

TABLED

CHEROKEE COUNCIL HOUSE  
CHEROKEE, NORTH CAROLINA

SEP 06 2012

(DATE)

ORDINANCE NO. 311 (2012)

WHEREAS, the Social Services Committee met and updated their current guidelines; and,

WHEREAS, Tribal Council needs to review and approve the changes made by the Committee to the guidelines.

NOW, THEREFORE BE IT ORDAINED by the Tribal Council of the Eastern Band of Cherokee Indians in Council assembled, at which a quorum is present that Cherokee Code Chapter 108 – Social Services is amended as follows (changes are in red):

**DIVISION 2. - SPECIFIC PROGRAMS.**

[Sec. 108-10. - Burial assistance.](#)

[Sec. 108-11. - Burn-out assistance.](#)

[Sec. 108-12. - Emergency assistance.](#)

[Sec. 108-13. - Fuel or wood assistance.](#)

[Sec. 108-14. - Home repair program.](#)

[Sec. 108-15. - Phillip Raymond Owle, Jr. Foundation \(Make-A-Wish Program\).](#)

[Sec. 108-16. - Medical referral assistance \(formerly Tribal referral program\).](#)

[Sec. 108-17. - Wheel Chair Lift](#)

**Sec. 108-10. - Burial assistance.**

(a) *Benefits provided:*

(1) The Eastern Band will pay \$2,250.00, or a different amount as may be appropriated by Tribal Council from time to time, toward the funeral expenses of an enrolled member.

(2) In the case of enrolled members who die in another state or a county more than 50 miles from Cherokee, the Eastern Band will pay for transportation expenses of the deceased to be returned to Cherokee in addition to the benefit enumerated in subsection (1).

(3) In the case of a non-enrolled member infant/child who passes away before being enrolled, the mother of the infant/child must be an enrolled member of the EBCI and the infant/child eligible to be enrolled before assistance can be given. The applicant must reside within the five-county service area: Swain, Jackson, Haywood, Graham and Cherokee. In the event the father is the enrolled member, DNA must be submitted from father and infant/child before assistance can be provided. The applicant must reside within the five-county service area: Swain, Jackson, Haywood, Graham and Cherokee.

(b) *Income limits:* None.

(c) *Specific eligibility requirements:* The funeral home must send a copy of the death certificate, burial expenses and W9 from (from out of town funeral homes) to the Family Services Office.

(Ord. No. 293, 7-17-2000; Ord. No. 5, 12-15-2005; Ord. No. 524, 12-28-2006)

**Sec. 108-11. - Burn-out assistance.**

(a) *Benefits provided:*

(1) Financial assistance up to a maximum of \$1,500.00 to assist with expenses related to the burn-out of the applicant's principal residence.

(2) Motel room and meals for up to one week, if the family has no other resources.

(b) *Income limits:* None.

(c) *Specific eligibility requirements:*

(1) The applicant must reside within the five county area: Swain, Jackson, Haywood, Graham and Cherokee.

(2) The applicant must apply for assistance within 30 days of a burnout.

(3) The applicant must submit a fire report from the fire department. If the burn-out was caused by an intentional fire set by the applicant, then no assistance will be provided.

(Ord. No. 293, 7-17-2000)

## **Sec. 108-12. - Emergency assistance.**

### *(a) Assistance provided:*

(1) Up to a maximum of \$500.00 to meet an emergency need for person who meets the income guidelines and other requirements.

(2) Up to a maximum of \$150.00 food order for a family in which a family member has just died, regardless of the income of that family. The \$150 food order will be issued for a non enrolled member if they are the spouse or child of an enrolled member.

(3) A one time donation of \$500 to assist families who provide emergency shelter to enrolled children. The applicant must provide appropriate documentation from the department of Social Services or a court order showing placement of the child/children.

### *(b) Income limits:* Income limits do apply, except for assistance provided under subsection (a)(2) and (a) (3). See Section 108-6

### *(c) Specific eligibility requirements:*

(1) The applicant must reside within the five-county area: Swain, Jackson, Haywood, Graham and Cherokee.

(2) The applicant must have been denied assistance from other federal, state, county, or local programs; and

(3) Emergency assistance funds will not be provided to cover phone bills, unless a telephone is a documented medical necessity.

(4) Emergency assistance can be provided for power meter deposits, but the power company shall return those deposits to the emergency assistance program after the applicant has established an adequate payment history.

(5) Emergency assistance funds will not be provided to cover payments for homes, rent, trailer, car, cable TV, ongoing power bills, water bills, or court costs.

(6) Emergency assistance will not be provided if the applicant or a member of the applicant's household has received emergency assistance within the past 12 months. An exception to this requirement can be made by the Social Services Committee, in its discretion, for working applicants who experience an unavoidable personal and-or medical crisis during the course of the 12-month period.

(7) No emergency assistance shall be provided during the month preceding or the month following a distribution of per capita net gaming revenues.

(d) *Food voucher assistance:* The Eastern Band will provide a food voucher to families in crisis and will be issued in conjunction with the Family Support Services Food Pantry 3 day emergency food box. To assist in purchasing perishable food items not available through the food pantry, a family will be eligible to receive 2 food vouchers in a 12 month period.

(e) *Specific eligibility requirements:*

(1) The applicant must reside within the five county service area: Swain, Jackson, Haywood, Graham and Cherokee.

(2) The applicant must be an enrolled member of the Eastern Band of Cherokee Indians.

(3) The applicant must not be receiving food stamps or USDA commodity food.

(4) Applicants with 1-4 persons living in the household will receive a \$30.00 voucher. Applicants with 5 or more persons living in the household will receive a \$50.00 voucher.

(Ord. No. 293, 7-17-2000; Ord. No. 524, 12-28-2006)

**Sec. 108-13. - Fuel or wood assistance.**

(a) *Assistance provided:*

(1) Up to \$500.00 worth of fuel to be used for heating purposes each winter; or

(2) Wood for heating purposes, delivered from October 1 through April 1.

(3) A one-time per calendar year electric payment will be provided to an applicant who heats their home solely by electric. The applicant must present a "Disconnect Service" notice. The service provided will equal the past due amount. All other eligibility requirements must be met for energy assistance.

(b) *Income limits:* Income limits do apply. See Section 108-6

(c) *Specific requirements:*

(1) The applicant must reside within the five-county service area: Swain, Jackson, Haywood, Graham and Cherokee.

(2) The applicant must have been denied assistance from other federal, state, county or local programs.

(3) Applicants may receive either fuel or wood, but not both.

(Ord. No. 293, 7-17-2000; Ord. No. 524, 12-28-2006)

**Sec. 108-14. - Home repair program.**

(a) *Assistance provided:* Up to \$1,000.00 in financial assistance to cover home repairs at the principal residence of the applicant, which includes building an access ramp for wheelchair bound enrolled members.

(b) *Income limits:* Income limits do apply. See Section 108-6

(c) *Specific eligibility requirements:*

(1) The applicant must reside within the five-county service area: Swain, Jackson, Haywood, Graham and Cherokee.

(2) The applicant must own or be purchasing the home. Rental units, and Qualla Housing Authority homes that are not paid in full, are not eligible.

(3) The applicant must live in the home.

(4) Only repairs to the living quarters will be covered.

(Ord. No. 293, 7-17-2000; Ord. No. 524, 12-28-2006)

**Sec. 108-15. - Phillip Raymond Owle, Jr. Foundation (Make-A-Wish Program).**

(a) *Assistance provided:* Funds to meet a special request by a terminally ill person that is not covered by any other program or assistance.

(b) *Income limits:* None.

(c) *Specific eligibility requirements:* The applicant must be terminally ill, and that must be documented in writing by a doctor. This program is generally limited to requests that would otherwise be considered frivolous, to enhance the quality of life for a terminally ill person.

(d) *Remaining balance:* At the end of each fiscal year, all remaining monies will automatically be carried over to the next fiscal year.

(Ord. No. 293, 7-17-2000; Ord. No. 912, 9-13-2001; Ord. No. 524, 12-28-2006)



**Sec. 108-16. - Medical referral assistance (formerly Tribal referral program).**

(a) *Assistance provided:* Assistance for travel and incidental expenses is limited to non-routine medical treatment or drug-alcohol treatment that is not court ordered and will use the following guidelines:

(1) Only regular gasoline and diesel will be allowed. Dollar amounts will be calculated at the going rate of gasoline and diesel

(2) Gasoline for travel from Qualla Boundary:

- 0 gallons of gas to Sylva (2 exceptions: patients going to chemotherapy and radiation treatments. For these patients 2 gallons of gas will be issued only after they have exhausted other available resources such as the cancer support group and medicaid. \$7.00
- 4 gallons of gas to Waynesville- \$15.00
- 6gallons of gas to Asheville-\$22.00
- Fill-up for travel past Asheville (not to exceed 16 gallons)-\$43.00

(3) Gasoline for travel from Snowbird and Cherokee County

- 0 gallons of gas to Sylva (2 exceptions: patients going to chemotherapy and radiation treatments. For these patients 2 gallons of gas will be issued only after they have exhausted other available resources such as the cancer support group and medicaid. \$7.00
- 0 gallons of gas to Cherokee (the only exception will be if the doctor on duty in the clinic in Snowbird refers the applicant to the emergency room in Cherokee and appropriate documentation is provided; 4 gallons of gas will be provided)-\$15.00
- 6 gallons of gas to Waynesville-\$22.00
- 8 gallons of gas to Asheville-\$29.00
- Fill-up for travel past Asheville (not to exceed 16 gallons)-\$43.00

(4) The following appointments will not be eligible:

(a) Eye appointments (the only exception: diabetic patients having laser surgery)

(b) Dental appointments (the only exception: children having oral surgery)

(c) Ob/gyn appointments (the only exception: high risk pregnancies)

(d) Pediatric appointments

(5) Partial food and lodging money will be provided for travel past Asheville, including the meals of one family member. Because the goal of the program is to offset the cost of medical travel, the program will only pay for the motel room for every other day. Amounts paid are limited to:

- \$55.00 a night for motel
- \$15.00—\$20.00 for meals per person per day during hospitalization. Only family member meals will be provided.

(b) *Income limits:* Income limits do not apply.

(c) *Specific eligibility requirements:*

(1) The applicant must reside within the five-county service area: Swain, Jackson, Haywood, Graham and Cherokee; and

(2) A copy of the referral Cherokee hospital will be required; no exceptions

The Social Services Committee has adopted a ZERO TOLERANCE policy regarding abuse of gas voucher.

Using a gas voucher and not keeping appointments is considered abuse of the program and any client found doing this will be dismissed from the program. The Social Services committee will decide whether legal action or garnishment of the per capita distribution will cover the cost of stolen gas.

#### **Sec. 108-17. – Wheel Chair Lift Assistance**

(a) *Assistance provided:* 1 wheel chair lift will be purchased per applicant

(b) *Specific eligibility requirements:*

(1) The applicant must reside within the five-county service area: Swain, Jackson, Haywood, Graham and Cherokee; and

(2) The applicant must be an enrolled member permanently confined to a wheel chair; and

- (3) The applicant must have exhausted all financial aid programs available for the purchase of the lift through medicare, medicaid, private insurance and worker's compensation insurance; and
- (4) The lift purchased must satisfy the individual needs of the applicant; and
- (5) The applicant must sign a written agreement to provide care and yearly maintenance to the wheelchair lift.

Ord. No. 293, 7-17-2000; Ord. No. 814, 7-12-2001; Ord. No. 243, 9-13-2004; Ord. No. 524, 12-28-2006)

**BE IT FINALLY ORDAINED that this ordinance shall be effective upon ratification by the Principal Chief and that all prior ordinances and resolutions that are inconsistent with this ordinance are rescinded.**

**Submitted by: Social Services Committee**