

# **Low Income Home Energy Assistance Program (LIHEAP)**

## **Heating Vendors Billing Procedures Manual**

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### **Service Chapter 416-01**

**Department of Health and Human Services 600  
East Boulevard Dept. 325  
Bismarck, ND 58505-0250**

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## **Heating Vendor's Billing Procedures 416-01**

### **General Information (Billings) 416-01-01**

The Low Income Home Energy Assistance Program (LIHEAP) is a federally funded program which is administered by the Department of Health and Human Services (HHS) with the Human Service Zone staff providing local administration, outreach, and delivery of services.

The four Indian tribes located on North Dakota reservations each administer their own heating assistance program.

The purpose of LIHEAP is to protect the lower income household from paying an excessively high percentage of its income for heating cost.

Since poorly winterized homes and energy wastefulness cause inefficient usage of LIHEAP funds, households are given information about conservation and weatherization programs. If you have a customer whose fuel consumption seems excessive, please contact the Human Service Zone office so they can encourage the customer to have the home weatherized. Households that need weatherization services are referred to the Community Action Agencies

## **Confidentiality 416-01-05**

FUEL SUPPLIERS MUST NOT GIVE OUT NAMES OR INFORMATION ABOUT PERSONS APPLYING FOR OR RECEIVING ASSISTANCE UNDER ANY PROGRAM ADMINISTERED BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES.

In the past, some suppliers have been asked to provide a list of the names of fuel assistance customers to other persons or agencies. To do so is a violation of the law.

## **Nondiscrimination 416-01-07**

The Department of Health and Human Services (DHHS) makes available all services and assistance without regard to race, color, religion, national origin, age, sex, including gender identity and sexual orientation, disability, or status with respect to marriage or public assistance.

Persons who contract with or receive funds to provide services for DHHS must follow these laws.



## **Waste, Fraud, and Abuse 416-01-09**

If waste, fraud or abuse of the Low Income Home Energy Assistance Program (LIHEAP) is suspected, it can be reported by any of the following methods:

Email: [Info-DHS Economic Asst Policy@nd.gov](mailto:Info-DHS Economic Asst Policy@nd.gov)

Toll-free Phone: 1-800-755-2716

Fraud Hotline: 1-800-472-2622, or

Mail: LIHEAP

ND Dept of Health & Human Services

600 E Boulevard Avenue, Dept 325

Bismarck ND 58505-0250

All reports of fraud, waste, and abuse will be recorded in a fraud log. The report is reviewed by program policy administration and, if appropriate, may be referred to the human service zone eligibility worker for follow-up and required actions.

Policy and System Support (PaSS) staff and the Zone Director or Supervisor are also included in the email that is sent to the eligibility worker.

## **Application 416-01-10**

### **Who Should Apply 416-01-10-05**

1. Anyone who is responsible for buying their own heating fuel, whether they rent or own their home, should apply.
2. Renters whose rent payment includes the cost of heat should apply. Since the landlord passes through the heating costs to the rent payment, these renters are also affected by heating cost. If they receive rental assistance, however, they may not be eligible.

## **When to Apply 416-01-10-10**

Your customers must reapply every year.

Applications must be received between October 1 and May 31 for heating assistance.

## **Where to Apply 416-01-10-15**

Households who need help paying for their winter heating costs can apply online at <https://www.hhs.nd.gov/liheap> or at their local Human Service Zone office (formerly known as the county social service office).

Your customers can also obtain application forms and assistance to complete the form from Community Options staff by calling 1-800- 823-2417 or from senior services outreach workers.

If you would like to have blank applications and brochures on hand to give to your customers, call the local Human Service Zone office or the State Office (701) 328-4025.

All applications must be processed by the Human Service Zone office. Once the Human Service Zone worker has taken action on the application, the State Office is notified of who is eligible, the amount of benefits, months payments are authorized, and the authorized heating vendor. The State Office receives the bills and generates all payments.

## **Benefit Programs 416-01-15**

LIHEAP has two benefit programs, the Heating Assistance Program and the Emergency Assistance Program. Each has different eligibility requirements. See **Section 416-01-50** for an explanation of the Emergency Assistance Program.

## **Heating Assistance Program 416-01-15-05 Eligibility**

### **Requirements 416-01-15-05-05**

A household must meet income eligibility criteria in order to receive benefits under the Low Income Home Energy Assistance Program (LIHEAP). The income standards are based upon state median income (SMI) estimates that are developed by the United States Census Bureau. These levels are adjusted each year and are published by the Department of Health and Human Services on the Low Income Home Energy Assistance Program (LIHEAP) webpage at <https://www.hhs.nd.gov/liheap>.

Copies of the updated brochure are available through the State Office ([dhsliheapsys@nd.gov](mailto:dhsliheapsys@nd.gov)) or through your local Human Service Zone offices. We encourage you to obtain copies to give to your customers.

## **Benefit Amounts 416-01-15-05-10**

The amount of benefits is determined from the household's income, some household information, and the type of heat used to determine the LIHEAP share percent.

## Services Covered 416-01-15-05-15

### 1. Heating Fuel

LIHEAP heating assistance will only pay for fuel used for heating (oil, propane, natural gas, electricity, wood, coal, kerosene). We cannot pay for other utilities such as water, sewer, garbage, and telephone. Also, ineligible non-heating costs for natural gas or propane stoves, hot water heaters, or cooking UNLESS these fuel types are also used by the household for heating and the costs cannot be reasonably separated. The Heating Assistance/Notice of Action you receive from the Human Service Zone worker will identify the type of heating fuel(s) authorized for LIHEAP payments. Bills for fuels not authorized will be rejected.

LIHEAP can also pay delivery charges, propane tank rental and hook-up, replacement charges for obsolete or non-functioning regulators, and reconnect fees. (See **Section 01-40** for details regarding these costs) We do not pay any installment payments for tanks which are on a purchase contract. We do not pay deposits.

Electric Heat: Since most homes have only one meter for electricity which records and bills for general utilities and heating usage, LIHEAP will pay the established LIHEAP share percentage of the total electric bill. If the client has a heat-meter, you should still submit the entire residential metered bill, including general non-heating usage and the sub-metered heating usage. Do NOT bill non-metered charges such as yard lights or metered business usage if it is metered separately from the customer's residence.

### 2. Vendor Authorization Period

The Human Service Zone worker could reimburse the customer for bills he has paid if he provided evidence he paid the bill. However, once the heating vendor is authorized to bill, the heating vendor can submit for bills for read/delivery dates that falls within their authorized period.

For information on account credits and even monthly payments plans, see **Section 01-40-50** and **Section 01-40-55**.



- See **Section 01-30-05**, #5 for special instructions regarding electric heat.

3. Primary Residence

LIHEAP benefits are to be used only to heat the home where the customer is living. Do NOT allow a customer to convince you to bill for fuel delivered to a second home (e.g. a farm home when he lives in town during the winter). We also do not pay bills if the home has been vacated (e.g. customer goes south for the winter).

4. Stockpiling Prohibited

It is permissible to bill for larger amounts of fuel delivered to homes which normally have storage tanks due to poor roads in the winter months, as long as these storage tanks are connected to the primary residence. Do NOT bill LIHEAP for fuel delivered to storage tanks not connected to the house. Customers are not allowed to add storage tanks.

It is NOT permitted to bill LIHEAP for fuel that has not been delivered in order to build a credit on the account and use up LIHEAP benefits.

Tanks may be "topped off" at the end of the heating season (deadline is May 31) provided that the customer has either requested or authorized the fuel delivery. LIHEAP will not honor bills if the customer informs us he/she did not want the fuel or if the customer has moved prior to the delivery.

If you have doubts about something a customer is asking you to do, contact the Human Service Zone office.

## **Deadline for Deliveries 416-01-15-05-20**

All deliveries for heating fuel must be made by May 31 to be eligible for LIHEAP payment. We do NOT accept bills for fuel delivered prior to October 1.

For metered fuels (electricity, natural gas), the date the meter is read is the date which should be used as a delivery date . If the meter is read before October or after May 31, LIHEAP will NOT pay the bill.

- Do NOT attempt to pro-rate the bills.
- Do NOT make extra meter readings outside the usual reading cycle solely to bill more usage cost to LIHEAP before the customer's authorization period expires. This creates unnecessary confusion and work for you. Since we accept bills with meter reads of October 1 (some or all of the fuel supplied in September), we feel the customer does receive full opportunity to use his LIHEAP benefits. (Naturally, "out-of-cycle" meter readings are sometimes necessary when a customer changes residence, a previous reading needs correction, etc. These meter readings may be billed if the customer was eligible.)

Rural electric cooperatives and other utilities whose customers generally read their own meters may have difficulty establishing the date the meter is read. If the customer is required to report the read date, this should be used. If not, you can use the date it is received in your office. Do NOT use the billing date or the date payment is due, as this would make the delivery date one to two months later than the actual month of service.

## **Premium Payments 416-01-15-05-30**

"Premium" benefits are available from October 1 through July 31 to customers eligible for LIHEAP Heating Assistance at some point during the current fiscal year without additional eligibility requirements.

### **1. Furnace/Chimney Cleaning**

LIHEAP will pay up to \$500 toward the cost of furnace cleaning. Costs of routine parts replacement (filter, nozzle, thermocouples, etc.), labor, and travel may be included; however, any amount of the total cost that exceeds the allowable amount will be the responsibility of the customer. This should be discussed in advance with the customer.

An additional \$150 for chimney cleaning may be authorized when necessary for safety and/or efficient operation.

Any parts or labor which are related to repair cannot be billed to LIHEAP as part of furnace/chimney cleaning. The customer will be responsible for any costs of repair, which may be discovered during the routine cleaning. The customer may apply for Emergency Assistance for repair costs, if necessary. However, repair costs approved for payment under Emergency Assistance must be invoiced and billed separately from the furnace/chimney cleaning.

LIHEAP does not pay for routine furnace/chimney cleaning performed more than once per year.

LIHEAP does not pay for furnace/chimney cleaning to homes in which the heat costs are included in the cost of the rent, nor for heating units which provide heat to more than one living unit.

LIHEAP customers who wish to take advantage of this furnace/chimney cleaning service should request that an "Authorization for Furnace/Chimney Cleaning" form to sent to their choice of vendor from their Human Service Zone office. This form lists an authorization period during which the furnace/chimney cleaning should be done.

The authorization form must be completed and signed by the vendor and customer. The completed form and the vendor's invoice must be sent to the Human Service Zone office who will process the payment. You cannot directly bill the furnace/chimney cleaning on the "Request for Payment" printout used for billing fuel deliveries.

## 2. Heating Cost Reduction Services

Households who heat with electricity may be able to reduce their costs by installing devices which will qualify them for reduced electric rates, such as demand control, dual heating systems, submetering, etc.

To encourage LIHEAP customers to take advantage of these rate reduction devices, the LIHEAP State Office will accept requests for funding assistance with the installation costs.

The funding plan approved may:

- a. Provide funding from "premium" benefits;
- b. Require partial funding participation by the applicant, utility, and/or other sources; or
- c. Develop a combination of the above.

To access this benefit, the electric heating vendor and customers must jointly prepare a written proposal to be sent to the State LIHEAP Administrator. No payment of installation costs can be assumed without prior approval of the State LIHEAP Administrator. The proposal should include at a minimum the following:

- a. Customer name, address, billing number, county of residence;
- b. Vendor name, address, phone number, and contact person;
- c. Estimate of annual heating cost without the device, estimated annual dollar savings;
- d. Copy of previous 12 months actual consumption and cost;
- e. Type of cost reduction system selected and why;
- f. Total cost of installation, availability of loan or other incentive programs from the company or other agency which will participate in installation costs, amount of customer's annual installment payments;
- g. Who will own the equipment installed and be responsible for repair/maintenance; and
- h. Proposed installation date.

The State Administrator will notify the customer and vendor in writing of the action taken on the proposal.

## **Notifying the Customer 416-01-20**

### **Heating Assistance/Notice of Action 416-01-20-05**

After the Human Service Zone worker has reviewed an application and made a decision regarding eligibility and benefits, a "Notice of Action" letter is sent to the customer. If the customer is approved for LIHEAP benefits, a similar letter is also sent to the vendor the customer has designated as his heating supplier. The "Notice" letter will tell the customer (and you) the amount of LIHEAP share %, the customer co-payment % and the effective date of the LIHEAP share %. See **Section 01-40-55** of this manual regarding establishing monthly payment plans for the customer's co-payment share.

**The letter also tells you the type of heating fuel which can be billed and the months authorized for billing. All delivery dates and/or meter read dates must lie within this authorization period.**

A separate letter, "Emergency Energy Assistance/Notice of Action," is used to notify the customer when Emergency Assistance payments have been approved. The designated vendor will normally receive a copy of that notice only if the Emergency Payment is to be made to him. (See 01-20-10.)

If you have any questions about the information appearing on a Notice of Action letter, call the Human Service Zone office.

## **Emergency Energy Assistance/Notice of Action 416-01-20-10**

After the Human Service Zone worker has reviewed an application for Emergency Assistance and made a decision regarding eligibility and benefits (See **Section 01-50**), a "Notice of Action" letter is sent to the customer. If the customer is approved for emergency benefits, a similar letter will also be sent to the vendor(s) who will receive the approved emergency payment(s).

The letter will identify the type and amount of Emergency Assistance approved.

NOTE: You CANNOT bill for services or products approved under Emergency Assistance on the "Request for Payment" printout or via the vendor portal as described in **Section 01-25** of this manual. These emergency payments will be generated by the Human Service Zone office after they receive a copy of the invoice from you or the customer.

The "Comments" section of the Notice of Action will be used to further explain approved payments or conditions of payment, if any.

## **Payments/Notice of Action 416-01-20-12**

A payment notice of action will be sent to both the LIHEAP customer and the vendor who will receive payment and will identify the type of payment as Heating, Emergency, or Premium.

The notice of action will specify also specify the fuel type or service type for which payment will be issued, and the amount of the payment(s).



## **Billing Statements to the Customer 416-01-20-15**

We realize that some customers become confused about what LIHEAP will pay and what their obligation is. However, for your own protection and the customer's information, you should continue to give the customer a statement of what fuel has been delivered to his home, the total cost of the fuel, and the amount you have billed to LIHEAP.

The State LIHEAP office sends each customer an accounting of the benefits we have paid on their behalf. This is done approximately 30 days after the case is closed or the authorization period expires during the heating season or at the end of the program year. The 30-day delay in mailing this "Report of Payments" allows you time to request payment for the final eligible heating bills. Occasionally, a customer disputes that he received the fuel for which LIHEAP was billed. It is easier to resolve these conflicts if the vendor has sent the customer a statement of fuel delivered and what is being billed to LIHEAP at the time of the delivery or in a regular monthly statement.

## **Payment Procedures 416-01-25**

### **Summary of the Payment Process and Timetables 416-01-25-05**

Once the customer has been approved for Heating Assistance, the Human Service Zone worker enters the "Household Data Information" into the eligibility system. Until this takes place, no payments can be made on behalf of the customer. The benefit level, the designated vendor, the period of time that payments are authorized for direct billing from the vendor, and the type of payments authorized are included in the information entered into the computer.

A system-generated billing form, called the "Request for Payment", will be sent via mail to the designated vendor to complete and submit in order to receive payment for heating bills. The Request for Payment billing form is also available to complete and submit online through the Vendor Portal if the online registration process for access to the online Vendor Portal has been completed. (See **Section 01-30** for information on completion of this billing form).

Request for Payment billing forms that are received via mail from the vendors are sent to the data entry department for entry into the LIHEAP system. Request for Payment billing forms that are completed via the Vendor Portal are automatically submitted to the LIHEAP system.

All requests for payment are validated and approved prior to issuance.

The issuance process occurs every Tuesday night for all payment requests received from the vendor since the previous Tuesday's issuance and for any other pending payments that have been entered into the system manually by the eligibility worker. The checks for bills approved for payment are printed on Wednesday night and will generally be mailed by Friday afternoon. Holidays that occur within the issuance process timeline may delay the issuance process.

You will receive one check for all the customers whose bills were processed in the issuance cycle. It will include payments for the bill you submitted on the "Request for Payment" printout and payments for bills submitted directly by the Human Service Zone worker on behalf of the customer.

You will receive a Remittance Advice notice in the mail that includes a breakdown of the amounts to be credited to each customer and a list of payments that were rejected. You will also receive an updated "Request for Payment" printout including a new blank page for write ins. You will receive your check a few days after you receive your Remittance Advice notice and "Request for Payment".

NOTE: If the only payments included on a check are for bills submitted directly by the Human Service Zone worker, you will receive only the Remittance Advice with the check. The updated "Request for Payment" printout and the Payment Rejection List are only produced when you mail in bills on the "Request for Payment" printout. You may also download your "Request for Payment" through the vendor portal.

## **Start-Up Procedures for Previous Vendors 416-01-25-10**

Each vendor who participates with LIHEAP has been assigned a 7-digit vendor identification number. This ID number is carried over in LIHEAP system's vendor file each year unless we are notified that the business is sold or consolidated with another business.

Each fall, usually in late October, a "Request for Payment" form is mailed to every authorized vendor in the LIHEAP system. The "Request for Payment" may include a pre-printed section of current LIHEAP customers whose cases are approved for LIHEAP and who have designated you as their primary heating vendor. Four blank pages are also attached to be used for additional billings.

To begin the Payment Process:

1. Complete the Request for Payment by submitting details regarding authorized fuel that has been delivered.
2. Once the issuance process has occurred for your requests, you will receive payment via mail along with a updated Request for Payment billing form that will list the names and billing numbers of all your approved LIHEAP customers on our files as of the current date.

## **Start-Up Procedures for New Vendors 416-01-25-15**

If you have never participated with LIHEAP before, the initial "Request for Payment" printout will be sent to you when we first assign your vendor identification number. Once you send bills to us using this initial form, the process is the same as in #2 above (See **Section 01-25-10**).

## **Remittance Advice and Check 416-01-25-20**

Whether the bills are submitted by you on the "Request for Payment" printout or by the Human Service Zone worker, payment for all bills will be compiled into one check.

A Remittance Advice will arrive a few days before the check to tell you how much is being paid for each customer. Your vendor ID number and your name and address are on the top left side of the page. The list of payments for each customer is alphabetized by last name.

The Remittance Advice may be separated into four sections: Heating Payments, Premium Payments, Emergency Payments, and Energy Share Payments. Each section will have the payments listed alphabetically and will include the customer's name, billing number, customer account number, LIHEAP share percentage, delivery date or memo number (if applicable), invoice number (if available), fuel/service type, product quantity (if applicable), and the amount of the payment. If the vendor is receiving a payment for more than one delivery date for the same customer, the customer's name will appear for each delivery date.

Payment sections include vendor-billed or Human Service Zone worker generated payments, including Human Service Zone worker generated adjustments to correct prior LIHEAP paid bills. Each payment section will be subtotaled.

The total amount from each section will be combined and there will be a grand total at the bottom of the Remittance Advice. This grand total will match the amount of your check.

## **Payment Rejection List 416-01-25-25**

Included on the Remittance Advice will be a list of any bills you submitted which were rejected for payment. The Payment Rejection List is arranged in the same manner as the Remittance Advice, except the "amount of payment" will be the amount of the bill you submitted, and a message will follow telling you why it was rejected.

In all cases, if you question the message you have received, CALL THE HUMAN SERVICE ZONE OFFICE FIRST, since they will know if changes are being made in the case which might explain the rejection. They can also look in the case file to identify and/or correct wrong information which might be causing problems. They can call the State Office if further help is needed.

Following are the rejection messages that may appear in this section:

1. 'Invalid Billing #' - Billing Number is missing, incomplete, or format is incorrect.
2. 'Invalid Date - Missing, incomplete, or future date'
3. 'Fuel type is missing or invalid'
4. 'Total Bill is missing or not numeric'
5. 'Total Bill must be valid and greater than 0'
6. 'Customer Account # is missing'
7. 'Quantity must be valid and greater than 0' - Quantity of 0 or blank is allowed if fuel code is 08 or 16
8. 'Invalid Fiscal Year' - Delivery/meter read date does not fall within the current FY
9. 'Invalid Vendor ID' - Vendor ID is not recognized by system
10. 'Case Not on File'...We identify the customer's case file by billing number in the system. The billing number you submitted does not match with any billing number we have

on file. **NOTE:** The name from the "Request for Payment" printout is not keyed into the system.

This is the only Rejection Message which cannot print out the customer's name for you since we have no record in our system matching the billing number you indicated.

If the number was correct, try to resubmit the bill one more time. If you receive the same message again, contact the Human Service Zone office for assistance.

11. 'Pending case – Cannot pay' – The case is in a pending status and has not yet been approved for payment. Do not resubmit unless you receive a notice indicating that you are the authorized vendor for the case or unless the Human Service Zone office tells you that the case has been approved.
12. 'Case Not Open'...The case is not open, and the delivery/meter read date is after the closing date,
13. 'Case Closed/One Time Lump Sum
14. 'You are NOT the Authorized Vendor'...Your vendor ID number does not match up with the designated vendor ID number in the customer's computer file.

Ask the Human Service Zone worker to check for a possible error on the computer file, if you have received a "Notice of Action" telling you that you are authorized to bill.

15. "You're not authorized primary or secondary vendor. Your vendor ID number does not match up with the designated **primary or secondary** vendor ID number in the system.
16. 'Delivery Date Not Within Authorization Period'...The Human Service Zone worker tells the computer which months are approved for payment of bills. If the delivery date you submit does not fall within those approved months, it will be rejected.

Check to be sure you did not make an error on the date (a common error is using the wrong year, especially during



January) and resubmit the bill if this is the problem. If your Notice of Action from the Human Service Zone office shows that the date you submitted should be acceptable, ask the Human Service Zone office to check the computer file for errors.

17. 'Payment Made Previously for This Delivery Date'...A payment has already been made for this same delivery date. The computer will not accept another bill for this date.

DO NOT CHANGE THE DATE! If you originally received only a partial payment for the bill, or two services were provided on the same date, and you are trying to collect the balance, the State LIHEAP office can issue a supplemental check to you without changing the date. It is very important for audit purposes to use the actual date of delivery. See **Section 01-40-27** for instructions on collecting the balance of the bill.

If this is not a partial bill and you have checked your records to be sure you have not already received payment, contact the Human Service Zone office for assistance.

18. 'Type of fuel billed not authorized for payment'. . .The bill you submitted was coded for a type of fuel that was not included on the Notice of Action letter as the "authorized" fuel. Check the fuel type code you billed against the fuel authorized on the Notice. If you used an incorrect code, just resubmit the bill. If the code you used matches the fuel you delivered but does not match the fuel authorized, and you believe the fuel authorized is incorrect, contact the Human Service Zone office about the discrepancy.
19. 'No Payment, NON-RES use max reached' – The bill you submitted will not be paid because the maximum benefit amount for the case has already been paid.

## **Request for Payment Printout 416-01-25-30**

Once the payment process has begun as described in **Section 01-25-05**, you will receive a new printout each time you receive payment for bills you have submitted. Each new "Request for Payment" will give you a current list of LIHEAP customers whose cases are approved for payment and who have designated you as their primary heating vendor. Four blank pages are attached to be used for additional billings.

The names of customers whose cases have been closed will not appear on the list.

PLEASE SAVE AT LEAST ONE BLANK PAGE in case you mislay the preprinted "Request for Payment" form. You can use the blank page to write in a customer's billing number and bills to start the automatic process again.

At the top center of the printout is the name of the form and the date on which it was printed.

Your vendor name, address, and your vendor identification number will be printed in the upper left-hand corner of the form.

A list of valid fuel codes along instructions for completing the billing section are also included at the top of each page.

A list of current customers for whom you are the authorized LIHEAP vendor will be pre-printed in alphabetical order, with the billing number printed to the right of each name. If the customer account number was submitted by the Human Service Zone worker, it will be printed at the right side of the page across from the customer's name.

## **Billing Deadline 416-01-25-35**

Prior to the end of the current heating season, each vendor will receive written notification stating the deadline for submitting bills for fuel delivered during that heating season.

## **Billing Instructions 416-01-30**

Since all payments made by LIHEAP must go through a complex validation process, the bills must always be entered in the same way. For this reason, we must require that all bills be submitted on the "Request for Payment" printout. We cannot make payments from your invoices or billing statements.

Most heating vendors will be submitting all bills manually on the "Request for Payment" printout or through the vendor portal. A few large companies with compatible computer systems are now able to submit the "Request for Payment" via direct interface.

## **Billing by "Request for Payment" Printout 416-01-30-05**

If you are using the blank page, such as for start-up procedures in fall, you need to fill in the name and billing number of the customer in the lines provided at the left of the page. The name is not entered into the eligibility system and is used only as an aid in identification if we have a problem with the bill. The billing number is the "key" into the eligibility system. If the billing number is wrong or incomplete, we will not be able to find the case in order to pay the bill, or we may pay the bill from the wrong customer's account. **Please be sure you are using the correct billing number.**

NOTE: It is NOT necessary to fill in the customer's account number, on the blank page unless it has changed.

1. Delivery Date: For audit purposes, it is important that we are able to trace a payment back to the correct delivery date.
  - a. Enter the date the **fuel was delivered or the date the meter was read.**
  - b. DO NOT combine deliveries. Exception: If two deliveries were made the same day (for example, because the truck ran out of fuel and needed to go back to town to get more to fill the tank), put both deliveries on the same invoice ticket.
  - c. When you have more than two deliveries/meter reads to submit, **DO NOT** add the additional deliveries/meter reads between the lines on the paper form . We do not know which customer the bills belong to, and payments may be made out of the wrong account.

If you have more than two deliveries for the same customer, use the blank page to write in his name and billing number as many times as you need to bill additional deliveries.

- d. For metered fuels (natural gas, electricity, metered propane) use the date the meter is read.
  - e. Use eight digits in the date (MM/DD/YYYY): 01/02/2021 (If you are completing the request for payment with hand-written information, using a 'dash' (-) in the date seems to work better than the 'slash' (/), since the slash mark will sometimes be misread as a '1' during data entry of the request. When using the vendor portal make sure to use the slashes for the date.
  - f. Do NOT bill estimated readings. Although we prefer to get monthly bills, we would rather wait for a correct reading than to overpay on an estimate and have to collect a refund later when the meter is read, and actual cost is computed
2. Type of Fuel: Enter the code number of the type of fuel provided. Please note that we do not distinguish between fuel oil #1 and #2. Please use code 01 for all fuel oil.

The system will accept only those fuel codes which were authorized on the Notice of Action. Others will be rejected.

Please note that connection or reconnection charges are Fuel Code 16. Special delivery charges (for after hours' delivery) should be added into the fuel delivered cost, and the fuel code should be that of the fuel delivered. (Example: Fuel oil = 01, Propane = 03, etc.)

The types of fuel codes are listed on the "Request for Payment" printout.

3. Invoice #: Enter the invoice number of the delivery ticket, if any. If there are two invoices for the same delivery date which must be combined, use only one of the invoice numbers.

4. Quantity Delivered: This amount is required if the fuel code is 01-07. The quantity amount entered will vary based on the type of fuel. For example, coal may be in pounds or tons, fuel oil in gallons, electricity in kilowatts, or natural gas in cubic feet or dekatherms.

Please note the quantity may include a fractional amount. For example, a fuel oil delivery could be entered as 213.64.

5. Cost of Delivery: Enter the cost of the delivery.

Since the system will pay the correct LIHEAP share of any bill you submit you need to submit the entire bill to LIHEAP even if part of it has been paid by the customer.

If a customer who heats with electricity has the heat sub-metered, you should still **submit the entire residential metered bill**, including general non-heating usage and the sub-metered heating usage as long as the bill was not estimated. (See 01-30-05 Item #1-f.) Do NOT bill non-metered charges such as yard lights or metered business usage if it is metered separately from the customer's residence.

6. Cash Discount: If the fuel code is fuel oil (01) or propane (03), indicate if the customer was given the cash discount price on the delivery by placing (y) in the Cash Discount column.
7. Signature: Be sure to sign and date the form. Since this is your certification that the bills you are submitting are accurate, unsigned forms will be returned to you for completion.
8. Copy: Make a copy is for your records. Please send ONLY the ORIGINAL copy to LIHEAP.
9. Mailing Address: Our mailing address is on the form on the left side at the bottom of the list of names.

10. When to Bill: You do NOT have to hold the billing form until all the customers have a bill to enter. Many vendors choose a specific time once or twice a month to submit accumulated bills. We encourage billing at least once per month or more often if your accounting system can do so.



## **Billing by Web File Transfer (Direct Interface) 416-01-30-10**

Billing by direct interface is currently used only by large public utilities as this method of billing requires extensive programming by vendor in order to submit a flat file in this manner.

The vendor's billing system compiles the billing information for all the divisions in your company and automatically places a flat file in a secure web location where the LIHEAP system can retrieve and process the information. The information we receive is the same as if you had sent it manually on the "Request for payment" printout for your customers. You will receive your check, a Remittance Advice with rejections, and an updated "Request for Payment" printout for your customers.

If your system does not accommodate picking up back bills on fuel assistance customers, you will need to manually submit them on the "Request for Payment" printout.

## **Billing Problems 416-01-40**

This section will explain how to solve special billing problems.

## **Finance Charges 416-01-40-05**

Once LIHEAP payments have begun and payment on the account is assured, there should be few occasions when interest charges are assessed on LIHEAP accounts, since the turnaround time during the busiest part of our year is 5-15 days between the date we receive a bill, and the date payment is mailed. **LIHEAP DOES NOT PAY INTEREST CHARGES.**

## **Delivery Charges 416-01-40-10**

Special delivery charges (after-hours delivery, hook up, etc.) may be billed to LIHEAP if you normally charge extra for these services. If you would not normally charge extra to other customers, you should not bill LIHEAP either.

Since these charges will normally accrue at the same time a fuel delivery is made, they can be combined with the amount of fuel and billed together.

LIHEAP would not consider a local hook up/delivery when all heating equipment is already in place, to be an "after-hours" service if the hook-up/delivery was ordered by 4:30 p.m. on a regular business day.

## **Propane Tank Rental/Hook-up 416-01-40-15**

Installment payments on a purchase contract may NOT be billed to LIHEAP.

Tank rental and set-up/hook-up charges associated with a household's primary heat source may be billed to LIHEAP if incurred during the regular heating season (October 1 - May 31). If these charges take place on the same day as fuel is delivered, the tank rent and/or hook-up charges are billed separately using fuel code 08 for tank rent and fuel code 16 for hook-up charges along with the invoice numbers.

Tank rental and set-up/hook-up charges incurred after May 31 cannot be billed to LIHEAP. Assistance with these costs outside of the regular heating season must be handled through emergency assistance.

LIHEAP will **NOT** pay for tank rental and hook-up charges associated with a household's secondary heat source.

## **Regulators 416-01-40-17**

Nearly all regulators are the client's property, therefore, the replacement charges for obsolete or non-functioning regulators, along with the miscellaneous costs needed for the hook-up of the regulator may be billed to LIHEAP. Use fuel code "16" to bill for these charges.

These charges can be billed to LIHEAP anytime during the year, however, if the charges are assessed outside of the regular heating season, the bill for the charges should be submitted to the Human Service Zone office for payment.

## **Wireless Monitors 416-01-40-18**

Wireless monitors associated with a household's primary heat source may be billed to LIHEAP if incurred during the regular heating season (October 1 - May 31). Use fuel type 08 to bill for these charges.

Wireless monitor charges incurred after May 31 **cannot** be billed to LIHEAP. Assistance with these costs outside of the regular heating season must be handled through emergency assistance.

LIHEAP will **NOT** pay for wireless monitor charges associated with a household's secondary heat source.

## **Reconnect Fees 416-01-40-20**

Non-refundable fees for reconnect services may be billed to LIHEAP.

Enter the date of reconnection as the delivery date. The "type of fuel" code should be 16.



## **Deposits 416-01-40-25**

LIHEAP does not pay for deposits because they are usually refundable after good credit is established.

## **Duplicate Delivery Dates - Special Handling Required 416-01-40-27**

A payment request can be made to correct an underpayment to a vendor for a previously billed delivery that has been paid by LIHEAP.

To correct the underpayment, DO NOT submit a bill for the balance owed or change the delivery date. The Human Service Zone office can request special handling so the correct balance owed can be issued to you. Contact the Human Service Zone office with the following information:

1. Copy of the invoice along with all of the billing information required for payment processing;
2. Name and billing number of customer;
3. Name of vendor to be paid. Include the LIHEAP Vendor ID number if you know it;
4. Brief explanation of the circumstances of the bill.

## **Duplicate Delivery Dates - Direct Billing 416-01-40-29**

If the payment request is for tank rental, set-up/hook-up, wireless monitor charges, or reconnect services that have the same delivery date as a fuel delivery being processed or already paid, the service delivery date can be entered with the appropriate fuel code, invoice number (if any), and total bill. The vendor can submit the duplicate date request for these services on the "Request for Payment" form.

If the payment request is for a second meter reading or two fuel deliveries made on the same day, there must be an invoice number for each delivery. The vendor should enter each delivery separately on the "Request for Payment" form. The same delivery date should be used for each entry along with the fuel code, invoice number, product amount and total bill.

The LIHEAP system will recognize that these requests are for separate payments by the unique invoice numbers.

## **LIHEAP Benefit Changes 416-01-40-32**

LIHEAP in North Dakota does adjust the annual LIHEAP benefit when there are significant changes to the customer's circumstances, such as the type of heating fuel or size of the living unit. This allows us to be as accountable as possible to current needs. However, when the changes require a decrease in benefits, problems can result.

(Customers are not required to refund benefits received before the change in their circumstances took place as long as changes are reported promptly.)

To minimize adverse effects, LIHEAP provides a 5-day advance notice of a change to the LIHEAP benefit level unless the family has moved. In that case, a reasonable effort will be made to negotiate a fair payment and closing date.

Furthermore, changes to the LIHEAP share percentage are retained in our computer history along with an effective date of the change. The computer will be able to pay a bill using the correct LIHEAP share percentage in effect when the fuel was delivered.

## **Lost Billings Forms 416-01-40-35**

If you lose the printed "Request for Payment" form, you may use a blank form and write in the billing numbers, names and bills of those customers who have bills. When you receive payment on these bills, you will receive a new printed form.

If you do not have a blank "Request for Payment" to use, contact the State LIHEAP office at (701) 328-4025 or [dhsliheapsys@nd.gov](mailto:dhsliheapsys@nd.gov) to request that a new printout be sent to you. A new form will be requested from the next scheduled check run. You may also log into the vendor portal and download a new "Request for Payment" form.

## **Lost Checks 416-01-40-40**

If you have misplaced a LIHEAP check or if it was omitted from the envelope containing your new printout, Remittance Advice, etc., please contact the State LIHEAP office immediately. If the original check has not been cancelled, the State Treasurer will send you an affidavit to sign certifying that you did not receive it and a stop payment will be requested for the original check. Once the affidavit has been returned, the State Treasurer will issue a replacement check to you. If the original check turns up during the process, DO NOT ATTEMPT TO CASH IT. Contact the State Office at 701-328- 4025 for instructions.

The entire process may take up to a month, so it is best to report a missing check promptly.

## **Address/Business Changes 416-01-40-45**

An address correction form is included in this manual. Please let us know if the address we are using is not correct.

If you have more than one station which we have been treating as separate businesses and it would be easier for you to have all your LIHEAP customers appear under one vendor ID number on one "Request for Payment" printout, please use the form provided to notify us that you would like the vendor ID numbers consolidated.

If your customers presently appear on one printout and you prefer to have them separated for each substation, we can also assign a vendor ID number for each station.

## **Overpayments and Refunds 416-01-40-50**

Occasionally, you may receive an overpayment on an account due to your error or ours. These overpayments must always be refunded to LIHEAP. Please include the customer's billing number, the delivery date of the erroneous payment, and the circumstances causing the overpayment. Refund checks should be made payable to: **Department of Health and Human Services**.

The refund along with any corresponding documentation are to be sent to either the local Human Service Zone office or directly to the state office at the following address:

Energy Assistance Program Dept.  
of Health and Human Services  
600 E Boulevard Avenue Dept 325  
Bismarck ND 58505-0250

If the customer has another unpaid bill, do NOT simply apply the amount of the overpayment from one bill to the unpaid balance of another delivery. Please contact the State LIHEAP Office. We may be able to adjust the customer's account to avoid the inconvenience of refunding the overpayment and billing the new delivery. However, we need to know about the overpayment so the customer file can be corrected.

Sometimes the customer sends a payment for a delivery at the same time you receive a payment from LIHEAP. You should:

1. Contact the customer to see if he wants his payment to remain on the account as a credit, refunded to him, or possibly applied to other bills not eligible for LIHEAP payment; and



2. Contact the State LIHEAP office regarding the overpayment and the customer's preference, since we may know of other circumstances in the case which would require a refund to LIHEAP instead (these would be unusual situations).

### **LIHEAP/Fiscal Refund Process**

The original date of the payment will determine which fiscal year is being refunded.

#### **Re-obligation of LIHEAP Refunds**

- **Current Fiscal Year Obligations:** If the original obligation occurred in the current Federal Fiscal Year (FFY), the refunded funds can be re-obligated for LIHEAP.
- **Prior Year's Unutilized Funds:** If the maximum amount from the prior year was not carried over, refunds can be re-obligated for LIHEAP use.

#### **Documentation & Reporting**

- A revised SF-425 will be prepared and submitted by the ND Fiscal Department. Necessary revisions to the Carry Over report will be managed by the ND LIHEAP Program Administrator.

#### **Return of LIHEAP Refunds to the Federal HHS:**

- **Maximum Carry Over from Prior Year:** If the maximum amount was carried over from the prior year, The ND Department of Health and Human Services will return refunds to the Federal Department of Health and Human Services (HHS). This responsibility falls under the ND Fiscal Department.
- **Expired Obligation Periods:** Refunds stemming from expired obligation periods must be returned to the Federal Department of Health and Human Services. The ND Fiscal Department will manage the procedure for this, including the completion of a revised 425 Report and Carryover Report through coordination between the ND Fiscal Department and the ND LIHEAP Program Administrator

## **Unused Fuel Credits 416-01-40-50-05**

If the customer dies or moves or the case is closed (for non-fraudulent reasons), any unused fuel is the property of the client and can be disposed of as the client see fit.

## **Monthly Payment Plans 416-01-40-55**

We encourage our customers to take advantage of average monthly billing plans whenever they are available. However, even this amount may be too much to handle if it is computed strictly as an average of the annual consumption, since it does not take into consideration the amount of LIHEAP benefits. Many LIHEAP customers drop the average monthly payment plan when they receive LIHEAP, and consequently, they fall behind on their co-payment of the cost we don't cover.

Therefore, to keep customers budgeting year around for their energy needs we strongly encourage you to consider modifying your average monthly payment plan to factor in the LIHEAP benefit. LIHEAP pays from the actual read/delivery not from the payment plan.

We recognize that it is very difficult to convince customers to use plans which will put credit on your books. If your company is able to offer incentives such as paying a small amount of interest on account credits or assuring them that excess credits will be refunded if the estimated annual consumption turns out to be too high, perhaps LIHEAP customers can be persuaded to try such a plan. In some cases, customers who frequently apply for Emergency Assistance because they did not budget for their share of energy costs, may be required to arrange such a plan with you as a condition of Emergency Assistance approval.

Since LIHEAP does not pay all of any bill and the customer always has at least a small share to pay, your monthly payment plans may help spread out the customer's cost into more manageable amounts.

If you decide to try this plan, please notify the Human Service Zone office(s) in your service area with the details of your particular payment plan. The Human Service Zone staff can help you encourage your customers to participate in a monthly payment plan.

## **Emergency Assistance Program 416-01-50**

### **Application Deadline - Emergency Assistance 416-01-50-05**

Applications for Emergency Assistance are taken from October 1 through September 30 of each fiscal year.

Eligibility for Emergency Assistance is not automatic. The decision to recommend approval or denial of an Emergency Assistance application is made by the Human Service Zone worker.

## **Eligibility - Emergency Assistance 416-01-50-10**

Eligibility for Emergency Assistance is much stricter than it is for Heating Assistance. Usually, Emergency Assistance is considered a last resource that will only be used after the household's personal resources are nearly depleted, other community resources are not available, and household net income will be consumed by basic shelter, utilities, employment, food, medical and other essential costs.

In addition, the Human Service Zone worker may consider:

1. What portion of any anticipated income can reasonably be committed by the customer to his energy needs?
2. The customer's effort and ability to pay these costs at the time they were incurred.
3. The customer's effort to negotiate and honor a reasonable payment plan with the supplier.
4. The energy supplier's collection efforts, cooperation in extending credit, and offering reasonable payment plans.
5. A reasonable expectation that such payment will alleviate the household's payment problem. The purpose of Emergency Assistance is to ensure uninterrupted service. Therefore, if the amount of the LIHEAP payment will not avert shut-off, Emergency Assistance will not be used solely to reduce the customer's debt, and the emergency application will be denied.

Although a customer may be found eligible for Emergency Assistance after a service has been provided, LIHEAP payment cannot be guaranteed unless the customer has prior authorization.

## **Services Covered - Emergency Assistance 416-01-50-15**

### Supplemental Fuel

The Cost/Consumption Tables LIHEAP uses to calculate heating assistance benefits may not reflect heating costs accurately for a customer who has a large or poorly insulated home. If the customer is eligible for emergency services, additional heating benefits may be approved.

### Minor Repairs or Consumer Goods

Occasionally, a heating plant will require minor repairs which can be covered by Emergency Assistance. If the heating plant is temporarily inoperable, Emergency Assistance can be used to provide temporary shelter or to rent space heaters until the furnace is repaired.

### Utilities

Non-heating electrical utilities will NOT be paid by LIHEAP Emergency Assistance unless the household also uses electricity for primary heating. Energy Share of North Dakota has assumed responsibility for electric utility emergencies when electricity is not used for primary heating.

### Deposits

#### **Deposits CANNOT be paid by LIHEAP.**

Deposits do not reflect an actual consumption of energy. If a customer will be receiving LIHEAP benefits for upcoming bills, you and the customer will need to arrange for the customer to pay the required deposit himself, on an installment basis if necessary, during the time period that LIHEAP is paying his energy bills. The amount of the installments can be set so the deposit is on record by

the time LIHEAP benefits are exhausted. This keeps the customer involved.

A referral to the Human Service Zone office may be helpful, if you and your customer are unable to reach a realistic payment plan.

Although LIHEAP cannot pay deposits, the Human Service Zone staff may know of other Emergency Assistance or other community financial or counseling resources which will help the customer meet his budget and allow for payments on the deposit.

## **Amount of Emergency Benefits 416-01-50-20**

The amount of emergency benefits is very individualized depending upon the type of service needed and how much money the customer is able to pay himself. The Human Service Zone offices are limited in the amount of emergency expenditures they can authorize. If more benefits are needed to resolve the emergency, the Human Service Zone office must submit a recommendation to the State LIHEAP Administrator for approval.



## **Arrearages 416-01-50-25**

LIHEAP defines "arrearages" as unpaid home energy costs incurred (date of delivery or date meter is read) more than 90 days prior to the date of request for Emergency Assistance.

LIHEAP will NOT pay for arrearages as defined above. The customer and vendor must negotiate a reasonable deferred monthly payment plan for the arrearages. If the customer is eligible for Emergency Assistance and unable to pay one or more of his deferred payments, LIHEAP Emergency funds may be used to assist the customer in paying part or all of his deferred payment until he is able to resume payments himself.

With the customer's permission, the Human Service Zone worker may assist the customer and vendor to arrive at a feasible payment plan based on information included in the customer's LIHEAP Emergency Assistance file.

## **Summary of Uncovered Costs 416-01-50-30**

Services NOT covered by LIHEAP Emergency Assistance include, but are not limited to:

1. Deposits;
2. Utility costs for water, sewer, garbage, telephone, security lights, business utility costs;
3. Also ineligible are non-heating costs for electricity, natural gas, or propane for lighting, stoves, hot water heating, etc. when these fuels are not also used by the household for heating;
4. Arrearages;
5. Costs incurred by persons who are not a member of the customer's household;
6. Costs incurred at a previous residence;
7. Any costs which if paid by LIHEAP will not maintain or restore energy to the household.

## **Emergency Assistance Payments 416-01-50-35**

Bills for approved emergency benefits must be sent to the Human Service Zone office for computer entry.

You cannot send these bills directly to the state LIHEAP office.

## Forms Appendix 416-01-60

### Pre-printed "Request for Payment" Billing Form (Sample) 416-01-60-01

Low Income Home Energy Assistance Program (LIHEAP) – Request for Payment  
Active Client List as of 10/18/2022

| Vendor Details  |           | Type of Fuel Codes  |           |         | Instructions   |            |           |                 |
|---|-----------|---|-----------|---------|--|------------|-----------|-----------------|
| <b>MDU CREDIT<br/>CENTER-BISMARCK<br/>400 N 4TH ST<br/>BISMARCK, ND 58501</b><br><br>Vendor ID: 0100064 |           | 01 - Fuel Oil<br>02 - Natural Gas<br>03 - Propane<br>04 - Electricity<br>05 - Wood<br>06 - Coal<br>07 - Other Fuel<br>08 - Tank Rental<br>16 - Setup / Hookup Costs |           |         | 1. Bill only for unpaid fuel.<br>2. (Utility CO) Use Meter Read Date as Date of Delivery<br>3. Enter the Fuel Code for type of fuel delivered - one type only.<br>4. You may bill up to 2 deliveries per customer. |            |           |                 |
| Customer Name   | Billing # | Delivery/ Meter-Read Date MM/DD/YYYY  | Fuel Code | Invoice | Quantity Delivered   | Total Bill | Cash Disc | Customer Acct # |
| Doe, John   | 987987987 |   |           |         |  |            |           | 1234            |
|   |           |   |           |         |  |            |           |                 |
| Doe, John   | 987987987 |   |           |         |  |            |           | 1234            |
|   |           |   |           |         |  |            |           |                 |
|   |           |   |           |         |  |            |           |                 |
|   |           |   |           |         |  |            |           |                 |
|   |           |   |           |         |  |            |           |                 |
|   |           |   |           |         |  |            |           |                 |
|   |           |   |           |         |  |            |           |                 |
|   |           |   |           |         |  |            |           |                 |
|   |           |   |           |         |  |            |           |                 |
|   |           |   |           |         |  |            |           |                 |

**Mail completed Request for Payment To:**  
 Low Income Home Energy Assistance Program (LIHEAP),  
 Dept. of Human Services,  
 600 E. Boulevard Ave., Dept. 325  
 Bismarck, ND 58505-0250

Please make a copy for your records.

See Section 416-01-40-50 of the LIHEAP Vendors Billing Procedures Manual for the process regarding overpayment and refunds. To request a copy of the Billing Procedures Manual email dhsliheapsys@nd.gov or call 701-328-2332.

I certify that:

- 1) I have delivered the fuel described above.
- 2) The customer will only be charged the difference between the payments received from the state and the actual cost of fuel delivered.
- 3) I will not discriminate or treat LIHEAP customers adversely in any way.
- 4) I will cooperate in reviews of LIHEAP payments and refund overpayments to the state.

I understand that providing false information may result in a fine or imprisonment or both.

**\*Notice: Payments will not be issued without your signature.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Vend #: 0100064

Page

Document # :



## Remittance Advice (Sample) 416-01-60-05

Fiscal Year: 2021  
 Vendor ID: 0100064

### Low Income Home Energy Assistance Program (LIHEAP) - Remittance Advice

The enclosed LIHEAP payment is made on behalf of the customers listed below.

| Heating Payments       |                             |                |                              |             |         |                  |          |          |
|------------------------|-----------------------------|----------------|------------------------------|-------------|---------|------------------|----------|----------|
| Billing #              | Customer Name/<br>Account # | LIHEAP Share % | Delivery/<br>Meter Read Date | Memo Number | Invoice | Fuel Type        | Quantity | Amount   |
| 678678678              | Doe, John<br>67TTRU8878     | 60%            | 10/10/2020                   |             | TYU7776 | 04 - Electricity | 20.00    | \$200.00 |
| 678673478              | Smith, John<br>67T45U8878   | 70%            | 10/12/2020                   | AC100089    |         | 04 - Electricity | 10.00    | \$100.00 |
| Total Heating Payments |                             |                |                              |             |         |                  |          | \$300.00 |

| Emergency Payments       |                             |                              |             |         |                          |          |          |
|--------------------------|-----------------------------|------------------------------|-------------|---------|--------------------------|----------|----------|
| Billing #                | Customer Name/<br>Account # | Delivery/<br>Meter Read Date | Memo Number | Invoice | Fuel/Service Type        | Quantity | Amount   |
| 923446712                | Smith, Jack<br>67T45U8878   | 10/23/2020                   | AS1000123   |         | 13 - Furnace Replacement | 1.00     | \$200.00 |
| 678574453                | Rose, Elizabeth<br>UNKNOWN  | 10/23/2020                   | AS1000124   |         | 13 - Furnace Replacement | 1.00     | \$300.00 |
| Total Emergency Payments |                             |                              |             |         |                          |          | \$500.00 |

| Premium Payments       |                             |              |             |         |                       |          |          |
|------------------------|-----------------------------|--------------|-------------|---------|-----------------------|----------|----------|
| Billing #              | Customer Name/<br>Account # | Service Date | Memo Number | Invoice | Service Type          | Quantity | Amount   |
| 923446712              | Smith, Jack<br>67T45U8878   | 11/10/2020   |             |         | 24 - Furnace Cleaning | 1.00     | \$300.00 |
| Total Premium Payments |                             |              |             |         |                       |          | \$300.00 |

| Energy Share Payments       |                             |                              |             |          |
|-----------------------------|-----------------------------|------------------------------|-------------|----------|
| Billing #                   | Customer Name/<br>Account # | Delivery/<br>Meter Read Date | Memo Number | Amount   |
| 923446712                   | Smith, Jack<br>67T45U8878   | 11/10/2020                   | ES100098    | \$200.00 |
| Total Energy Share Payments |                             |                              |             | \$200.00 |

Grand Total      \$1300.00

You should receive a payment for the Grand Total indicated above within 3 to 5 business days after you receive this Remittance Advice. Payment will be made by check.

If you have any questions, please contact the Human Service Zone Office.

## Bill Rejection Notice (Sample) 416-01-60-07

The following list of bills submitted on your request(s) for payment were not paid. The reason is given in the table below. If you feel this is an error, call the local County Social Service Office.

| Payments Rejected |                              |                                 |         |              |          |          |   |
|-------------------|------------------------------|---------------------------------|---------|--------------|----------|----------|---|
| Billing #         | Customer Name/<br>Account #  | Delivery/<br>Meter Read<br>Date | Invoice | Fuel<br>Type | Quantity | Amount   | Rejection Reason(s)   |
| 678574453         | Rose<br>Elizabeth<br>UNKNOWN |                                 |         | 100          |          | \$500.00 | Invalid Billing #; Invalid Date – Missing, incomplete, or future date; Quantity must be greater than 0; Invalid Fiscal Year |

If you have any questions, please contact the County Social Service Office.

## Notice of Approval to "Authorized" Supplier (Sample) 416-01-60-09



Contact: Tammy S.  
Lake Region District Health  
524 4th Ave NE #9  
Devils Lake ND 58301

Office Contact: (701) 662-7035  
(701) 328-2359 Fax  
(800) 472-2622 Toll-Free

[barcode]  
Montana Dakota Utilities  
Address Line 1  
Bismarck ND 58503

Date: 08/22/2019

Fiscal Year: 2021  
Vendor ID: 100060

### Low Income Home Energy Assistance Program (LIHEAP) - Vendor Notice of Action

The following household's LIHEAP has been Approved.

| Customer Name and Address   | Name on Account and Account #          | Billing # | Fuel Type   | Vendor Authorization Period* |            | LIHEAP Share % | Household Share % |
|---|--|-----------|-------------|------------------------------|------------|----------------|-------------------|
|   |  |           |             | From                         | Through    |                |                   |
| John Doe<br>600 East Boulevard<br>Avenue, Dept. 325<br>Bismarck, N.D.<br>58505-0250 | John Doe<br><br>Account# 234213HJ<br>K | 1566716   | Electricity | 10/01/2020                   | 05/31/2021 | 70%            | 30%               |

\*Vendor Authorization Period refers to the dates the authorized fuel is delivered, or the meter is read.

#### Explanation

LIHEAP will pay the share percentage(s) (mentioned in 'LIHEAP Share %' column of the above table) of approved heating bills for fuel delivered during the authorization period(s) mentioned above.

Your customer will be responsible to pay the remaining portion of the heating bill mentioned in 'Household Share %' column of the above table.

|                 |                                |
|-----------------|--------------------------------|
|                 | <b>A Note from Your Worker</b> |
| Worker Comments |                                |

If you have any questions, please contact the local County Social Service Office.



## Notice of Approval to "Secondary" Supplier (Sample) 416-01-60-11



Contact: Tammy S.  
Lake Region District Health  
524 4th Ave NE #9  
Devils Lake ND 58301

Office Contact: (701) 662-7035  
(701) 328-2359 Fax  
(800) 472-2622 Toll-Free

[barcode]  
Montana Dakota Utilities  
Address Line 1  
Bismarck ND 58503

Date: 09/22/2019

Fiscal Year: 2021  
Vendor ID: 100060

### Low Income Home Energy Assistance Program (LIHEAP) - Vendor Notice of Action

The following household's LIHEAP has been Approved.

| Customer Name and Address   | Name on Account and Account # | Billing #   | Fuel Type   | Vendor Authorization Period* |            | LIHEAP Share % | Household Share % |
|---|-------------------------------|-------------|-------------|------------------------------|------------|----------------|-------------------|
|   |                               |             |             | From                         | Through    |                |                   |
| John Doe<br>600 East<br>Boulevard<br>Avenue, Dept.<br>325<br>Bismarck,<br>N.D. 58505-0250 | Account#<br>234213HJK         | 156671<br>6 | Electricity | 10/01/2020                   | 05/31/2021 | 70%            | 30%               |

\*Vendor Authorization Period refers to the dates the authorized fuel is delivered, or the meter is read.

#### Explanation

LIHEAP will pay the share percentage(s) (mentioned in 'LIHEAP Share %' column of the above table) of approved heating bills for fuel delivered during the authorization period(s) mentioned above.

Your customer will be responsible to pay the remaining portion of the heating bill mentioned in 'Household Share %' column of the above table.

You are a "secondary" supplier. All bills must be submitted to the local County Social Service Office for payment. Do not send bills directly to the state office. Prior approval is advised as the bills of the "primary" supplier are given priority.

**Exception:** For secondary electric heat that is **NOT** sub-metered, the above percentage will be applied to **ONE-HALF** of the total bill.

## Change Notice to Authorized Supplier (Sample) 416-01-60-13

### Sample One:



Contact: Tammy S.  
 Lake Region District Health  
 524 4th Ave NE #9  
 Devils Lake ND 58301

Office Contact: (701) 662-7035  
 (701) 328-2359 Fax  
 (800) 472-2622 Toll-Free

[barcode]  
 Montana Dakota Utilities  
 Address Line 1  
 Bismarck ND 58503

Date: 08/22/2019

Fiscal Year: 2021  
 Vendor ID: 100060

## Low Income Home Energy Assistance Program (LIHEAP) - Vendor Notice of Action

The following household's LIHEAP has been Changed.

| Customer Name and Address  | Name on Account and Account #      | Billing # | Fuel Type | Vendor Authorization Period* |            | LIHEAP Share % | Household Share % |
|--|------------------------------------|-----------|-----------|------------------------------|------------|----------------|-------------------|
|  |                                    |           |           | From                         | Through    |                |                   |
| John Doe<br>600 East Boulevard<br>Avenue, Dept. 325<br>Bismarck, N.D. 58505-0250 | John Doe<br><br>Account# 234213HJK | 1566716   | Fuel Oil  | 12/01/2020                   | 05/31/2021 | 90%            | 10%               |

\*Vendor Authorization Period refers to the dates the authorized fuel is delivered, or the meter is read.

#### Explanation

LIHEAP will **Increase** the payment for fuel delivered during the authorization period(s) mentioned above. LIHEAP will pay the percentage(s) mentioned in the 'LIHEAP Share %' column of the above table for approved heating bills.

Your customer will be responsible to pay the **remaining portion** of the heating bill mentioned in 'Household Share %' column of the above table.

|                                |
|--------------------------------|
| <b>A Note from Your Worker</b> |
| Worker Comments                |

**LIHEAP HEATING VENDOR'S BILLING PROCEDURES MANUAL**

Division 10 Service 416  
Program 416 Chapter 01

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**Sample Two:**



Contact: Tammy S.  
Lake Region District Health  
524 4th Ave NE #9  
Devils Lake ND 58301

Office Contact: (701) 662-7035  
(701) 328-2359 Fax  
(800) 472-2622 Toll-Free

[barcode]  
Montana Dakota Utilities  
Address Line 1  
Bismarck ND 58503

Date: 08/22/2019

Fiscal Year: 2021  
Vendor ID: 100060

**Low Income Home Energy Assistance Program  
(LIHEAP) - Vendor Notice of Action**

The following household's LIHEAP has been Changed.

| Customer Name and Address  | Name on Account and Account #      | Billing #   | Fuel Type | Vendor Authorization Period* |            | LIHEAP Share % | Household Share % |
|--|------------------------------------|-------------|-----------|------------------------------|------------|----------------|-------------------|
|  |                                    |             |           | From                         | Through    |                |                   |
| John Doe<br>600 East Boulevard<br>Avenue, Dept. 325<br>Bismarck, N.D. 58505-0250 | John Doe<br><br>Account# 234213HJK | 156671<br>6 | Fuel Oil  | 10/01/2020                   | 12/31/2020 | 70%            | 30%               |
| John Doe<br>600 East Boulevard<br>Avenue, Dept. 325<br>Bismarck, N.D. 58505-0250 | John Doe<br><br>Account# 234213HJK | 156671<br>6 | Fuel Oil  | 01/01/2020                   | 01/31/2021 | 90%            | 10%               |
| John Doe<br>560 East Boulevard<br>Avenue, Dept. 325<br>Bismarck, N.D. 58505-0250 | John Doe<br><br>Account# 234213HJK | 156671<br>6 | Fuel Oil  | 02/01/2020                   | 05/31/2021 | 90%            | 10%               |


\*Vendor Authorization Period refers to the dates the authorized fuel is delivered, or the meter is read.

Explanation

## Continued...

LIHEAP will **Continue** the payment for fuel delivered during the authorization period(s) mentioned above. LIHEAP will pay the percentage(s) mentioned in the 'LIHEAP Share %' column of the above table for approved heating bills.

Your customer will be responsible to pay the **remaining portion** of the heating bill mentioned in 'Household Share %' column of the above table.

|   |                                |
|---|--------------------------------|
|  | <b>A Note from Your Worker</b> |
| Worker Comments   |                                |
|   |                                |

If you have any questions, please contact the local County Social Service Office.

## Notice that Customer has Changed Supplier (Sample)

### 416-01-60-15



Contact: Tammy S.  
Lake Region District Health  
524 4th Ave NE #9  
Devils Lake ND 58301

Office Contact: (701) 662-7035  
(701) 328-2359 Fax  
(800) 472-2622 Toll-Free

[barcode]  
Montana Dakota Utilities  
Address Line 1  
Bismarck ND 58503

Date: 08/22/2019

Fiscal Year: 2021  
Vendor ID: 100060

## Low Income Home Energy Assistance Program (LIHEAP) - Vendor Notice of Action

The following household's LIHEAP has been Changed.

| Customer Name and Address   | Name on Account and Account #          | Billing #   | Fuel Type   | Vendor Authorization Period* |            | LIHEAP Share % | Household Share % |
|---|--|-------------|-------------|------------------------------|------------|----------------|-------------------|
|   |  |             |             | From                         | Through    |                |                   |
| John Doe<br>600 East Boulevard<br>Avenue, Dept. 325<br>Bismarck, N.D.<br>58505-0250 | John Doe<br><br>Account# 234213HJ<br>K | 156671<br>6 | Electricity | 10/01/2020                   | 03/31/2021 | 70%            | 30%               |

\*Vendor Authorization Period refers to the dates the authorized fuel is delivered, or the meter is read.

#### Explanation

The above customer has requested that his/her authorized vendor be changed. Effective **04/01/2021** you will not be authorized to bill LIHEAP for this customer.

LIHEAP will **Continue** the payment for fuel delivered during the authorization period(s) mentioned above. LIHEAP will pay the percentage(s) mentioned in the 'LIHEAP Share %' column of the above table for approved heating bills.

Your customer will be responsible to pay the **remaining portion** of the heating bill mentioned in 'Household Share %' column of the above table.

This client is subject to a maximum benefit of **\$4153.00**, because the client's bill includes usage for purposes besides heating the Home. When we have paid that maximum amount, the case will be closed.  
(Other vendors may submit bills that contribute toward the maximum).

## Notice that Customer's Case has been Closed (Sample) 416-01-60-17



Contact: Tammy S.  
Lake Region District Health  
524 4th Ave NE #9  
Devils Lake ND 58301

Office Contact: (701) 662-7035  
(701) 328-2359 Fax  
(800) 472-2622 Toll-Free

[barcode]  
Montana Dakota Utilities  
Address Line 1  
Bismarck ND 58503

Date: 08/22/2019

Fiscal Year: 2021  
Vendor ID: 100060

## Low Income Home Energy Assistance Program (LIHEAP) - Vendor Notice of Action


The following household's LIHEAP has been Closed.

| Customer Name and Address  | Name on Account and Account #          | Billing # | Fuel Type   | Vendor Authorization Period* |            | LIHEAP Share % | Household Share % |
|--|--|-----------|-------------|------------------------------|------------|----------------|-------------------|
|  |  |           |             | From                         | Through    |                |                   |
| John Doe<br>600 East Boulevard<br>Avenue, Dept. 325<br>Bismarck, N.D. 58505-0250 | John Doe<br><br>Account# 234213HJ<br>K | 1566716   | Electricity | 10/01/2020                   | 03/31/2021 | 70%            | 30%               |

\*Vendor Authorization Period refers to the dates the authorized fuel is delivered, or the meter is read.

### Explanation

The above customer's LIHEAP assistance has been Closed effective 04/01/201. Bills for fuel delivered before the closing date will be paid.

|  |
|--|
|  <b>A Note from Your Worker</b> |
| Worker Comments  |

If you have any questions, please contact the local County Social Service Office.

# Notice of Vendor Payments (Sample) 416-01-60-19



Contact: Tammy S.  
Lake Region District Health  
524 4th Ave NE #9  
Devils Lake ND 58301

Office Contact: (701) 662-7035  
(701) 328-2359 Fax

[Barcode]  
<Vendor Name>  
<Vendor Address>

Date: 02/22/2015  
  
Fiscal Year: <Fiscal Year>  
Vendor ID: <Vendor Id>



## Low Income Home Energy Assistance Program (LIHEAP) - Vendor Payment(s)

| Customer Name and Address             | Billing # | Customer Account # |
|---------------------------------------|-----------|--------------------|
| <Customer Name><br><Customer Address> | <Billing> | <Account #>        |

Below section will appear only if there is a Miscellaneous Payment issued to a vendor on a case

The following Miscellaneous payment(s) are being sent to you on behalf of the household listed above.

| Miscellaneous Payments |                 |            |
|------------------------|-----------------|------------|
| Payment Amount         | Type of Service | Comments   |
| \$<PaymentAmount>      | LIHEAP          | <Comments> |

Below section will appear only if there is a Premium Payment issued to a vendor on a case

The following Premium payment(s) are being sent to you on behalf of the household listed above. Premium payments are made for special needs, such as furnace or chimney cleaning, and do not affect the customer's LIHEAP share percentage.

| Premium Payments  |                 |            |
|-------------------|-----------------|------------|
| Payment Amount    | Type of Service | Comments   |
| \$<PaymentAmount> | Premium LIHEAP  | <Comments> |

## Notice of Emergency Assistance Payment (Sample) 416-01-60-23

Continued...

Below section will appear only if there is an Emergency Assistance Payment issued to a vendor on a case


The following Emergency Assistance payment(s) are being sent to you on behalf of the household listed above.

| Emergency Payments |                  |            |
|--------------------|------------------|------------|
| Payment Amount     | Type of Service  | Comments   |
| \$<PaymentAmount>  | Emergency LIHEAP | <Comments> |

Below section will appear only if there is an Underpayment issued to a vendor on a case

The following Underpayment(s) are being sent to you on behalf of the household listed above.

| Payment Amount    | Comments   |
|-------------------|------------|
| \$<PaymentAmount> | <Comments> |

|  |
|--|
|  <b>A Note from Your Worker</b> |
| [Additional Comments]  |

If you have any questions, please contact the local County Social Service Office.