

Restored Benefits Documentation

Case Name	Case No.
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Reason HHSC owes restored benefits:

- Income Resources Failed to Act
 Deduction HH Composition Benefits Not Received Other (specify): _____

Household is entitled to restored benefits because:

- of legislation, federal regulations or court actions requiring restoration;
 HHSC made an error in issuing benefits and the client was not at fault;
 client was disqualified for intentional program violation, which was later found to be inappropriate by the court; or
 an authorized representative of a drug and alcohol facility improperly accessed and failed to return benefits to the client's EBT account.

Household is entitled to more than 12 months of restored benefits because:

- of a court order. Specify time frames: _____

Household is entitled to 12 months or less of restored benefits because:

- the household contested an adverse decision (specify month loss began): _____
 the household attended a disqualification hearing (specify month loss began): _____
 the household notified HHSC that it believes it is entitled to restored benefits (specify month loss began); or _____
 HHSC discovered that the household may be entitled to restored benefits (specify month loss began): _____

Detailed explanation of why restored benefits are owed:

Computations:

Month	Amount Issued	Correct Amount	Difference

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Total Amount Owed: \$ _____

Claim against household? Yes No

Total Amount of Restored Benefits Owed: \$ _____

Amount of Offset, if any: \$ _____

Amount of Restoration Approved: \$ _____

Was there an offset? Yes No

If yes, provide date Form H1018, Overpayment Claim, was sent to the Office of Investigator General (OIG)

Provide the date Form H1825, Entitlement to Restored Benefits, was sent to the household:

Signature – Advisor

Date

Signature – Supervisor

Date