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SOUTH DAKOTA PUBLIC UTILITIES COMMISSION

June 24, 2005

Rolayne Ailts Wiest South Dakota Public Utilities Comission 500 East Capitol Ave Pierre, SD 57501-5070

RE: Docket TC05-058

Dear Ms. Wiest,

In response to the SDPUC order requesting the following information:

- 1) The ETC's lifeline and link-up forms and promotional material;
- 2) a description of how the ETC advertises lifeline and link-up, including the form of advertisement and how often it advertises;
- 3) how the ETC is implementing the new certification procedures; and
- 4) how the ETC is implementing the new verification procedures.

Northeast provides service to approximately 6,200 subscribers and eight of those subscribers reside in South Dakota. A very small geographic area in Nebraska is designated as Tribal Land. The South Dakota subscribers do not reside on Tribal Land.

The Nebraska Public Service Commission (NPSC) administers the Nebraska Telephone Assistance Program – NTAP for non Tribal Land. Unless directed to do otherwise, Northeast would expect to apply this NTAP program to any of the South Dakota Subscribers, if they were to qualify for Lifeline or Link-up. Lifeline and Link-up on Tribal Lands is administered by Northeast per the federal guidelines.

Application forms for the NTAP are available at the NPSC Website and with local Health and Human Services agency caseworkers. A copy of Website information and an Application form is enclosed. Northeast's Application form for Enhanced Lifeline/Linkup is also enclosed.

Northeast advertises Lifeline and Link-up via bill inserts on an annual basis. A form of the bill insert is enclosed.

110 East Elk St • PO Box 66 • Jackson, NE 68743 Phone: (402) 632-4321 • Fax: (402) 632-4770 Northeast has implemented a certification process for Enhanced Lifeline and Link-up for Tribal Lands to accommodate the new procedures. A process is also in place to verify and document applicants/subscribers who may qualify on an income basis.

If further information may be needed to clarify or support the manner in which Northeast administers Lifeline/Link-up processes please contact me.

Yours truly, NORTHEAST NEBRASKA TELEPHONE COMPANY

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Emory Graffis General Manager



### What is NTAP?

- NTAP assists qualifying low-income individuals with obtaining and keeping telephone services by lowering monthly service and connection rates.
- NTAP reduces the cost of local telephone service up to \$13.00 per month. The discount will
  appear as a credit on your monthly telephone bill within 60 days of enrollment. No cash or
  checks will be distributed. The telephone bill must be in the name of, or contain the name of,
  the individual that qualifies for the program.
- NTAP provides reduced installation charges for phone service by 50% or \$30.00, whichever is less. It also provides a deferred payment of installation charges without interest.



### Who is eligible for NTAP?

To qualify for NTAP, a consumer must participate in ONE of the following programs:

- 1. Medicaid (NOT MEDICARE)
- 2. Food Stamps
- 3. Supplemental Security Income (SSI)
- 4. Federal Public Housing Assistance
- 5. Low-Income Home Energy Assistance Program (LIHEAP)
- 6. Childrens Health Insurance Programs (Kids Connection, SAM, MAC & EMAC)



### How do I apply for NTAP?

To apply for NTAP, complete an application form and provide proof of eligibility (as directed on the application).



### How do I receive an application form?

To receive an application form:

- Download an application form below, or
- Email a request to NTAP Program, or
- Telephone the Nebraska Public Service Commission at;
  - o (402) 471-3101 (Lincoln)
  - o (800) 526-0017 (Nebraska Only), or
- Mail request to:
  - NTAP

P.O. Box 94927 Lincoln, NE 68509-4927

### Mail COMPLETED application form to:

NTAP P.O. Box 94927 Lincoln, NE 68509-4927 ľ



### :: Nebraska Telephone Assistance Program (NTAP)

### **Applications and Instructions**

- NTAP Application (English Version)
- Instructions for NTAP Application (English Version)
- Solicitud del NTAP (Versión en Español)
- Instrucciones para la solicitud del NTAP (Versión en Español)

# NEBRASKA TELEPHONE ASSISTANCE PROGRAM (NTAP) APPLICATION

(If you live on Tribal land, DO NOT use this application. Contact your local telephone company for a Tribal land Discount.)

	LAST NAME	FIRST NAME	MIDDLE (Name/Initial)	SOCIAL SECURITY NUMBER	
	STREET ADDRESS (MUST be stree	t address / NOT a P.O. Box)	CITY	STATE ZIP CODE	
	MAILING ADDRESS (ONLY if	different from above)	сіту	STATE ZIP CODE	
1. Select <u>ALL</u> that apply:			2. Select <u>ALL</u> of the programs that apply:		
	I have phone service. My ph	none number is:	Medicaid (NOT MEDICARE) Food Stamps Supplemental Security Income (SSI) Federal Public Housing Assistance Low-Income Home Energy Assistance		
	Name of Telephone Co.:				
	Name on Bill/Account:				
В.	I have moved or started serv				
	Date new service began:				
C.	I DO NOT CURRENTLY have		Kids Conne	ction, SAM, MAC, EMAC	
	have been disconnected	•			
			Child's Name:		
Ne qu 1 e	2. Have your HHS caseworker sign 3. Have the local Housing Authority Inderstand completion of this applica- braska Public Service Commission of talifying programs. I agree to fill out certify, under penalty of perjury, the a ust meet the above qualification to re-	this form below to verify that y sign this form below to verify that ation does not constitute importing or my local telephone compa- a new application requesting above information is true. I h	hat you receive Federal Public mediate acceptance into this ny when I no longer participa assistance prior to moving. nave read the information on t	rogram Housing Assistance program. I agree to notify the te in at least one of the above	
	pplicant or POA Signature *Copy of Po			Date	
AGEN that do		FOR AUTHORIZING AGEN directly involved with adminis applicant is currently on these	ICY'S USE ONLY stering the program(s) or has a program(s). If enrollment in th	ccess to the records of the office re Kids Connection. SAM. MAC. c	
Au	thorized Signature (HHS Caseworker or	Housing Authority Personnel ONL	Y)	Title	
Printed Name			Date () Date Telephone Number		
Ą	gency Address		City	State Zip Code	

Return Completed Application To: NTAP PO Box 94927 Lincoln, NE 68509-4927

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> Have Questions? Call 1-800-526-0017 Or, in Lincoln 471-3101 Vea el revés para la traducción en Español

### Only <u>ONE</u> applicant per household may apply!

(If you live on Tribal land DO NOT use this application. Contact your local telephone company for a tribal land discount.)

If you currently participate in Medicaid, Food Stamps, Low Income Home Energy Assistance (LIHEAP), Federal Public Housing Assistance or Supplemental Security Income (SSI) programs, or if your child(ren) currently participate in Kids Connection, SAM, MAC, or EMAC, you are eligible for the Nebraska Telephone Assistance Program (NTAP). For Eligible Nebraskans, the NTAP program, administrated by the Nebraska Public Service Commission, reduces the cost of local telephone service by \$10.00 to \$13.50 per month, depending on your telephone company's rates. NTAP also pays 1/2 of installation charges, up to \$30.00 (i.e. if the installation charge is \$34.00, NTAP pays \$17.00). To qualify for assistance with installation charges, you must NOT currently have telephone service, or you must have moved or started service in the last 60 days. The telephone bill must be in/or contain the individual's name that participates in the program(s) listed above. Some telephone providers, including cellular and wireless companies, are NOT eligible to participate in this program. If you are unsure of your telephone company's participation, please call the number listed below.

This discount will appear as a credit on your monthly telephone bill within 2-3 months of enrollment in the program. This program does not pay any past bills or pay the required deposit. If you are willing to take total toll restriction (i.e. cannot make any long distance calls, including 800 numbers or collect calls), the phone companies will waive a deposit. If you have an outstanding phone bill, monthly payments towards any unpaid balances may be required before a deposit is waived

### STEP 1: COMPLETE THE APPLICATION AS FOLLOWS:

- ON THE FIRST LINE, write your full name and your Social Security Number.
- ON THE SECOND LINE, write your street address, city, state, and zip code.
- ON THE THIRD LINE, write your mailing address, city, state, and zip code. Only do this if your mailing address is different than the address on the second line.
- <u>COMPLETE 1A</u>: If you DO currently have phone service to your home. Please be sure to include your phone number, the name of the telephone company, and the name on the telephone bill or account. The person applying must have their name on the bill or account.
- <u>COMPLETE 1B</u>: If you have moved or started service within the last 60 days. Please be sure to include the date the service began.
- COMPLETE 1C: If you do NOT have phone service or have been disconnected.
- <u>IN SECTION 2</u>: Indicate ALL of the programs you are currently approved for assistance. (Medicare, Social Security, Social Security Disability or any other programs are <u>not</u> qualifying programs). The person applying must be enrolled in at least 1 of the 5 listed programs. For Kids Connection, SAM, MAC, and EMAC, a participating child's name <u>must</u> be indicated in the space provided and a caseworker <u>must</u> sign to verify the child's enrollment in a qualifying program.
- <u>ONCE YOU COMPLETE SECTION 2</u> and indicate which programs you are participating in, we must receive proof that you are currently enrolled in <u>one</u> of the programs you have indicated. Please provide proof of participation as directed in Section 3 on the application.
- YOU, or your authorized representative, MUST sign and date the form at the bottom. If an authorized representative
  is signing the application, a copy of the Power of Attorney page must be provided with the application.

#### STEP 2: MAIL THE COMPLETED APPLICATION

• ONCE THE APPLICATION IS COMPLETE, mail it to the address listed on the bottom of the application.

 Have Questions?
 Call 1-800-526-0017

 Or, in Lincoln, 471-3101

Vea el revés para la traducción en Español



#### Dear Customer:

You may be eligible for Enhanced Lifeline and receive discounts on your telephone service.

Enhanced Lifeline assistance is available to those individuals living on tribal land who participate in one or more of the following programs: Medicaid; Food Stamps; Supplemental Security Income (SSI); Federal Public Housing Assistance; Low Income Housing Energy Assistance; tribally-administered Temporary Assistance for Needy Families; National School Lunch (NSL) free lunch program; Bureau of Indian Affairs (BIA) General Assistance Program; and Head Start (based on income qualification). Individuals whose household income is at or below 135 percent of the Federal Poverty Guidelines are also eligible for Enhanced Lifeline assistance. If you are eligible for Enhanced Lifeline assistance, please complete the enclosed application and provide supporting documentation (such as a copy of your Medicaid card) to NNTC.

Documentation of income eligibility includes a customer's prior year's state or federal tax return, a current income statement from an employer or paycheck stub, a Social Security statement of benefits, or other such official documents. If your documentation does not cover an entire year please provide three consecutive month's worth of the same type of document.

Please note: income is all income actually received by <u>all</u> members of the household. Income includes salary before deductions for taxes, public assistance benefits, social security payments, pensions, unemployment compensation, veteran's benefits, inheritances, alimony, child support payments, worker's compensation benefits, gifts and lottery winnings. The only exceptions are student financial aid, military housing and cost-of-living allowances and irregular income from occasional small jobs such as baby-sitting or lawn mowing.

If you qualify based on household income, please come to our office at 110 East Elk St., Jackson, with the required documentation. All other applicants are welcome to drop the application and documentation off at the Jackson office, or you may mail them back to us in the enclosed return envelope.

Please feel free to call NNTC at 888-397-4321 with any questions you may have regarding the application or the Enhanced Lifeline/Link Up programs.

Sincerely,

NORTHEAST NEBRASKA TELEPHONE COMPANY

Enclosures

110 EastElk St • PO Box 66 • Jackson, NE 68743 Phone: (402) 632-4321 • Fax: (402) 632-4770

### ENHANCED LIFELINE/LINK UP ASSISTANCE APPLICATION

(Please Print)

I am an indivi	idual living on a	reservation.	yes		no
Name:					_
	Last	First	-	M.I.	
Address:					-
<b></b>	Street			Apt. No.	
City:	City	State		Zip Code	- e
Social Securi	ty Number:				
-	umber (if existin 1ed Number (if n	•			-
			(Area code $+7$	digit numb	er)
I am applying	g for:				ne service discount) ection charge discount)

Note: Telephone service MUST be in applicant's name.

I qualify for Lifeline/Link Up assistance because (check all that apply):

I participate in Medicaid.

- I participate in the Food Stamps program.
- I receive Supplemental Security Income (SSI).
- I receive Federal Public Housing Assistance.
- I receive Low Income Housing Energy Assistance.
- I receive assistance from the tribally-administered <u>Temporary Assistance for Needy</u> <u>Families</u> program.
- My child is eligible for the National School Lunch (NSL) free lunch program.
- I participate in the Bureau of Indian Affairs (BIA) General Assistance Program.
- Based on income qualifying standards, my child is eligible for the Head Start program.
- My household income is at or below 135 percent of the Federal Poverty Guidelines. (documentation is required)

I agree to notify the telephone company when I no longer qualify based on the above criteria.

I CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE. I understand that I must meet at least one of the above qualifications to receive Enhanced Lifeline/Link Up assistance on my primary residential telephone line.

Signature

Date

Send completed application to: Northeast Nebraska Telephone Company P.O. Box 66 Jackson, NE 68743 (888) 397-4321

### SELF-CERTIFICATION FOR ENHANCED LIFELINE/LINK UP APPLICANTS QUALIFYING UNDER INCOME-BASED CRITERION

I, \_\_\_\_\_\_, certify under penalty of perjury that I qualify for Enhanced Lifeline/Link Up assistance based on my household income that is at or below 135 percent of the Federal Poverty Guidelines. I further certify under penalty of perjury that there are \_\_\_\_\_ members of my household and that the supporting income documentation presented to my telecommunications provider accurately represents the annual income of all members of my household.

Signature:

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

### Federal Universal Service Fees Notice

Effective July 1, 2004, the Federal Universal Service Charge contribution factor will increase from 8.7% to 8.9%. This factor changes from time-to-time based on the needs of the Federal Universal Service Fund. This fund is maintained to ensure that all consumers have access to telecommunications services at reasonable prices. The fund also assists schools, libraries, low-income and rural health care consumers in obtaining telecommunications services. Contributions to the fund are determined by applying the factor to services designated as interstate by the FCC.

## Just a reminder...

Eligible customers can receive reduced rates on their basic telephone service through the *Nebraska Telephone Assistance Program-NTAP* (previously known as the Lifeline Program)!

To qualify, parties must participate in one of the following:

- ➤ Medicaid
- ➢ Food Stamps
- > Supplemental Security Income (SSI)
- > Federal Housing Assistance
- Low Income Home Energy Assistance Program

To receive an application, contact your local *Health and Human Services* agency caseworker, or the *Nebraska Public Service Commission* • PO Box 94927 • Lincoln, NE 68508-4927.

If you have any questions regarding the NTAP assistance program, please call the *Nebraska Public Service Commission* at (800) 526-0017.

