



BENTON COUNTY VETERANS AFFAIRS GUIDELINES

Revised: January 11, 2022

Iowa Code Chapter 35B provides the legal basis for county commissions of veteran affairs. In Benton County, the Veteran Affairs Director administers the veteran affairs program under the direct supervision of the Veteran Affairs Commission.

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I. BENEFITS

Standard veteran's benefits, maintenance of graves, and federal benefits from the United States Department of Veterans Affairs (VA) are available to eligible veterans. In addition, eligible veterans, their spouses/surviving spouses, and legal dependents may qualify for emergency assistance from the Benton County Veteran Affairs Department (Department).

The Benton County Veteran Affairs Commission (Commission) reserves the right to refuse benefits to an applicant who does not meet the eligibility criteria listed in Section II of this document.

The Benton County Veteran Affairs Director (Director) may make exceptions to policy on a case-by-case basis as long as the expenses for the services to Veterans activity do not exceed the original annual budget in any given fiscal year.

Applicants may appeal the Department's decision regarding eligibility, or the amount of assistance granted in accordance with Section XIV of this document.

II. ELIGIBILITY

A. Veteran/applicant must meet all of the following eligibility criteria to qualify for emergency assistance.

1. The veteran/applicant must have been a legal resident of Benton County, Iowa for at least 30 days. The Department may verify residency with a current driver's license, lease, utility bill, voter registration card, or another official document that proves residency.
2. The veteran must have received an Honorable Discharge or General Discharge Under Honorable Conditions. If the veteran has more than one military discharge, all discharges must meet this requirement.
3. The veteran must meet the definition of "*Veteran*" as provided in Iowa Code Section 35.1, and must have served at least 90 consecutive days of active duty beyond training, or have a VA recognized service-connected disability.
4. The applicant must be a veteran, or a veteran's spouse/surviving spouse, dependent child, including a stepchild or adopted child, under age 18, or another legal dependent.
5. The applicant must have an emergent need that cannot be met by other means and is not due to their own financial misconduct.
6. The applicant must provide proof of an unexpected expense that caused a financial hardship.
7. The applicant's household income shall not exceed 300% of the federal poverty guidelines and asset limitations as established below.

B. Financial Eligibility Amount Calculation

1. Emergency Assistance is not intended to supplement the veteran's/applicant's income.
2. Department staff will determine eligibility from the following:

- Income versus expenses
- Lost or projected income
- Total amount of an unexpected expense(s)

3. Combined Asset Limitations and Exemptions

Single	Savings/Checking/Asset Accounts \$2,000.00
Family	Savings/Checking/Asset Accounts \$4,000.00
Exemptions	Home of residence, life insurance policies, qualified retirement accounts, up to two (2) vehicles per family.

C. Normal Monthly Expenses

The Department considers the following list of expenses to be normal expenses for the purpose of eligibility determinations.

Grocery	See Appendix A
Shelter	Mortgage, rent, lot rent
Utilities	Natural gas, wood, fuel oil, electricity, water, garbage, storm sewer, and sanitary sewer
Telephone	Single person – up to \$70 per month Family – up to \$170 per month
Internet, cable, or streaming service	Up to \$75 per month
Auto loan	up to \$500 per month
Transportation allowance	Vehicle owner – \$200 per month Non-vehicle owner – \$50 per month
Insurance	Divided down to the month
Paid child support/spousal support	Over the past 30 days
Paid credit cards	Over the past 30 days
Paid prescriptions	Over the past 30 days
Paid medical bills	Over the past 30 days

D. Updated Documentation

An applicant must provide all applicable current documentation as defined in this policy with each application submitted for emergency assistance.

E. Immediate Decision

The Director for the Department may be given the authority to make a determination for immediate assistance based on a dire and legitimate need for expedition.

F. Former Spouses

Former spouses (divorced from Veteran) who do not have legal custody of the veteran's dependent child(ren) are not eligible for emergency assistance. A former spouse who has legal custody of the veteran's dependent child(ren) may be eligible for emergency assistance, but must

provide proof of a financial hardship. The Department may provide emergency assistance based on the child(ren)'s welfare and emergent need(s).

G. Lifetime Maximum

There is a three thousand dollar (\$3,000.00) lifetime maximum cap for each veteran/applicant unless a repayment has been made to the county for previous assistance payments granted.

III. HOUSEHOLD

A household consists of a veteran, the veteran's legal spouse/surviving spouse, dependent children to including stepchildren and adopted children that are under age 18, or other legal dependents.

IV. INCOME

Income includes: wages and salaries; exchanged services derived from labor (bartering); self-employment income; unemployment benefits; disability insurance; workers' compensation insurance; federal and state tax refunds; annuities; investment accounts; stocks; child support; spousal support; inheritances; monetary gifts; public assistance; pension or retirement benefits; VA compensation or pension; Social Security benefits; GI bill benefits; and all other income as determined by the Commission.

V. INCOME DETERMINATION

The Department will use all of the veteran's/applicant's household income (including spouse and dependent children) for the last 60 days to determine eligibility for benefits.

VI. APPLICABLE DOCUMENTATION

- Certificate of Release or Discharge from Active Duty/DD Form 214
- Marriage Certificate
- Proof of a common law marriage verified with a statement signed by both parties
- Copy of birth certificate(s) for all dependent children
- Social Security numbers of all eligible dependents
- Death certificate, if applicant is a surviving spouse or eligible dependent
- Total monthly expenses for all eligible dependents
- Verification of all income sources for all eligible dependents, last 60 days
- Verification of all asset accounts for all eligible dependents, last 60 days
- Verification of a food assistance appointment or food assistance benefits
- Doctor's statement verifying a disability or listing a diagnosis/prognosis, if applicable
- Verification of Social Security benefits, if eligible
- Verification of VA benefits, if eligible
- Verification of benefits from disability or pension programs
- Verification of registration with Iowa Workforce Development or any other job training program, or documentation of unemployment benefits
- Verification of past employment including date last worked and the gross and net amount of the last check received

- Verification of new employment including start date, rate of pay, and scheduled weekly work hours
- Verification of legal guardianship and/or conservatorship
- Copy of a divorce decree(s)
- Other legal documentation as applicable

VII. PROGRAM BENEFITS

A. Grocery

Grocery assistance payments (or vouchers) shall not exceed three (3) payments in a twelve (12) month period. The applicant must apply for all other food assistance programs for which the applicant’s household may be eligible in order to qualify for grocery assistance from the Department. Vouchers for grocery shall be allotted on the following basis:

Persons	Amount
1	\$50.00
2	\$75.00
3	\$100.00
4	\$150.00
5	\$150.00
6	\$160.00

An additional \$10.00 will be added for each additional family member for quantity seven (7) and higher.

B. Transportation

Transportation assistance payments (or vouchers) shall not exceed three (3) payments in a twelve (12) month period. The benefit may be granted if the eligible applicant does not have sufficient funds to travel to work, school or medical/health appointments. The Department will provide fuel vouchers not exceeding \$50.00.

C. Shelter

Shelter (rent and mortgage) assistance may not exceed one (1) month in a twelve (12) month period. The Director may make exceptions for shelter assistance only if an applicant has applied for Social Security benefits, VA benefits, or is under a doctor’s care.

1. Rent

The Department will make a reasonable rent payment not to exceed five hundred dollars (\$500.00) per month, to the owner of the rental property as verified by the Benton County Assessor’s Office. The veterans/applicant’s name must appear on the rental property lease and a landlord statement showing ownership will be required. If said landlord previously signed a landlord statement, a second statement is not required. Payment to the landlord must enable said tenant to remain at the property for the month. Rent will only be payable for the current month due will not be paid to a relative of the applicant. If the expense of rent is

being shared, the amount authorized will be prorated. Persons or households receiving rental subsidies, housing vouchers, or other financial assistance for rent are not eligible for rental assistance. The Department will not grant payment to live in roommates.

2. Primary Home Mortgage

A mortgage assistance payment may not exceed the amount of the applicable rental allowance (\$500.00). The mortgage statement must be in the name of the veteran/applicant and must be for a primary residence. The Department will make mortgage payments to the mortgage holder as verified in writing by the mortgage holder or by another legal document that verifies the name of the mortgage holder.

3. Applicants Residing in a Mobile Home Park

Applicants may receive both rental payment and lot rent, if the total does not exceed the applicable rental allowance (\$500.00). If the total exceeds the applicable rental allowance, the applicant may choose either the total applicable rental allowance on the rental payment/mortgage, or on the lot rent. The veterans/applicants name must appear on the rental property lease/mortgage statement and must be for a primary residence. The Department will make payments to the mobile home park owner.

D. Utilities

Utility assistance payments shall not exceed one (1) month in a twelve (12) month period. The amount authorized must be for the current month's bill only and shall not exceed three hundred dollars (\$300.00). An applicant must show effort to have paid on any and all utility bills within the last three (3) months from the date of application; accounts that are past due are not eligible for assistance. The utility bill must be in the name of the veteran/applicant, their spouse or the landlord and the applicant must be residing full time in the residence for which the utility assistance is requested. If the expense of utilities is being shared, the amount authorized will be prorated. Payment, if eligible, must ensure utility service is not disconnected for that month. Persons or households receiving utility subsidies, utility vouchers, or other financial assistance for utilities may not be eligible for utility assistance. The applicant must apply for all other utility assistance programs for which the applicant's household may be eligible. Failure to comply with this requirement may result in the Department denying assistance. The Department will make payments to the utility company or vendor.

1. Utilities are defined as natural gas, wood, fuel oil, electricity, water, garbage, storm sewer and sanitary sewer.
2. Cable and internet are considered non-essential services and are ineligible for assistance. The Department may consider an exception and grant payment if the veteran/applicant or a legal dependent residing in the home attends school full-time or if they are operative a lucrative business and require internet access to meet those work obligations.
3. The Department may consider granting payment for air conditioning repair costs if the veteran/applicant provides a doctor's statement that the applicant requires the air conditioning for health care purposes.

4. The Department will not grant any payment for re-connect charges.

E. Funeral, Burial, Grave Opening, Cremation

The Department may provide funeral, burial, grave opening, and/or cremation assistance for a veteran, spouse/surviving spouse, or dependent child(ren) as follows:

Funeral expense reimbursement	Not to exceed \$1,500.00
Cremation, including urn	Not to exceed \$1,500.00

Burial assistance must be applied for within 60 days of the date of death. Family members of a deceased veteran/eligible dependent reserve the right to pay amounts in excess of the allowable reimbursement. However, if total expenses exceed \$5,000.00, the Commission will not provide assistance.

The Department will determine eligibility based on the application for funeral, burial, grave opening, and/or cremation assistance. Allowable exclusions when verifying eligibility include the spouse's income. Funeral assistance is not payable to Veterans who qualify for funeral and burial assistance through the Department of Veterans Affairs.

F. Maintenance of Graves

The Department will provide for the maintenance of graves in accordance with Iowa Code Chapter 35B.

VIII. EMPLOYMENT

All applicants must register with Iowa Workforce Development (IWD), which makes referrals to job training agencies. Applicants must register for any and all benefits available to them, including unemployment benefits. Applicants must provide proof of completion of an appointment with IWD. Failure to comply with the requirements of this Section may result in the denial of assistance. The Department may grant an exception if the applicant can provide proof on an application in progress for VA Pension/Compensation benefits, Individual Unemployability, or Workers' Compensation.

An applicant must file an Interim Assistance Reimbursement (IAR) form with the Department if the applicant has applied for Supplemental Security Income (SSI) benefits. The Department will provide assistance for up to and not to exceed one year during the process of determining eligibility for SSI benefits. If an applicant receives a denial for SSI benefits less than one year from the application date, and files a request for reconsideration in a timely manner, the Department may continue to provide assistance for up to and not exceed the balance of that one-year period. An applicant may appeal the decision to terminate assistance at the end of the one-year period to the Benton County Veteran Affairs Commission.

IX. APPLICATION PROCESS

Applicants must provide a list of income, assets, and expenses, and review a personal budget with Department staff to determine emergency assistance eligibility. The Department may request that applicants receive budgeting assistance from an outside source and provide documentation to verify completion of a budgeting program. Department staff may refer an applicant to another program if they determine that an applicant's debt warrants outside advice and counseling, and may deny assistance if an applicant demonstrates the inability to work with an outside source for such advice and counseling.

X. CONSENT TO RELEASE OR EXCHANGE INFORMATION

The applicant or authorized representative must sign a Consent to Release or Exchange Information (See Appendix B). The Department may revoke the Release upon written request of the applicant or authorized representative.

XI. VERIFICATION OF INFORMATION

Applications must be truthful and complete, and applicants must provide verification of all information contained in an application before the Department will make a determination of eligibility. The Department may deny assistance to an applicant who provides incomplete or false information during the application process.

XII. DENIAL OF ASSISTANCE

The Director and Department staff have the right to deny anyone assistance for misconduct, misrepresentation, or if they determine that any part of the application is fraudulent. The applicant has the right to appeal a denial of assistance to the Commission in accordance with Section XIII of this document. Any fraudulent claims will result in the loss of assistance for a length of time as determined by the Director and Commission.

XIII. APPEAL PROCESS

An applicant or an applicant's authorized representative may appeal the Department's decision regarding eligibility, or the amount of assistance granted, by filing a written Notice of Appeal with the Benton County Veteran Affairs Commission. The applicant must meet with the Director prior to the Commission's review of an appeal. The Director and applicant must review the application/appeal with the Commission at the next regularly scheduled commission meeting. After the meeting, the Director or Department staff will mail a letter to the applicants' home of record informing the applicant of the decision made by the Benton County Veteran Affairs Commission. The Commission has the final determination on assistance in accordance with the Iowa Code.

XIV. CERTIFICATION

I certify that this is a true and correct copy of the *Benton County Veteran Affairs Commission General Policy and Emergency Assistance Guidelines* passed and approved by the Benton County Commission of Veteran Affairs on the 11th day of January, 2022.

BENTON COUNTY COMMISSION OF VETERAN AFFAIRS

Dale Henry, Chair

Michael Silhanek, Commissioner

Courtney Long, Commissioner

APPENDIX A

Approved January 11, 2022.

The Benton County Commission of Veteran Affairs may revise Appendix A separately from the *Benton County Veteran Affairs Commission General Policy and Emergency Assistance Guidelines*.

**Benton County Commission of Veteran Affairs
Normal Monthly Food Expenses**

Number in Household	Normal Monthly Food Expenses
1	\$200.00
2	\$400.00
3	\$650.00
4	\$750.00
5	\$850.00
6	\$950.00
*	Add \$100 for each additional minor child of the veteran living in the home.

BENTON COUNTY COMMISSION OF VETERAN AFFAIRS

Dale Henry, Chair

APPENDIX B

**CONSENT TO RELEASE OR EXCHANGE INFORMATION
Emergency Assistance**

I (we) _____ authorize communication or release of
PRINT NAME

confidential information by Benton County, or its duly appointed representatives, to any of the named individuals, institutions, businesses and/or agencies necessary for determining eligibility for assistance, for billing or reimbursement purposes.

I (we) understand that I (we) have the right to inspect the disclosed information at any time. I (we) understand that this consent will remain in force until termination of assistance from Benton County Commission of Veteran Affairs.

I (we) consent to and authorize:

Any local, state federal government agency, private businesses, firm or agency, bank, trust company, postal savings department, insurance company, other financial institution, or other applicable agencies to share information.

Investments, holdings, life insurance policies, checking/savings accounts, bonds, retirement benefits, annuities, and any other assets/resources that can be converted into cash. This includes applicant and all eligible household members.

Upon written request, I (we) understand that I (we) may revoke the CONSENT TO RELEASE AND EXCHANGE INFORMATION at any time. I (we) do hereby and forever release and discharge all of the individuals, institutions, businesses, agencies, and BENTON COUNTY IOWA, its agents and employees, from any liability for releasing information whether such information is deemed confidential or not. A photocopy of this form shall be considered as the original.

Signature of Understanding (Applies to all parties in household)

Date

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