



TBB Power User



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- Offers the advanced Benefit Bank user the opportunity to move through modules faster and complete applications in a shorter amount of time.



Why would someone NOT want to use Power User?

- You are not completely comfortable using the standard TBB software.
- You prefer the standard version: you or your clients prefer viewing questions a few at a time.
- You have dial-up or a slower internet connection.
- You need extra help completing a client's application.

The Look

- The look of Power User is very similar to the standard version.
- To allow you to move more rapidly, Power User utilizes drop-down boxes and you will find familiar questions condensed onto just a few screens.

Example: Food Assistance Application

Condensed Modules

✓ Household Information

(Information about the client, his/her spouse, children, and other household members.)

✓ Additional Relationship Information

(Details about the relationships of everyone in the household.)

⇒ Expenses

(Child care, elder care, medical expenses, shelter expenses, etc.)

Income

(Employment, government, interest, and other income earned in the past 30 days)

Asset Information

(Cars, homes, stocks, insurance, etc.)

Ohio Benefits: Pro

Drop Down Boxes

Click here if you have more information to enter

* Does anyone in your household have a vehicle, or is anyone buying a vehicle? Yes No

What are vehicle assets?

Who owns this asset?	What type of vehicle is this?	Value
<input type="text" value="Lucy Webb"/>	<input type="text" value="Car"/>	<input type="text" value="5000"/>
This vehicle is used to produce income. <input type="checkbox"/> This vehicle is needed to transport a disabled household member. <input type="checkbox"/>		
<input type="button" value="DELETE"/>		
<input type="text" value="Lucy Webb"/>	<input type="text" value="Tractor"/>	<input type="text"/>
This vehicle is used to produce income. <input type="checkbox"/> This vehicle is needed to transport a disabled household member. <input type="checkbox"/>		
<input type="button" value="DELETE"/>		

Click here if you have more information to enter

* Does anyone in your household have insurance assets? (Do not count Medicare or Medicaid coverage as an insurance asset.) Yes No

Health Insurance

Car Insurance

Life Insurance

How does Power User affect E-Signatures?

E-signature for counselor and client are on one page.

The screenshot shows a web form titled "The Benefit Bank Ohio Common Application". In the top right corner, there is a language dropdown menu set to "English". Below the title, it states: "You must agree to the following terms and conditions for each form you just printed:". A list of seven terms and conditions follows, each preceded by a red bullet point. The terms cover understanding the form, certifying answers, disclosing financial interests, providing documents, allowing CDJFS contact, assigning rights to the State of Ohio, and agreeing to the signature section. Below the list, there are two white input boxes. The first box is preceded by the text: "* If you agree to the above terms and conditions for your OH Request for Cash, Food Stamp, and Medical Assistance (JFS 7200), please enter your password here." The second box is preceded by the text: "**THIS INFORMATION IS FOR THE COUNSELOR ONLY.** * If you have checked the client's identification and verified his or her identity, please enter your password here."

The Benefit Bank English

Ohio Common Application

You must agree to the following terms and conditions for each form you just printed:

- I understand the questions on this form and certify, under penalty of perjury, that all my answers are correct and complete to the best of my knowledge, including information about the citizenship or alien status of each household member applying for assistance.
- I state under penalty of perjury I have disclosed all annuities and other similar financial devices in which I and/or my spouse have any interest.
- I understand and agree to provide documents to prove what I have said.
- I understand and agree that the [CDJFS](#) may contact other persons or organizations to obtain the necessary proof of my eligibility and level of assistance.
- I understand that by signing this application and receiving [OWF](#), I am assigning to the State of Ohio any rights to all support owed to me and the minor children in the assistance group.
- I understand that in some instances, I may be asked to give consent to the CDJFS to make whatever contacts are necessary to determine my eligibility.
- I read, understand, and agree to the signature section on the application.

* If you agree to the above terms and conditions for your OH Request for Cash, Food Stamp, and Medical Assistance (JFS 7200), please enter your password here.

THIS INFORMATION IS FOR THE COUNSELOR ONLY.

* If you have checked the client's identification and verified his or her identity, please enter your password here.



- **Ensure that Power User is the best fit for you.**
- Once your counselor account is granted access to this version you are unable to go back to the standard version.



Next Steps

- Complete the application:
 - http://www.oashf.org/obb/WebForms/TBB_Power_User_App.asp
- When approved, your counselor permissions will be updated to allow access to Power User.
- Practice on the training website.
 - When approved you will be given access to the Power User portion of the training website.

Questions?

Write to: contactobb@oashf.org