**OPRA REPRESENTATIVE PAYEE SERVICE**

**Best Practice**

**General Principles**

1. Provider should designate a primary contact person with the Social Security Administration
2. Provider should designate an alternate contact with the Social Security Administration
3. Provider should designate a staff person responsible for each of the following tasks:

* Receiving and posting benefit checks to ledgers
* Completing annual accounting forms
* Paying beneficiaries’ bills
* Determining beneficiaries’ needs
* Monitoring resource limits
* Administering dedicated accounts for minor children receiving SSI
* Reporting changes to the Social Security Administration
* Completing Social Security forms
* Reconciling bank statements
* Performing audits of beneficiary accounts

**Beneficiary Charged for Service**

1. Agency should be bonded
2. Fee collection needs to documented
3. If beneficiary fee is collected from a third party, documentation needs to address who/when/how much

**Determining Needs**

1. Provider needs to speak with beneficiary to keep informed of needs
2. Provider needs to be available to beneficiary
3. Provider should negotiate on behalf of or help individual obtain best price on all purchases
4. When at all possible, money should be set aside on a monthly basis for discretionary spending
5. When serving children, money should be set aside to assist with transition to adulthood if at all possible
6. Available funds should be first used to meet day to day living expenses/needs
7. Beneficiary should live in housing not owned by payee or relative of payee
8. Provider should establish a budget for home maintenance costs if necessary
9. When possible, money should be set aside for future needs
10. Disbursements of cash, gift cards, debit cards, money orders, checks from SS funds should be clearly documented
11. Any retro-active benefits received must be documented and expenditures detailed

**Reporting Events**

1. Provider should have a formal process to report changes to the Social Security Administration that effect benefits (change of address, income, resources, death)
2. Provider should have a process to report when they have lost contact with a beneficiary, a beneficiary is no longer in their care, or has experienced a change in competency (appointment or removal of a guardian)
3. Provider should have a process for handling conserved funds when payeeship is transferred
4. Provider should have process to insure completion of annual accounting reports, work and/or medical continuation disability reviews and SSI redeterminations
5. Provider should not co-mingle beneficiary funds with individuals for whom they are not payee

**Banking Procedures**

1. Provider should use direct deposit
2. In situations where direct deposit is not possible, provider should have safeguards in place until checks can be deposited
3. Provider should use bank that charges no/minimal account fees
4. When fees are charged, provider should have clear understanding of what they are for and avoid any excess fees when at all possible

Collective Accounts

1. If fees are charged to beneficiaries, provider should have formal method for allocation of fees
2. An separate record should be kept for each individual’s funds in the collective account
3. Provider should treat interest as the property of the beneficiary and document it in the ledger.

Individual Accounts

1. Provider should obtain an interest bearing account
2. Interest earned should be charged to the beneficiary and documented
3. All minor children receiving SSI should have an individual, dedicated account

**Record Keeping**

1. Provider should maintain up to date records on all payee accounts
2. Internal controls for safeguarding and monitoring should be documented and include:

* Periodic reconciliation of accounts
* Independent audits (if any)
* Internal audits
* Countersignature requirements
* Separation of employee duties
* Restriction of access to beneficiaries accounts
* Safe and/or locked spaces for un-deposited funds

1. Provider should have a process for paying beneficiary bills and supporting documentation procedures
2. Provider should have a process for distribution of discretionary spending money and oversight and documentation of the disbursements
3. Misappropriation should be reported immediately and handled via provider policy