	SSA Intranet
Two-Party Check Issuance	**Number: 100-B8**
Approved: ***Signature On File***	Date: 12/01/98 (R06/09)

Assembly Bill (AB) 1542 established the California Work Opportunity and Responsibility to Kids (CalWORKs) Program. Effective January 1, 1998, CalWORKs provisions require issuance of vendor/two-party check payments in certain case situations

CASES REQUIRING TWO-PARTY CHECK ISSUANCE

AB1542 and AB1808, Section 29.3 requires ongoing vendor/two-party check issuance for at least the rent and utilities in cases containing:

• Any parent or caretaker relative who is determined to be a Drug Felon. (See Drug Felon Policy 100-B7).

• Any parent or caretaker relative who is a Fleeing Felon who exhibits money mismanagement problems (call Program prior to making a determination). (See Fleeing Felon Policy 100-B9).

• Any parent or caretaker relative who is Welfare-To-Work (WTW) sanctioned for at least three consecutive months. (See Good Cause/Compliance/Sanction Policy 240).

TWO-PARTY CHECK PAYMENTS

Two-Party check payments will be issued for rent and utility costs. If there is a remainder after the rent and utilities have been paid, the remainder will be paid to the recipient via Electronic Benefit Transfer (EBT). **If the grant payment does not meet the total cost of the rent and/or utility, the entire grant amount will be paid towards the rent.**
Note: In these situations, the caseworker must explore how the client is meeting his/her needs if no other income or resources is reported. Refer to Fraud Referral Policy 100-H4 for specific instructions.

NOTIFICATION OF PAYMENT REQUIREMENT

Drug Felon or Fleeing Felon:
When a Drug Felon or Fleeing Felon client is identified at the initial application, or added to an Assistance Unit (AU), the caseworker will:

• Notify the client of the CalWORKs requirement of issuing a two-party check for rent and utilities.

• Print and review the W-9 “Request for Taxpayer Identification Number and Certification” form with client stressing the importance of informing the Vendor/Provider that the form must be completed accurately.

• Ensure that the Vendor/Provider’s information is correct on the W-9 form. For example: The name listed on the W-9 form should match the name used by the Vendor/Provider when filing his/her income tax forms. If the Vendor/Provider files taxes under a business name, the business name should be listed on the W-9 form NOT the Vendor/Provider’s name and vice versa.

WTW Sanction:
In cases where the parent or aided caretaker relative has been subject to sanction for at least three consecutive months, vendor/two-party check payments will be initiated at the beginning of the fourth consecutive month so the vendor payment process is completed no later than NOA deadline.
Vendor/two-party check payments shall continue until the participant is no longer sanctioned.

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W-9 REQUEST FOR TAXPAYER IDENTIFICATION NUMBER

The Vendor/Provider must complete the W-9 “Request for Taxpayer Identification Number and Certification” form. (Attachment 1)
The client will take the W-9 form to the Vendor/Provider for completion. A pre-paid envelope with the region’s address and caseworker's caseload number should be provided for the Vendor/Provider to return the form directly to the caseworker. The client may return the form. However, the form must be returned **prior to issuance.**
Note: A new W-9 form must be completed each time there is a change of a Vendor/Provider.

Complete W-9 form:
Once the W-9 form is returned and completed correctly, **the caseworker will:**

1. Enter the correct provider name in CalWIN.
2. Follow Two - Party Check Issuance Resource Guide for step-by-step guidelines and screen shots.
3. If Provider is not in CalWIN, inform Supervisor.

Supervisor will:

1. Complete and e-mail or fax the CalWIN Provider Request form (Attachment 2)
2. Follow instructions on page 1 of the Two - Party Check Issuance Resource Guide.
3. Fax the completed W-9 form to Information Technology (IT), Fax number 714-541-7855.

Caseworker will:

1. Retain a copy of the W-9 form in the case folder.
2. Receive confirmation e-mail from CalWIN Provider mailbox via Supervisor with the provider name and provider number.
3. Enter information in CalWIN.
4. Complete “case comments” section of CalWIN that W-9 form received completed.

Incomplete W-9 form:
If the W-9 form is returned without a Taxpayer Identification Number (TIN) or Social Security Number (SSN), the **caseworker will:**

1. Contact the Vendor/Provider and request the TIN or SSN.
2. If the Vendor/Provider does not have a number, refer the Vendor/Provider to Part 1, page 3 of the W-9 form.
3. Instruct the Vendor/Provider to report the TIN or SSN to the caseworker upon receipt from IRS.
4. Follow-up every 90 days until the TIN or SSN is obtained. **No negative action will be taken if not reported**.
5. Issue the two-party check to the Vendor/Provider identified by the client.
6. Complete “case comments” section of CalWIN that the TIN or SSN was not provided.

Supervisor will:
Follow steps # 4 thru 6.

Refusal to provide Identification Number:
If the Vendor/Provider refuses to provide a Taxpayer Identification Number (TIN) or Social Security Number (SSN), the **caseworker will:**

1. Contact the Vendor/Provider to explain the requirements and request the TIN or SSN.

Supervisor will:
Follow steps # 4 thru 6.

Caseworker will:

1. Issue the two-party check to the Vendor/Provider identified by the client.
2. Complete “case comments” section of CalWIN that Vendor/Provider continues to refuse to provide the TIN or SSN.

ISSUANCE OF PAYMENTS

Follow step-by-step guidelines for the issuance of two-party checks in the Two - Party Check Issuance Resource Guide.
Note: CalWIN does not support the issuance of recurring two-party checks. The split payment information must be completed each time a payment is authorized even when a payment was previously split and the net benefit amount has not changed.

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ADDRESS CHANGE

When a client reports an address change and a change in the Vendor/Provider, the **caseworker will:**

- Ensure that a new W-9 form is completed and on file.
- Refer to Address Check Resource Guide for step-by-step instructions on how to change address in CalWIN.
- Refer to the Two - Party Check Issuance Resource Guide for step-by-step instructions on how to update the split payment screens in CalWIN.

NOTICE REQUIREMENT

The following NOAs will be manually issued in CalWIN when a Drug Felon case is approved or changes made in the case.

- CalWIN NOA M82-832C CW Partial Approval – Denial of Drug Felon.
- CalWIN NOA M82-832D CW Change – Drug Felon.

ATTACHMENTS

- Attachment 1 – W-9 Request for Taxpayer Identification Number and Certification form
- Attachment 2 - CalWIN Provider Request form
- Resource Guide – Two–Party Check Issuance
- Resource Guide - Address Change

REFERENCES

- **EAS** 44-303.3, .34, 44-307, 44-307.12
- **ACL** 08-38
- **CalWORKs Policy** 100-B7 Drug Felon
- **CalWORKs Policy** 100-B9 Fleeing Felon
- **CalWORKs Policy** Fraud Referral Policy 100-H4
- **Welfare-To-Work Policy** 240 Good Cause/Compliance/Sanction

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