expeditiously and without undue delay as is appropriate to the particular situation of the eligible applicant.
3. Prior to a denial of assistance for lack of need of payment of a security deposit, the municipality must have knowledge that adequate permanent housing sources are available in the community without the necessity of a security deposit and must provide the client with that specific information.
4. If the client refuses to utilize the housing sources provided without good cause, the municipality has no further responsibility to the client for housing assistance.
5. Municipalities shall carefully document all details involved with a request to pay a security deposit making it clear why an emergency (as defined in Section II) did or did not exist.
6. Security deposits, when provided by the General Assistance Program, shall be returned to the municipality. Municipalities shall have agreements with the landlord to return the security deposit, minus amounts needed to cover any damages or cleaning charges incurred, excepting such costs associated with normal wear and tear.

7. Emergency Shelter Costs

1. A municipality may choose to consider the actual costs of an emergency shelter up to the shelter amount allowed by ordinance. The municipality may provide General Assistance to the emergency shelter provider when the following criteria have been met:
2. The applicant, and not the shelter provider, has completed an application for assistance, and

ii. the applicant has been found eligible for assistance based on criteria established in the municipal ordinance.

1. Personal Care and Household Supplies
   1. Municipalities may adopt the maximums for ordinary personal household supplies that are provided by the Maine Municipal Association.
      1. A supplement to this maximum for households with children under 5 must be adopted to allow for costs such as diapers and baby wipes.
2. Electricity, Fuel Oil, Wood, Natural and Bottled Gas
   1. Municipalities may adopt the maximums for these goods and services provided by the Maine Municipal Association.
   2. A municipality may elect to develop its own levels of assistance for each item and provide the Department with documentation justifying these levels of assistance.
      1. The figures developed shall be reasonably and adequately sufficient to maintain health and decency.
3. Property Tax
   1. Municipalities may not use the General Assistance Program to assist with delinquent property tax unless foreclosure and subsequent eviction is imminent and it is the most cost-effective avenue.
   2. 36 M.R.S. §841 *et seq*. establishes a poverty tax abatement process. This process is an available/potential resource.
4. Capital Improvement
   1. Capital improvements may only be made to property owned by and lived in by the client, unless the client is temporarily absent due to the condition needing repair.
      1. If such expenditures are determined essential by the municipal welfare official in accordance with the municipality’s ordinance and 22 M.R.S. §4301[[4]](#footnote-4) they will be allowable for reimbursement under the same conditions as other expenditures.
   2. A municipality may claim a lien against the owner of the real estate for the amount spent to make capital improvements to the real estate.
5. Medical and Dental Cost
   1. Assistance for medical or dental services is restricted to non-elective medical or dental services, determined by a physician, dentist, or nurse practitioner to be essential to maintain the applicant’s health and approved by the municipality prior to the applicant receiving the service.
   2. Municipalities may grant assistance for medical or dental services only when the assistance cannot be obtained from any other source and the applicant would not be able to receive necessary care without the municipality’s assistance.
   3. Authorization for medical services shall be granted based on, and limited to, MaineCare rates applicable for those services.
   4. General Assistance may not be used for a MaineCare co-payment, unless deemed necessary by the administrator.
   5. General Assistance may be used for private insurance co-payments, including co-pays for prescriptions provided by Medicare.

**SECTION VI. MUNICIPALITY OF RESPONSIBILITY**

1. Financial Responsibility of a Municipality to Applicants
   1. Except as provided in Section B (below), a municipality is responsible for the General Assistance support of—
      1. Residents of the municipality;
      2. Persons who apply for assistance in that municipality, but who are not residents of that or any other municipality. If a person is not a resident of any municipality, the municipality where the person first applies shall be responsible for support until a new residence is established.
   2. No municipality may establish durational residency requirements for General Assistance.
   3. All persons who wish to file an application must be allowed to do so. If a municipality believes that an applicant is not its financial responsibility, that municipality is still responsible for taking an application.
   4. When a municipality presumes eligibility for a person who is provided shelter in an emergency shelter for the homeless located in that municipality, no other municipality may be determined to be the municipality of responsibility for the 30 day period in which eligibility has been presumed.
   5. If the municipality where an applicant has applied believes that the applicant is the responsibility of another municipality under these rules, the municipality receiving the application shall notify in writing the municipality it considers responsible. The notice shall include information that lends itself to the establishment of residency or that otherwise supports a finding that the municipality not fielding the application is financially responsible for the applicant. If assistance is granted without notice or agreement with a second "responsible" municipality, the first municipality is responsible for payment for the assistance granted (22 M.R.S. §4307(5)).
   6. When there is a dispute regarding residency, the municipalities shall try to resolve it prior to contacting the Department.
      1. If an agreement cannot be reached, a municipality requesting assistance resolving a dispute shall provide to the Department—
         1. An account of how the dispute was attempted to be resolved;
         2. the applicant’s name and current address;
         3. the applicant’s previous address;
         4. the applicant’s place of employment; and
         5. any information pertinent to the applicant’s residence in any municipality.
      2. The Department will render a written decision to resolve the dispute within 30 days.
         1. The decision will state the sources of information relied upon and include findings of fact and conclusions of law.
         2. A municipality or person aggrieved by the Department’s decision may file an appeal.
         3. In the interim, the municipality where the applicant has applied shall use its own General Assistance ordinance to determine levels of assistance for an eligible applicant.
      3. After the Department’s decision has been rendered, the owing municipality shall reimburse the municipality that provided the assistance within 30 days.
         1. If at the end of this 30-day period payment has not been received, it is the responsibility of the municipality owed the money to notify the Department of non-payment by telephone or letter within 30 days of expiration of the deadline of payment.
         2. Upon notification of non-payment, the Department shall reimburse the municipality owed the money. The Department will give written notification of payment to the owing municipality. The Department shall require payment by withholding that amount from reimbursable funds due, referring the debt to the Treasurer, State of Maine who shall withhold that amount from funds due the owing municipality from tax revenues, fines or fees, or directly billing the owing municipality.
2. Relocation of General Assistance Applicants
   1. Overseers of a municipality may not move or transport an applicant or recipient into another municipality to relieve their municipality of responsibility for that applicant’s or recipient’s support.
   2. A municipality may assist an applicant or recipient to relocate if the applicant or recipient requests relocation and the municipal administrator determines the applicant needs to relocate.
      1. If there is adequate housing available in the municipality where the applicant currently resides, there is no obligation on the part of the municipality to relocate the applicant.
      2. If housing assistance is requested, the applicant is eligible, and there is no adequate, available housing locally, then relocation to another municipality would be warranted if that is determined to be the best available option.
   3. If a municipality provides financial assistance or makes arrangements for an applicant or recipient to relocate to another municipality, the sending municipality will be responsible for the support of the recipient for—
      1. up to 30 days if the relocation is to permanent housing, or
      2. up to six months if the relocation is to temporary housing.
         1. Relocation into temporary housing shall be followed by requirements to find permanent housing as soon as possible.
         2. Rooming houses, including recovery residences, when residents are there for more than 28 days, are to be considered the person’s primary residence and not temporary housing.
   4. If an applicant relocates on their own, the municipality from which that applicant has moved has no financial responsibility, unless that municipality has illegally denied assistance, causing the relocation.
      1. Any municipality that illegally moves or transports a person, or illegally denies assistance to a person which results in their relocation, in addition to other penalties provided for in statute and rule, shall reimburse twice the amount of assistance to the municipality which provided the assistance to that person.
   5. If an applicant is experiencing homelessness at the time of the application and has been for 6 months or less, or had a residence immediately prior to experiencing homelessness that the applicant had maintained and to which the applicant intends to return, the municipality of responsibility is the municipality where the applicant was a resident immediately prior to experiencing homelessness.

**SECTION VII. RETENTION OF RECORDS**

1. Municipalities shall retain case records for a minimum of three full State fiscal years.
   1. Emergency phone applications shall be transferred to a written application form and maintained on file as any other emergency application.
   2. The process of destroying records shall be determined by the local government records office for each municipality.
2. Audio tapes of municipal fair hearings for General Assistance shall be kept as part of the case record for a minimum of three full fiscal years.
   1. Tapes may be erased or destroyed prior to three years only if the activity has been transcribed and entered into the case record in written or electronic form.
3. If case records include liens or court documents, pertinent information shall be retained for future use until no longer needed.
4. If applicable, documentation verifying that the applicant is pursuing a lawful process for immigration relief, and the number of months of assistance that have been provided to the recipient shall be kept in the case record for the minimum 3 fiscal years.

**SECTION VIII. ORDINANCE FILED**

1. A municipality’s General Assistance program shall be administered in accordance with an ordinance enacted, after notice and hearing, by the municipal officers. The ordinance shall establish written standards of eligibility including the maximum amounts of assistance to be provided.
   1. The standards of eligibility will;
      1. Govern the determination of eligibility of persons applying for relief;
      2. provide that all individuals wishing to make an application for relief shall have the opportunity to do so; and
      3. provide that relief shall be furnished or denied to all applicants within 24 hours of the date of submission of an application.
   2. Municipalities must submit a copy of their General Assistance ordinance and subsequent amendments to the Department of Health and Human Services for filing within 30 days of enactment.
   3. If the municipality elects to enact the Maine Municipal Association model ordinance, it shall so advise the Department by submitting a signed copy of the cover sheet.
      1. If changes are made to the model ordinance, the municipality must highlight those changes and submit them to the Department.
   4. The filed ordinance must include all forms and notices used by the municipality, including the application form, notice of decision and appeal rights.
      1. If forms used in the General Assistance eligibility determination process are different than those provided by Maine Municipal Association; copies must be submitted to the Department of Health and Human Services for approval.
      2. The Department shall file these ordinances/amendments upon receipt and acknowledge each municipality’s ordinance and any subsequent amendments as submitted.
      3. The Department shall not be estopped from subsequently finding that a municipality’s ordinance is in violation of the General Assistance statutes.
   5. The Department shall review municipal ordinances upon receipt or anytime thereafter.
      1. The review will determine whether the ordinance and any amendments thereto comply with the provisions as set forth in 22 M.R.S. §§ 4301-4323.
   6. The ordinance and a copy of Chapter 1161 must be available in the town office and be easily accessible to any member of the public.

**SECTION IX. REVIEW OF MUNICIPAL ADMINISTRATION OF GENERAL ASSISTANCE**

1. The Department shall review the administration of General Assistance for each municipality for compliance with statute, municipal ordinance and this manual.
   1. Reviews shall be conducted on a regular basis.
      1. At the Department’s discretion, municipalities may be reviewed by mail and/or telephone.
         1. The Department shall consider the amount of General Assistance expended, the number of cases, and the overall cost effectiveness when determining if an on-site review is warranted.
         2. Municipalities shall have an on-site review no less than every three years.
         3. Any municipality that receives a mail review may request an on-site review by the Department’s representative.
   2. Reviews may be conducted whenever the Department has reason to believe that a municipality is violating General Assistance statute, municipal ordinance or the rules in this manual.
   3. Reviews may be conducted in response to a complaint from any person.
      1. The Department may decline to investigate a complaint based on factors including, but not limited to: the severity of the alleged problem, whether or not the alleged problem is ongoing, the client’s needs, and the duration of time between the allegedly erroneous action and the date of the complaint.
2. Review Procedure.
   1. On-site reviews shall be conducted during regular business hours of the Department.
   2. The review shall be scheduled at least 48 hours in advance, unless a shorter period is agreed on by both parties.
   3. The Department’s representative will conduct an entrance conference for each review.
      1. The conference will take place by e-mail or phone at the time of scheduling or in person prior to the review to discuss:
         1. The purpose of the review,
         2. the scope of the review,
         3. the time period of the review, and
         4. the case selection process, if applicable.
   4. The General Assistance Administrator or designee shall be available during the Department’s review and shall cooperate in providing all necessary information.
   5. Once the Department’s representative has finished the review, he/she will conduct an exit conference with the General Assistance Administrator or a designee.
      1. The representative will provide the municipality with written findings of the review, indicating any program violations believed to have been made, previewing penalties that may be imposed by the Department and corrections that will need to be made before compliance can be achieved.
      2. The representative and the administrator shall both sign the exit conference form.
         1. The administrator may write comments on the form.
         2. The administrator’s signature does not signify agreement with the review findings; it signifies that the review findings have been discussed with the Department’s representative.
      3. If the administrator does not agree with the findings, he/she shall send a written response to the Department within 10 days of the exit conference.
         1. The Department shall consider the information presented in this written response before finalizing its findings or assessment.
   6. Municipalities that are found to be in compliance with the requirements of Chapter 1161 and these regulations at the time of the review shall be notified in writing at the exit conference and by letter from the Department.
   7. Municipalities that are found to be out of compliance with the requirements of Chapter 1161 and these regulations after the 10-day waiting period from the date of the exit conference shall be notified in writing by the Department. Upon receipt of findings of non-compliance by the Department, the municipality may, if dissatisfied with the findings, request a fair hearing.
3. If a municipality requests a fair hearing, the Department shall stay all penalties pending a fair hearing decision.
4. If the Department’s findings are upheld by the hearing officer, or if no hearing is requested, penalties will be imposed as described in Section X of this manual.
5. Departmental reviews may include some or all of the following elements.
   1. Municipal fiscal records. The Department may assess whether only direct (and not administrative) costs are billed to the Department, and whether the correct calculations were used to seek state reimbursement.
   2. Proper Notice. During an onsite review the Department must determine if a notice is posted in accordance with 22 M.R.S. §4304(1).
   3. Applications. The Department may determine whether applications are available for review.
   4. Case files. The Department must review a sample of cases. The size of the sample will depend on the number of cases granted in the municipality each month, and will be no smaller than:

**No. Cases Monthly Minimum To Be Reviewed**

1-25 10 (or all cases if fewer than 10)

26-50 20

51-100 30

101-150 40

151-200 50

201-300 60

301-400 75

more than 400 90

1. For each case under review, the Department will determine whether:
   * 1. Conditions of eligibility from the previous application were met, if applicable;
     2. a budget was completed to determine a deficit;
     3. a budget was completed to determine unmet need, whenever there was deficit or an emergency situation;
     4. unverified expenditures and expenditures verified as misspent were added to prospective income as misspent income and were considered available, unless the applicant was considered to be a first-time applicant;
     5. the lesser of the deficit or unmet need was the amount granted, unless an emergency existed that could not have been averted by the applicant’s use of income and resources;
     6. there is a narrative statement of case activity in emergency situations that indicates the emergency and the reason for granting more than the maximum allowed;
     7. if an emergency application was made outside of normal working hours, and the applicant failed to appear later to document eligibility, the case record, in lieu of an actual application, includes a budget and narrative explanation describing circumstances that led up to the granting of assistance;
     8. a written decision was given in each instance that eligibility was determined/re-determined, granted, denied, reduced, terminated or suspended; and the written decision included the specific reason(s) for the determination, information on fair hearing rights, conditions of future eligibility, and the Department’s toll free number;
     9. the applicant was required to sign an Interim Assistance Reimbursement authorization if waiting for an initial eligibility determination for SSI or waiting for a post-eligibility determination due to suspension or termination of SSI benefits;
     10. records required under Section VII (Retention of Records) are included in the case record.
     11. A decision was made within 24 hours.
   1. Denials. The Department shall review cases that have been denied assistance to ensure that reasons for denial, notices of ineligibility and other aspects of the case comply with ordinance and statutory provisions.
      1. If possible, 20% of the cases reviewed by the Department will be denials.
      2. The review of denied cases may extend beyond the time period used for the active case record.
   2. The Department may find it necessary to conduct a more in-depth case review, if during the initial review, it discovers a significant number of errors or inconsistencies in the case files being reviewed. This review may require the Department to conduct interviews with clients, vendors, advocates, or any other relevant source.
   3. At the Department’s discretion, it may review a municipality’s General Assistance Program for compliance with any legislation regarding client rights, Department or municipal responsibilities, and cost saving measures, after the effective date of said legislation.
   4. At the Department’s discretion, its review may include an audit of the grants, expenditures, and computation of SSI reimbursements.
   5. The Department’s representative will examine fiscal records of the municipality as they relate to each case for the month to be reviewed. This review will ensure that vouchers issued correctly correspond to the individual case files.
2. Corrective Action
   1. Within 30 days of receiving written notice of noncompliance from the Department, the municipality must submit a plan of corrective action, specifying the steps it will take to achieve compliance for each violation.
      1. At a municipality’s request, the Department will work with the municipality in developing an acceptable plan of correction.
      2. If the municipality fails to submit a corrective action plan timely, it will be subject to penalty in accordance with Section X, Subsection A(1)(b).
   2. The Department will respond in writing to the proposed corrective action plan, accepting or rejecting the plan.
      1. Upon acceptance of a corrective action plan, the Department will review the municipality again within sixty days to determine whether the corrective action plan is being followed and the municipality has achieved compliance.
         1. If the Department finds the same violations in its follow-up review or finds that the municipality is not following its corrective action plan, the municipality will be subject to a withholding penalty in accordance with Section X, Subsection A(1)(d).
         2. If the Department finds new violations in its follow-up review, the municipality must submit a new corrective action plan, and will not be subject to a withholding penalty for the new violations until after it has been given an opportunity to correct them.
      2. Upon rejection of a corrective action plan, the Department will specify what is needed for an acceptable plan of corrective action.

**SECTION X. PENALTIES**

1. Reimbursement Withholding. When the Department determines after review, that a municipality is not complying with the requirements of the General Assistance statutes, the regulations promulgated thereunder, or the municipality’s ordinance, it will withhold reimbursement to compel compliance, as set out below.
   1. Withholding of reimbursement as a result of a review shall take place when:
      1. The Department determines that funds are being, or have been, spent improperly;
      2. a plan of correction, which has been requested, is not received timely;
      3. a submitted plan of correction is not acceptable to the Department and efforts by the Department and the municipality to agree on an acceptable plan of correction do not result in an acceptable plan; or
      4. a subsequent review, after an acceptable plan has been received, results in the same violations found at the previous reviews.
   2. The time period for withholding shall begin when the initial notice of noncompliance has been sent to the municipality. Withholding will cease when:
      1. An acceptable plan of correction is received by the Department; and
      2. a subsequent review results in compliance with the accepted plan of correction.
   3. When compliance is reached, any money withheld from a municipality shall be reimbursed to that municipality, minus any civil penalties assessed as per section B below.
2. Civil Penalties. Any municipality which fails to file an acceptable plan with the Department or which is in violation of this chapter at the expiration of the period in Section IX Subsection D(a)(ii) shall be subject to a civil penalty of not less than $500. The Department in its discretion may assess a larger penalty, taking into account factors including but not limited to the severity or extent of the noncompliance and the municipality’s good faith efforts to cure such noncompliance.
   1. Every 30-day period that a municipality is in violation of this chapter after review and notification shall constitute a separate offense.
   2. The Department of Health and Human Services shall enforce this in any court of competent jurisdiction.
   3. The Department may refer the municipality’s case to the Attorney General to pursue a civil action to recover the penalties assessed.
3. Any penalty imposed by the Department against a municipality shall be stayed upon receipt of a fair hearing request. No further penalty will be imposed pending the fair hearing decision.

**SECTION XI. INTERVENTION**

1. When the Department finds that an eligible person in immediate need of General Assistance has not received assistance as a result of a municipality’s failure to comply with General Assistance statutes, municipal ordinance or the Department’s regulations, the Department shall intervene and grant assistance within 24 hours per 22 M.R.S. §4323(3).
   1. When a complaint is received, the Department shall ascertain from the complainant or the applicant:
      1. The complainant’s name (if the complainant is not the applicant);
      2. the applicant’s name, address and telephone number;
      3. the applicant’s household composition, income, assets, and expenses;
      4. all other pertinent facts and circumstances leading to the complaint, including, but not limited to, information about whether the complaint involves a first-time application, whether the client has been allowed to apply, whether the client is being disqualified and;
      5. whether the client received a written decision.
   2. The Department shall then contact the municipal official who handles General Assistance in the municipality complained against and clearly describe the complaint received and the statutory violations alleged.
   3. The municipal official shall provide the following to the Department in order to demonstrate the basis for his or her decision;
      1. Information concerning facts and circumstances bearing on the complaint,
      2. applicable citations,
      3. the reasons for the decision; and
      4. any other relevant facts.
   4. Using the information supplied by both the complainant and the municipality, the Department shall determine whether the municipality acted in accordance with General Assistance requirements.
   5. If the Department determines that the municipality acted incorrectly, the Department shall advise the municipality, citing the statutory or regulatory basis for the determination.
      1. The municipality shall have an opportunity, at that time, to reconsider its decision and to grant assistance.
      2. If the municipality does not grant assistance, the Department will grant assistance in accordance with the municipality’s ordinance and state law.
   6. If the Department cannot reach the municipal official who administers General Assistance, and an emergency apparently exists, it shall grant assistance in accordance with that municipality’s ordinance and state law.
      1. Assistance shall be limited to an amount necessary to alleviate the emergency.
   7. The Department shall advise the municipality and the complainant of its decision and/or action as soon as possible.
   8. The Department shall follow up the notification with a written notice stating the reasons for the decision, citing statutory or regulatory violations and the hearing rights available.
   9. Whenever the Department intervenes, it shall prepare an application, do a budget, and send copies of the paperwork and information that it has used to determine the need for intervention to the municipality.
      1. The Department shall bill the municipality for the expense of any assistance granted, plus 5% of the amount to defray the Department’s administrative expenses.

**SECTION XII. REIMBURSEMENT TO MUNICIPALITIES, REPORTING AND REQUIREMENTS**

1. Reimbursement and Requirements
   1. The Department will reimburse municipalities for their direct General Assistance costs at the rate prescribed by statute. Administrative costs are not reimbursable.
   2. In order to receive reimbursement, a municipality must:
      1. Be in compliance with all requirements of Chapter 1161, municipal ordinance and this manual;
      2. submit, in a timely manner per sections B and C, below, claims for reimbursement together with the necessary report forms;
      3. certify in writing that its claim for reimbursement does not include any General Assistance payments made to individuals who did not meet the municipality’s or the state’s eligibility requirements; and
      4. provide with its reimbursement request the names, alien numbers and numbers of assistance months for all General Assistance recipients eligible as “pursuing a lawful process” included in that request.
   3. When a municipality receives reimbursement from a client or another municipality (which is not part of the Interim Assistance (SSI) Program), and the payment has already been claimed to the Department for reimbursement, the municipality must inform the Department.
      1. This reimbursement will be reported on the reimbursement form for the time period it is received and the Department shall receive its share.
   4. The value of workfare completed by recipients will be subtracted from the reimbursement request.
   5. Claims for reimbursement must be based on assistance payments the municipality actually disbursed during the reimbursement period, and must not include payments that the municipality paid previously or expects to pay at a later date.
      1. Municipalities that use the accrual method of bookkeeping may need to keep separate records, so that reimbursement claims for the last month of the State’s fiscal year reflect only those payments made through the last day of the month of the State’s fiscal year.
2. Reporting and Reimbursement Procedure.
   1. Reimbursement requests may be submitted through the General Assistance Portal or by form. The Department will provide to each municipality all necessary forms for reimbursement as well as the opportunity to use the portal.
   2. Reports shall be submitted monthly, quarterly or semi-annually.
      1. Municipalities shall report on the same schedule as the previous fiscal year unless they request and receive written authorization from the Department to change this schedule.
   3. The Department will process for payment claims for reimbursement monthly, quarterly or semi-annually, corresponding to the reporting schedule of the municipality.
   4. Claims for reimbursement shall be processed by the Department in the order of their receipt.
      1. If there are insufficient funds to fully process a claim, all available funds are to be used towards the payment.
         1. The unpaid portion of such claim is to be processed as soon as additional funds are available. Any unpaid balance will be given priority for payment.
3. Deadlines for Reporting and Submitting Reimbursement Claims
   1. Delinquency. The Department is not obligated to accept or pay claims for reimbursement that are not submitted within 90 days of the end of the period covered by the report.
   2. Good Cause. A municipality may submit a claim of good cause for delinquency to the Department.
      1. If the Department determines that good cause exists for the delinquency, it will reimburse the municipality as otherwise provided by this section.
      2. All requests for good cause for delinquency must be received by the Department no later than the last day of October for the previous fiscal year.
      3. Any municipality aggrieved by the Department’s decision on good cause may appeal that decision as provided at 22 M.R.S. §4323(4).

**SECTION XIII. TRAINING**

As part of its role in jointly administering the General Assistance Program, the Department may, upon request from a municipality, provide training to new administrators; provide guidance and opinions on issues brought to its attention by a municipality; and provide General Assistance training and/or guidance subsequent to statutory or policy changes.

The Department will work in cooperation with the Maine Welfare Director’s Association and any municipality in the development and delivery of training programs and materials.

EFFECTIVE DATE:

July 3, 1978

AMENDED:

September 29, 1978

December 18, 1983

January 1, 1986

January 1, 1988

July 1, 1989 J

July 1, 1990

November 6, 1990

June 1, 1991

May 18, 1992

September 27, 1992

April 28, 1993

September 19, 1995

EFFECTIVE DATE (ELECTRONIC CONVERSION):

May 5, 1996

AMENDED:

October 9, 1998 (EMERGENCY - expires January 7, 1999) - pages headed Rev. 9/98 #8E.

NON-SUBSTANTIVE CORRECTION:

December 1, 1998 - §VII, 2nd to last paragraph, missing line restored;

§XIII, Joplin example, § changed to $.

AMENDED:

January 12, 1999

February 2, 1999 (refiled).

March 26, 2000

NON-SUBSTANTIVE CORRECTIONS:

May 31, 2000 - "Application Form" definition, formatting, repaginating

AMENDED:

November 27, 2000

NON-SUBSTANTIVE CORRECTIONS:

January 3, 2001 - formatting only

AMENDED:

December 12, 2002 - filing 2002-468

NON-SUBSTANTIVE CORRECTIONS:

February 28, 2003

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May 26, 2003 - filing 2003-142

June 26, 2004 – filing 2004-224

November 6, 2005 – filing 2005-456

June 29, 2012 – filing 2012-190 (Emergency)

September 29, 2012 – filing 2012-276

August 26, 2013 – filing 2013-207 (Emergency)

November 1, 2013 – filing 2013-258

May 16, 2016 – Sections 3, 5 – filing 2016-079

REPEALED AND REPLACED:

September 18, 2018 – filing 2018-187 under the title “Maine General Assistance Manual”

AMENDED:

July 18, 2019 – Sections II, IV, filing 2019-124 *(Emergency)*

October 16, 2019 – Sections II, IV, filing 2019-176

MINOR CORRECTIONS:

July 1, 2020

AMENDED:

July 1, 2020 - Sections II, IV and VI, filing 2020-145

MINOR CORRECTION:

July 6, 2020 (spelling within history notes)

AMENDED:

September 1, 2022 - Sections II, IV, V, and VI, filing 2022-157

October 25, 2023 – Section IV, filing 2023-192

1. The version most currently in effect applies. The text of this law can be found at <https://legislature.maine.gov/statutes/20-A/title20-Ach412-Bsec0.html>. Copies may be requested by writing to:

   General Assistance Program Manager

   Maine DHHS, Office for Family Independence

   11 State House Station

   109 Capitol St.

   Augusta, ME 04333-0011 [↑](#footnote-ref-1)
2. The version most currently in effect applies. The text of this law can be found at <https://legislature.maine.gov/statutes/22/title22sec4301.html>. Copies may be requested by writing to:

   General Assistance Program Manager

   Maine DHHS, Office for Family Independence

   11 State House Station

   109 Capitol St.

   Augusta, ME 04333-0011 [↑](#footnote-ref-2)
3. The version most currently in effect applies. The text of this law can be found at [legislature.maine.gov/statutes/5/title5sec20005.html](https://legislature.maine.gov/statutes/5/title5sec20005.html). Copies may be requested by writing to:

   General Assistance Program Manager

   Maine DHHS, Office for Family Independence

   11 State House Station

   109 Capitol St.

   Augusta, ME 04333-0011 [↑](#footnote-ref-3)
4. The version most currently in effect applies. The text of this law can be found at <https://legislature.maine.gov/statutes/22/title22sec4301.html>. Copies may be requested by writing to:

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   Maine DHHS, Office for Family Independence

   11 State House Station

   109 Capitol St.

   Augusta, ME 04333-0011 [↑](#footnote-ref-4)