

SNAP Policy Unit  
Q and A  
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**1. Does it matter which codes are used on AEIIT?**

Answer: It is very important for individuals to be coded appropriately for federal reporting. L and G codes should be used as last resort exemptions since they refer to the county or state rather than the individual. C/B are countable month codes and should be used based on their applicable policy if the month is required to count.

**2. Past training has provided information that a 27 code can be associated with an ABAWD exemption code. Is a 27 code on AEIWP an ABAWD exemption?**

Answer: No, Current training supersedes any previous clearances. 27 (lack of transportation) is a state barrier/exemption from E&T work components. State E &T barriers do not exempt someone from the ABAWD time count.

**3. Can the letter "O" be used on AEIIT?**

Answer: No, the letter "O" is no longer a valid ABAWD code in ACCENT and cannot be used.

**4. When interviewing a customer for SNAP only, and a woman indicates she is pregnant, workers are wondering if we still need to code this? As it is not a requirement for SNAP. And if we do code it, it will not be verified. (unless we need to verify it?) Then, if we do code it as pregnant (unverified) would we use the "y" code on AEIIT?**

Answer: Do not complete the AEIIM screen unless the details have been verified. AEIIT can still be coded with a "Y" without verification because this verification is not needed for SNAP unless it is questionable. Pregnancy needs to be documented in CLRC.

**5. If a customer volunteers at a community agency to get 20 hours per week for a workfare component, would they have to be referred there by TDLWD? Meaning, if I was an ABAWD individual and I told my caseworker that I was already a volunteer at the local library or food bank, would that count towards my 20 hours per week, or would I have to go to DOLWD and have them refer me to a place to do volunteer work?**

ANSWER: If they are not mandatory E&T, no ABAWD individual would "have" to go to TDLWD. This is only a possible exemption. Volunteering would count towards their 20 hours and the customer can find this on their own. They would not have to combine this with any other work opportunity if the customer is volunteering an average of 20 hours a week.

**Follow-Up: If they are already volunteering on their own at a local agency would we need to get verification of this?**

ANSWER: We must verify their hours. Once it has been verified it will be assumed that they will continue to meet their 20 hours requirement until we are notified otherwise.

**Follow-Up: So, we don't need to keep track of this monthly?**

Answer: There is no requirement for us to track. The requirement is on the ABAWD customer to report if their hours drop below 20. If they did not report it timely, we can explore the possibility of a claim.

**6. Does the ABAWD individual have to be at 20 hours per week exactly or could it just average to 20 hours?**

Example: 19 hours this week but 21 hours next week. Could it just average to 80 hours/month? Example: Two 40-hour work weeks and two weeks with no hours or does it need to be 20 hours per week every week?

ANSWER: It is an average of 20 hours a week, but they have to meet 80 hours a month.

**7. If we are referring an ABAWD to TDLWD we would code them an "E", right?**

ANSWER: If they do not meet any exemption and they would be coded a “C” until they are participating with labor for 20 hours per week. Once they are working with TDLWD we would at that time change their C to an E. **Just referring them to TDLWD is not an exemption.**

Follow-Up: What if they are not “choosing” to work with TDLWD. What if they have to work with TDLWD because they are in a mandatory E&T county?

ANSWER: The ABAWD policy remains the same. If they do not meet an ABAWD exemption at that time, they would be a “C” until they are actually working with TDLWD.

8. At what age is a child no longer a “dependent” child for purposes of ABAWD? Does school attendance come into play? Say the child is turning 19 prior to graduating could the parent keep their P exemption code until they graduate?

ANSWER: If there is no other child under 18 in the SNAP HH they can’t keep their P exemption code. Federal regulations say exemptions are:

(3) Is a parent (natural, adoptive, or step) of a household member **under age 18**, even if the household member who is under 18 is not himself eligible for SNAP

(4) Is residing in a household where a household member is **under age 18**, even if the household member who is under 18 is not himself eligible for SNAP

There is not a concern about school for the P exemption...only age. If the child is no longer under 18, the parent cannot have a P exemption and we would need to find a correct code.

9. A case has two adults and one child. The Mom and her child are in one SNAP sequence. The other adult is in the same case but a different SNAP sequence as they purchase and prepare separately. For ABAWD, could the adult in the SNAP sequence by themselves get the “P” code as there is a child in the HH? Or would they not due to be different SNAP sequence as they purchase and prepare separately?

ANSWER: The child has to be in the SNAP Household (same sequence). They don’t get the P if they are just in the residence /reside at the same address. In your question above, there is a child in one SNAP household and not in the other. Each sequence is a separate SNAP household.

10. The customer is a grandmother that is over 50 years old and therefore not subject to ABAWD. Her grandson is 18 years old and a junior in high school. When looking at the E&T Federal codes as a possible ABAWD exemption, does the Federal E&T Exemption code of 18 exempting a student enrolled at least half time apply to those students in high school?

ANSWER: Students (18)

Eligible students enrolled at least half-time in any recognized school (**including high school**), training program, or institution or higher education are exempt from work registration. These students will remain exempt during normal periods of class attendance, recesses, and vacations, provided that they intend to return to school when the recess or vacation is over. If the student graduates, is suspended, expelled, drops out, or does not intend to register for the next normal school term (excluding summer), he/she no longer qualifies for this exemption. Code 18 is a federal exemption. He would not be subject to ABAWD, He would be coded an “S” on AEIIT.

11. For individuals that are claiming to be mentally/physically unfit for employment, are we going to have to verify this?

ANSWER: We are only requiring verification of their disability if it is not obvious/observable. The majority of our interviews probably won't be able to confirm obvious/observable due to them being completed over the phone. However, when it is obvious/observable, we will not require verification.

12. If a customer begins their 3 reentry months ("R") but in month 2 their case closes for any reason (for example: fails to recertify) then they reapply and become eligible 2 months later, do we pick up and give them 1 more month of reentry since they used 2 months of reentry before their case closed? So, any interruption in benefits and they haven't used their consecutive 3 reentry months.

ANSWER: Customers are eligible for up to 3 "R" months. The "R" months must be consecutive; if they are interrupted the remaining months are lost. A customer can always become eligible by meeting an exemption or meeting the work requirement. However, a customer is only eligible for 3 countable "C/B" months and up to 3 "R" months in the set 36-month period.

13. Is it acceptable for an ABAWD person to volunteer in any county, not just their own, as long as we can verify their hours?

Answer: Yes, this is acceptable. There is no policy stating they have to work or volunteer in their own county.

14. A man lives with his girlfriend and her children (they are not his children). They are all in one SNAP case. Do these children that are under 18, that aren't his, allow him to have an ABAWD exemption?

Answer: Yes, if they are in the same SNAP sequence, he is exempt from the ABAWD requirements with a "P".

15. We have someone that has had their 3 Cs. However, it is later discovered that they were actually ineligible for SNAP during those months and a claim was prepared. If the customer pays the claim, would that give the customer the ABAWD eligible months back?

Answer: Yes. If an ABAWD receives benefits erroneously and then pays them back, those months should not be considered countable months.

16. Would school employees that have the summer off be considered still ABAWD exempt in the summer months if they are under contract to return in the fall?

Answer: If the number of hours the employee works during a 12-month certification period is at least 30 hours a week, or his or her salary, when averaged over the 12-month period is equal to the minimum wage times 30 hours per week, they are federally exempt during the entire 12-month period from E&T which means they are also exempt ABAWD requirements.

17. Question regarding using the 20 code verses 24 code on AEIWP. We know the 20 code will exempt the individual for ABAWD but will 24? Do we need a doctor's statement to use the 20 code even if we observe the individual's impairment such as a broken arm or would we use the 24 code with only observation and no doctor statement?

Answer:

unfit for employment or work programs (D)

- medically certified as physically or mentally unfit for employment or
- unfit based upon the eligibility worker's observations (can be physically or mentally unfit). A doctor's statement is not required, and it does not have to be for a specific length of time. This should be documented in the running record.

The AEIWP codes:

07 is for verified disability. ---Would allow a D exemption based on verified                   unfitness.

20 is for a verified illness or injury. --- Would allow a M exemption based on                   verified unfitness.

24 is a state barrier used for unverified but observed illness to exempt someone from E and T activities, it is not a Federal work registration exemption. However, someone may be exempt from ABAWD and a 24 on AEIWP due to the fact that ABAWD policy itself allows for the unfitness for employment to be based on the caseworker's observation. The exemption code on AEIIT isn't due to the coding on AEIWP, it is due to ABAWD policy itself.

Follow-Up: We understand that the federal exemptions from E&T 07 (SSA/SSI customers) and 20 (doctor statement customers) will exempt them from ABAWD. But, when we observe the temp disability or ongoing disability (no SS and no doctor statement), if we use code 24 on E&T, we understood that that code was a state barrier and not a federal exemption and would not exempt them from ABAWD. Our understanding was that only federal exempt codes on E&T exempt from ABAWD, but state barrier codes do not. Just so that our staff is totally clear, we are now saying the state barrier 24 IS one that will also exempt from ABAWD? If so, what ABAWD exemption code would be used?

Answer: The "M" code would be used. If someone comes in with no verification but is observed as physically/mentally unfit this would be a 24 on AEIWP. They aren't federally exempt from work registration. They are exempt from E and T due to a state barrier, but they are coded as a M on AEIIT according to ABAWD policy itself that allows someone to be exempt from ABAWD based on the eligibility worker's observations of physical or mental unfitness. This should be documented in the running record.

18. If a customer has had 3 C months and they apply for benefits mid-month. This would be a partial month. They have not completed the steps to "re-gain eligibility" but couldn't they still be eligible for the partial month since a partial month is not a countable month?

Answer: Even though the month in which he/she applies is a partial month of benefits, the individual has not met the basic requirements. Once the 3 months have been received they are ineligible ABAWDs. The Regs state that the Able-Bodied without Dependents may only receive benefits three months out of 36 unless he/she meets work requirements that month or an exemption. The individual would not be eligible even though the month is a "partial" month. In other words, three countable months "trumps" the partial month policy.

19 We're stuck on the 20-hour requirement. If a person is making \$250/week: for E&T exemption, this person is good since income is more than 30 hours at minimum wage. So, we code as 16 and this individual is FEDERALLY exempt from ABAWD. If person is federally exempt from E&T this person is exempt from ABAWD—according to the training material. BUT it also says that for a person to be coded as W for ABAWD, they must be hitting 20 hours/week or 80 per month. So, if our person making \$250/week is only working 10 hours/week for that income—which code should be used? Is this person exempt due to federal exemption from Work Registration or a C since not working 20 hours/week?

Answer: Regardless of the hours, if they are federally exempt from E&T due to making over minimum wage \*30 they would be exempt from ABAWD.

20. Customer does not have an exemption for ABAWD. Volunteers to go to Department of Labor but is not given an appointment for 2 months and AEIIT is coded C per policy until they comply with DOLWD. If the customer receives all 3 months of C for ABAWD should case be closed for ABAWD or left open until DHS has

heard back from DOLWD? This is happening now in Madison Co. and there could possibly be appeals which the customer will win since this would be our fault for closure.

ANSWER: You close them. There are other options other than working with labor to meet an ABAWD Exemption.

21. If a customer is attending an approved state drug program but only going 1 time a week, would it be coded as 15 on AEIWP and exempt on AEIIT?

ANSWER: There is no amount of time they must be spending in the treatment program.

22. What are the criteria to regain eligibility? Policy states in order to regain eligibility the customer must meet an exemption, the time clock must re-start or they must have completed 1 of the following in any 30-day period for 80 hours or more:

- Work
- Participation in a work program
- A combination of work and work-program activities
- Participation in a workfare program (hours based on allotment)

Example:

Week 1: Worked 45 hours

Week 2: Worked zero hours

Week 3: Worked 20 hours

Week 4: Worked 25 hours

In this 30-day period they worked more than 80 hours, but not consecutive days. Are they eligible for re-entry?

ANSWER: Yes, they have met the requirement to regain eligibility. To regain eligibility the individual must be currently meeting an exemption, or the individual must have met ABAWD work requirements in a 30 consecutive day period prior to job or training ending. The 30-day period does not have to be immediately prior to application it could have been at some point after they became ABAWD ineligible but months prior to reapplication. The 80 hours can be averaged over the 30 consecutive day period.

23. Is a language barrier an exemption for work registration? Is the DOLWD prepared to accommodate non-English speaking customers who want to work with them to meet their ABAWD requirements?

ANSWER: Language barrier is not an exemption. Labor is required by the same standards we are.

24. If Jackie is doing work study would we use "W" or "S" code?

ANSWER: The more appropriate code would be "S".

25. If a doctor's statement is not required and does not have to be for a specific length of time – should this be documented in CLRC? How do we document something not required?

ANSWER: The only time you would not require a Dr. Statement is if it's observed and obvious. If you observe it and it's obvious... document that they are unfit in CLRC. If verification was used to verify, then document verification used.

26. Caring for a not in home disabled relative. Does that count as volunteer work if it totals 20 hours?

ANSWER: That is an exemption in itself. They are federally exempt from E&T so you would code them as a "K" on AEIIT.

27. Benefit approved for applications prior to us being an ABAWD county– will they be grandfathered until next recert or SR form?

ANSWER: They are not grandfathered in. Their countable months will begin as soon as your county becomes ABAWD.

28. According to ABAWD, a customer should be referred to work registration if they are pregnant. Will the TDLWD send this pregnant customer back to DHS? They are sent back for work registration.

ANSWER: Pregnancy is an ABAWD exemption. If they are pregnant they are exempt on AEIIT with a Y. However, it is not in and of itself a work registration/E&T exemption. Since E & T is no longer mandatory, if the customer wants to volunteer for E & T they would be an O2. Since E & T is now voluntary, if the customer does not want to volunteer for E&T and there is no other exemption you will code them as a 31 on AEIWP.

29. If a customer moves from an ABAWD state and received their 3 months countable benefits in that state. Are those months countable for TN if the benefits were received before the start of our ABAWD time clock?

ANSWER: No. The 3 countable months have to have taken place during our current 36-month clock.

30. What month is changed on AEIIT when we receive notification from Labor, the month they send notification or the next month?

ANSWER: You can change the current month.

31. Applicant re-applies for benefits after working less than 30 days, example: hire date 05/02/2016, App date 05/02/2016. Deny application or change sign date?

ANSWER: I'm assuming they have already had 3 Cs, and this is determining if they meet the conditions for "re-eligibility". You would project the potential hours the same way you project the income. If their employment is for the correct number of hours, you can approve the application. You would not change the sign date; they are eligible from date of application based on projected hours.

32. We thought they needed to have the 80 hours in before approval, but is this answer saying that as long as the customer is working, volunteering, or doing in-kind work an average of 20 hours per week when they reapply, we don't need to wait until they actually work 80 hours in 30 days?

Answer: Federal Regulations

(d) Regaining eligibility.

(1) An individual denied eligibility under paragraph (b) of this section, or who did not reapply for benefits because he was not meeting the work requirements under paragraph (b) of this section, shall regain eligibility to participate in the SNAP Program if, as determined by the State agency, during any 30 consecutive days: he or she:

(i) Worked 80 or more hours;

(ii) Participated in and complied with the requirements of a work program for 80 or more hours;

(iii) Any combination of work and participation in a work program for a total of 80 hours; or participated in and complied with a workfare program; or

**(iv) At State agency option, verifies that the he or she will meet one of the requirements in paragraphs (d)(1)(i), (d)(1)(ii), (d)(1)(iii), or (d)(1)(v) of this section, within the 30 days subsequent to application;**

This is an option that Tennessee as always used for ABAWDS.

Example:

If they are currently working you would project their hours/income if their projected income is 40 hours a week, they would be a “W” on AEIT therefore exempt therefore has met the criteria for regaining of eligibility.

33. Dr. Statement: Does the doctor’s note have to say, “customer can’t work”?

Answer: We should be verifying that the customer is mentally/physically unfit for work.

34. The training states that a doctor’s note could be requested for verification if not observed. Is a statement from a social worker or nurse practitioner ok?

Answer: It can be from a physician, physician's assistant, nurse, nurse practitioner, designated representative of the physician's office, a licensed or certified psychologist, a social worker, or any other medical personnel.

35. How do we ‘correctly’ document physically/mentally unfit without violating HIPAA? Would we type what was in the doctor’s note or just that the customer is unable to work based on doctor statement?

Answer: You can state that you received a Dr.’s statement that verified customer’s unfitness for work.

36. If an ineligible ABAWD is taken out of the case, would it be correct to put the rent expense that was in their name in the name of another adult in the household, so the remaining household members get the full deduction instead of a pro-rated amount?

Answer: The expense should be keyed per policy based on the responsibility/payment of the expense. The deductions are supposed to be pro-rated if the ABAWD individual is the responsible/paying party.

37. We know that if a customer is coded as a C and then goes to DOLWD, the C’s can be changed to E’s. Is that true for other codes? Such as, customer reports they were in a car accident 2 months ago, would we change the past 2 months’ C’s to D’s? Does it matter if it is a federal exemption or not? Such as, if a customer was approved for SSI 2 months ago, would we change the past 2 months’ C’s to D’s? Or is it like a change and it goes into effect the month after reported?

Answer: We can review the months and correct records for prior months.

38. Is there a limit on how long the drug treatment code can be used, as in 12 weeks? Would we have to follow up to make sure the customer is still in the treatment program or just leave the Q code until next recert/SR form?

Answer: The time frame that a customer will spend in treatment should be known at the time they sign up. Yes, it would be appropriate to follow- up

39. If a customer was eligible for “R” months, if they report a change before the 3rd “R” month was used, we will process the change and update the code as needed but the customer could not get the “R” months again in that 36-month period even if they only used 1 or 2 “R” months? We thought it would be good to change the code from “R” to something else if the change warrants it to prevent auto-closure for the 3rd “R” month.

Answer: If the customer is now working or meeting another exemption, it would be best to change to the new code to prevent auto-closure. Just thoroughly document CLRC. If the R code is updated to a new code or they lose eligibility, they do not get another set of R codes.



40. Self-employment – would the worker use the gross income or the income after self-employment expenses to determine hours worked per week for ABAWD or would we just use customer’s statement if it is reasonable for the type of self-employment enterprise? Example: Gross income \$1200 minus \$600 expenses = \$600 adjusted gross income; would we use \$1200/month to determine hours for ABAWD or \$600?

Answer: Gross, same as earned income. However, some self-employment is not based on hours and we could use customer’s statement if it is reasonable for the type of self-employment.

Follow-Up: Would a monthly calendar journal of hours worked be an acceptable verification for ABAWD?

Answer: You would verify like you would for student hours or E&T. A monthly calendar would be acceptable. Customer statement would be acceptable as well (as last resort and be documented in CLRC why customer statement was used).

41. If we provide a listing for our customers of potential places to volunteer, for example the local animal shelter or library and the customer is bitten, hurts their back when lifting books or otherwise injured, could the state potentially be liable for those injuries since we suggested places they could volunteer? Can we give the customer a list of places, or is there a website like 2-1-1/ the United Way where could direct the customer to find a place on their own?

Answer: We are only providing a resource list of potential places they can check into volunteering. We are not telling them they have to go there. We are not responsible in anyway if they choose to go there.

42. For failure to update AEIIT due to customer not reporting changes that would have caused them to be a “C” .... will this result in a QC error? Ex. Someone with a “W” didn’t report hours dropping under 20, or person coded “Y” has a miscarriage, or the child under 18 leaves the home which wasn’t reported to the office. Are these QC errors?

Answer: They are only QC errors if they are reportable changes, and the customer did not report it or if it was reported to us and we didn’t act on it.

Follow up: When we discover that an ABAWD status changed or was incorrect do we update AEIIT and how far back should updates be made?

Answer: The updates should be made as needed within the current ABAWD three (3) year cycle. If the customer received benefits for months that should have been countable months beyond the 3 B/C months, we can use an H code (15% exemption).

43. When a person has applied for but isn’t receiving UC, we code them 13 on AEIWP and an “U” on AEIIT. If the application for UC is later denied, would those months coded as “U” be changed to C?

Answer: There would be no need to later change the code to a C. E&T policy is you exempt a person who receives unemployment compensation. Also exempt persons who have applied for unemployment compensation if they were required to register for work with the local DLWD office as part of the unemployment compensation application process. Verify the exemption with the appropriate DLWD office, if questionable. So, regardless if they were ever approved they were federally exempt from E&T due to working with the requirements of unemployment compensation therefore they are exempt from ABAWD.

44. If a customer’s case is closed and customer reapplies and the worker can see from Clearinghouse that the customer received UC while case was closed, would that count as the customer regaining eligibility since he/she probably had to work 80 hrs./30 days in order to qualify for UC or would the worker still need proof that the customer had been working while off from SNAP?

Answer: Clearinghouse is not verified upon receipt. However, to qualify for unemployment that just proves you made a certain amount of money during a period of time. It does not prove the number of hours worked by the customer.

45. Self-Employment: If a person babysits her friend's kids for free or for a low amount (like \$50 for 10a-5p, Monday through Friday), would that be a "W" for AEIIT purposes? Or a man mows his mother's yard and takes her to appointments but doesn't live with her but states it takes 20 hours/week, would that be a "W"? Do we have to count those types of odd jobs using the minimum wage rate or does it not matter for ABAWD as long as the hours are 20 or more per week? Here is the example with math: 10a-5p = 7hrs/day; 7hrs x 5 days = 35hrs/week.  $\$50/\$7.25 = 6.8$  hrs. of work which is not the 20 hrs. for ABAWD.

Answer: "W" is used for paid work. If the customer is not being paid for the work, then "V" can be used for volunteer work or "I" can be used for in-kind if the work is being done in lieu of wages. Any combination of those is acceptable to meet the 20-hour work requirement if they are doing these things for 20 hours a week. Acceptable volunteer work is defined as volunteering at/for religious or community organization/events or public/private agencies.

Follow-up: Do you only look at wages when someone is working to make sure they are getting 20 hrs. x 7.25/hr.? Meaning that if someone is working 40 hours a week at \$2/hr., they would not get a "W" on AEIIT? Also, if someone is volunteering or doing in-kind work, then you look at the hours per week only?

Answer: For AEIIT, if they are working 40 hours they could still get a "W" regardless of amount being paid. Working over 20 hours gets you a "W" on AEIIT.

Follow-Up: We want to be really sure about the two income questions listed above. For ABAWD as long as a person is doing an average of 20 hours weekly/ getting 80 hours per month of in-kind, voluntary, or work for pay, for ABAWD purposes it doesn't matter if they are paid less than minimum wage or not paid at all, we need verification of hours to earn that "W" exemption for ABAWD?

Answer: If they are working 20 hours a week (averaged monthly) they are exempt from ABAWD. It can be paid, volunteer (unpaid), or in-kind (receiving something in lieu of wages). There is not requirement that they have to receive any income. Hours worked should be verified. As with all verifications, documentary evidence is the preferred method. However, that is not always available. We can use collateral contacts and as last resort, customer statement, if we have tried and the customer has tried and that is documented in CLRC.

46. If we have someone we code "W" for working. Then, when they come in for renewal, we learn that they went under 20 hours per week a few months back and failed to report it, do we go back and change those months to "C" months or leave them as "W" and file a claim?

Answer: We can review previous months and correct them as needed. As for a claim, yes, this was a reportable change and they failed to report it. We can explore for a claim.

47. How is an ABAWD individual coded when working 20-25/week in exchange for rent (lives in hotel). Hotel owner has verbally verified the agreement.

Answer: Your example is considered in-kind...or working in lieu of wages. So the customer would be coded an "I" on AEIIT.

48. Once month's change to "C" and benefits either decrease or close 03/31/16, if the customer calls to inquire, would we tell them they need to reapply to see if they can regain eligibility? Or would we need to give an opportunity to explore if they met ABAWD exemption and we were not aware ...and then change the "C" months and reopen the case without application?

Answer: Once the negative action was taken and we were correct based on the information that we had, they will need to re-apply and a new application will be needed. During the new interview we can explore the previous months to determine if there was actually an exemption they were eligible for and correct the past codes.

49. I know we can use the 0 code for initial proration or if the case prorates out to zero. My question coming from staff is in regard to the SR cases who have missed their SR month and come back in the next month to reapply and prorated supplements are issued—is this a countable month or not?

Answer: These applications are “initial” applications, benefits are pro-rated as such, and since prorated months are not countable, exempt with a 0.

50. Husband and wife living with grandmother and they get a statement that just says that Granny needs assistance to stay in the home. Can we exempt both adults or should only one adult be exempt?

Answer: Being exempt for taking care of an incapacitated person is a 08 exemption on AEIWP for E&T. Since it is a federal exemption, this will allow them to be a K on AEIIT and exempt from the ABAWD requirements. The SNAP manual has the criteria for receiving the E&T 08 exemption is in: Caretaker (08/10) Exempt a parent or other household member who is responsible for the care of a dependent child under age 6 or for the care of an incapacitated person. If the child becomes age 6 during the certification period, the household member must register at recertification, unless the individual qualifies for another exemption.

**Note\*** If a parent and another household member claim to be responsible for the care of the same dependent child or incapacitated person, discuss the responsibility with the applicant to determine who is actually responsible for providing the care. Only one person may claim the caretaker exemption for a dependent. If more than one dependent person is cared for, then more than one person may be responsible. (The care does not have to be provided to a household member. The person can live in another residence.)

51. How often do we re-verify the 20 hours? Is this different if the county is E and T or not?

ANSWER: If the individual is meeting their work requirement by working with Department of Labor and Workforce Development in an E&T county this is tracked monthly by them and sent back to us. If the individual is meeting their work requirement by working (paid, volunteer, or in-kind) this does not have to be tracked. Once it is verified, it is up to the customer to inform us that they are no longer meeting the work requirement until the next recertification.

52. If the county is an E and T county but there is no Department of Labor and Workforce Development (DLWD) in that county, do we assume that the DLWD serving them is the closest one?

ANSWER: DLWD will be coming to the E & T county to serve those customers. The customer should not have to go to another county.

53. If we have an ABAWD customer that volunteers to go to DLWD, how long does it take to for DLWD to see the customer?

ANSWER: You do not have to wait to process the case, you can go ahead and code them a C and process and change the code once they are working with DLWD. From what we have been told, it should take no longer than 2 weeks.

54. Are there any special accommodations being made for homeless people as far as exempting them from ABAWD?

ANSWER: Being homeless is not an ABAWD exemption. However, some homeless individuals may not be fit for work. If they are physically or mentally unfit for employment, they can be exempt with M on AEIIT, and CLRC would need to be documented.

55. If we close someone after they have 3 countable months then they come in 2 months later to re-apply. We find out they were in the hospital or something like that do we go back and restore benefits?

ANSWER: If the customer didn't inform us, we do not owe them any restoration of benefits. However, if they re-apply, we can change past codes to a more correct code. In this example their C codes could be changed to M (unfit) and allow them to be potentially eligible again.

56. Household consists of boyfriend age 19, girlfriend age 17. Since she would not be a dependent child would he be coded C if no other exemption is met or would the fact that she is under age 18 automatically make him eligible for the P code?

Answer: If they are in the same SNAP household he would be exempt with a P.

SNAP Manual Chapter 10

Dependent child under 18 in the SNAP household (P)

All adults in the SNAP household are exempt from the ABAWD requirement if there is a child under 18 in SNAP household. The child does not have to be related to the adult being exempted. (The child must be in the same sequence. The adult can claim this exemption even if the child is not eligible for benefits.)

57. Customer has been denied disability [per SOLQ] yet is appealing the decision. Should customer receive | M | pending the decision? Additionally, how will the department know to go back and review the outcome of appeal? Or should customer receive |C| until customer provides proof of unfit for employment physically/mentally?

Answer: Verified application or appeal for SSI allows you to be coded a 20 on AEIWP (you do not have to yet be approved). Having a 20 on AEIWP is a federal exemption which allows you to be Exempt from ABAWD on AEIIT. I do believe that an alert would be generated through DESX to inform of the appeal outcome.

58. According to the PUN [12/28/15], it states under "Maintaining eligibility", an individual has received his/her initial three months can become exempt by [b] volunteer work. Customer is currently volunteering, is the customer exempt now or does customer have to use 3 of his initial 3 months?

Answer: If they are volunteering for 20 hours this is a form of work.

59. I have a question from staff about working report GRP615RA. They want to work them after cut-off in Feb. This report shows individuals with C months. Can we take action to remove/close an ABAWD as long as we wait until after cut-off in Feb?

Answer: It would be an invalid negative action if taken before March 1st. It would be a QC error. They do not need to work them until March 1st and should have them all worked by March 18th. You cannot take action to remove/close an ABAWD until the 1st of the 3rd countable month and all action should be taken by Adverse in the 3rd countable month.

60. When is the earliest we could close an ABAWD individual that is ineligible due to the time count? Can we close them after cut-off in their second month since it won't be effective until the 3<sup>rd</sup> month?

Answer: You must wait until the actual 3<sup>rd</sup> countable month to take action and all action should be taken by adverse of the 3<sup>rd</sup> countable month.

61. Household includes husband and wife who are foster parents to children under 18.

Because they receive money, they elect not to include the foster children in the SNAP. Since the children are not in the SNAP assistance unit, are these adults still exempt from ABAWD as P?

Answer: Foster children not included in the budget are non-Household members (boarders) not ineligible Household members. If children are included in the Household but ineligible (example: due to enumeration) Then the "P" exemption is allowable. Because they have chosen to exclude the child from the SNAP HH they are not eligible for the "P" exemption.

CFR (3) Is a parent (natural, adoptive, or step) of a household member under age 18, even if the household member who is under 18 is not himself eligible for SNAP;

(4) Is residing in a household where a household member is under age 18, even if the household member who is under 18 is not himself eligible for SNAP

62. Have a situation where Household wants to put child in case and to be exempt for ABAWD but no Social Security Number (SSN) for child. We are thinking we can add child to case, but he would not be eligible for benefits. But what about the ABAWD? In past entire case has been closed for no social, is that correct?

Answer: If they otherwise would be included in the same SNAP Household but are ineligible for some reason (like enumeration) they can still have the "P" exemption.

Our SNAP Manual

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H. Refusal to Provide or Apply for a Social Security Number

If the household member(s) refuses to apply for the SSN at the county office, the individual(s) shall be disqualified until the SSN is provided, or until he or she applies for one at the county office. During the disqualification period, the affected member(s) shall be excluded from the household and his/her income and resources, shall be treated in accordance with Chapter 2 under —Treatment of Excluded Household Members in Determining Financial Eligibility|. Exclusion applies only to the individual who is disqualified because he or she refuses to provide/apply for the SSN at the county office, and not to the entire household.

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dependent child under 18 in the SNAP household (P)

if there is a child under 18 in SNAP household. The child does not have to be related to the adult being exempted. (The child must be in the same sequence. The adult can claim this exemption even if the child is not eligible for benefits.)

63. Customer is enrolled in Adult Basic Education classes/GED program, can this qualify them for an 18 on AEIWP which would be a federal exemption and allow them to be exempt from ABAWD with an "S"?

Answer: That exemption would be for individuals who are enrolled at least half-time in a high school or GED.

64. If a person is deemed 30% disability through VA, is this enough to code as D on AEIIT? Is there a % requirement for this to be an ABAWD exemption?

Answer: They are receiving temporary or permanent disability benefits issued by governmental or private sources, they are exempt. The % does not matter.

They are mentally/physically unfit if they:

- Are receiving temporary or permanent disability benefits issued by governmental or private sources OR
- Is obviously mentally or physically unfit for employment OR
- If none of the above they should provide a statement from a physician, physician's assistant, nurse, nurse practitioner, designated representative of the physician's office, a licensed or certified psychologist, a social worker, or any other medical personnel, that he or she is physically or mentally unfit for employment

**However, because they are not 100% the correct exemption code should be M not D.**

65. When should we work the GRP615RA or GRP607RA report to make sure we close or remove all ineligible ABAWDs timely?

Answer: This Info Pac reports typically runs on the weekend PRIOR to the first Monday of the month. You should pull that report and review your case records to ensure that the ABAWD's countable months are correct. You can begin to take action to close/remove anytime during the 3rd countable month through Adverse of the same month.

Follow-Up exactly how should we work this report?

Answer: Working GRP615RA

Each case will need to be reviewed for possible ABAWD exemption.

- If an exemption exists, correct AEIIT with appropriate ABAWD exemption code (correct any prior months that were coded incorrectly). Update CLRC with all action taken.
- If case is not eligible for ABAWD exemption, has received 3 countable months, you will need to update the recurring field on AEIIT with an "X" (ABAWD Ineligible) for all ABAWD ineligible household member(s). If closing the whole case or removing the ABAWD ineligible household member(s) use reason code 654 on AEWAA and use one of the following AENWC statements:

I. As an able-bodied adult you do not meet the work rules. Your case is being closed.

II. (Name of ineligible household member(s)) does not meet the work rules. They are not eligible to receive SNAP benefits. Removing an ABAWD individual with resources, income, or deductions Used all his/her countable months of eligibility and does not meet an exemption is not eligible for SNAP.

- The ABAWD's resources count in full toward the remaining SNAP household.
- The ABAWD'S income and any deductions that he pays are prorated among the household (including the ABAWD) and his/her portion would not be considered in the budget.

NOTE: ACCENT is currently unable to prorate the ABAWD's income or deductions, the eligibility worker will have to do an off-line budget and count the portion of the ABAWD's that goes in the SNAP budget on the appropriate screen. If earned income is counted, it would get the 20% earned income deduction. The eligibility worker will document on CLRC the handling of the income and how the worker came to the amount shown in the budget.

Follow-up: can you provide an example to show how to correctly treat the income?

Answer: Example: Mr. Jones is an ineligible ABAWD. He is currently working 10 hours per week at a job making \$5.00 an hour. His gross monthly income is \$215. The SNAP household includes himself, his wife, and his brother. His income would be divided by 3 (\$215 divided by 3 = \$71.67) and 2/3 of the

money (\$143.32) will be considered in the SNAP budget. The 20% earned income deduction would be applied to \$143.32.

66. Customer's 3rd countable month is this month but their 50th birthday is next month. Do we close them and have them re-apply?

Answer: No you do not close them; the change is known. You can put the "A" in the recurring field on AEIIT.

If you know that eligibility will continue the next month you do not have to close them. This would be covered under maintaining eligibility in the SNAP manual. Chapter 10 (page 73)

67. Can we give an ABAWD a shorter certification period?

Answer: Caseworkers can use their discretion. All cases can be certified for 12 months unless the caseworker determines that a shorter certification is warranted based on the household's circumstances. Cases certified at least 4 months can still be considered simplified reporting households (unless self-employment is the only earned income in the case). Simplified reporting households certified more than 6 months have a 6-month reporting form requirement (other than households whose only adult members are elderly or disabled with no earned income).

68. Has it been discussed, or would it benefit us to certify households with all "C" individuals for only 4 months at application?

Answer: Case workers have always had the right to approve a case for a shorter cert if the case circumstances warranted a shorter cert. If it is an ABAWD only HH and they are only eligible for 3 months, the EC can approve for a shorter cert. Just know that this case is no longer SR if approved for 3 months or less and would have to report ALL changes within 10 days. If they wanted to approve for 4 months or longer and work the report and close after the 3rd countable month, then the case could be SR and would only have to report the SR changes by the 10th day the following month.

69. When are you an ABAWD? Example customer will be 18 in April and another customer will be 50 in April and they have no other exemptions.

Answer: For the 18-year-old they are potentially an ABAWD the month FOLLOWING their 18th birthday. So, they would be an "A" for April and a "C" in May. For the customer turning 50 in April, they are no longer an ABAWD the same month of their birthday. So, they would be an "A" beginning in April.

70. Is ABAWD policy only in effect for certain counties?

Answer: ABAWD policy is always in effect in every county. We should ALWAYS review every individual in the household and code them the most appropriate exemption.

71. If an employer writes a statement, stating that customer is paid \$30 day, working 5 hours a day. Can we take this and exempt them from the time count with a W? This equates to less than minimum wage?

Answer: The amount of money does not matter for ABAWD. If they are working 20 hours a week (regardless of income) they are meeting the work requirement.

72. ABAWD individual applies for SNAP (1-person household only) but he resides with his sister (a non-SNAP household member) who has children under the age of 18. The ABAWD provided a statement from his sister that he lives with his sister and her children as a separate household. The sister does not receive SNAP. Is the

ABAWD eligible for the “p” exemption? In the manual it says “even if the child is not eligible for benefits. Dependent child under 18 in the SNAP household (P) If there is a child under 18 in SNAP household. The child does not have to be related to the adult being exempted. (The child must be in the same sequence. The adult can claim this exemption even if the child is not eligible for benefits.)

Answer: No the applicant isn’t eligible for the P exemption. The child would have to be in the household/sequence with the applicant in order for the applicant to be eligible for the P. Since the applicant’s sister and her child are a separate household the applicant isn’t eligible for the P. The “even if the child is not eligible for benefits” is referring to a child that is in the same household sequence but is for some reason not eligible.

73. I know if a person applies for SSI, it exempts them from E&T, but does it automatically exempt them from ABAWD? What about Social Security benefits that aren’t SSI?

Answer: Yes it exempts them from ABAWD.

One exemption from ABAWD is if they are “otherwise federally exempt from the work requirement”. One of the work requirement exemptions is listed in Federal Regulation 273.7(6) Household members who are applying for SSI and for SNAP under §273.2(k)(1)(i) will have SNAP Program work requirements waived until they are determined eligible for SSI and become exempt from SNAP Program work requirements, or until they are determined ineligible for SSI, at which time their exemptions

Because regulations specifically mention SSI and only SSI, simply applying for other social security benefits would not be enough to exempt them from ABAWD. We would need to default to the ABAWD exemption policy to determine if the person is physically or mentally unfit.

74. If a customer is in a non-waiver county coded C and moves to a waiver county mid-month does the month remain a C?

Answer: According to FNS, if they are exempt for ANY portion of the month, that whole month is exempt. You only code them with a countable month if they are considered countable for the FULL month.

Follow-Up: So are you saying that if they were in a waiver county coded L on July 1st, and moved to a non-waiver county on July 2nd, we would change the L NEXT month to a C because they weren’t countable every day that month?

Answer: Yes

Follow-up: Another question. Is this the same for all exemptions?

Answer: Yes. If they are exempt for ANY portion of the month, the whole month would be exempt. You only code them a C if the FULL month is a countable month.

75. New application, would the EC just look at current month and assume that the prior months were coded correctly unless customer is reporting an exemption?

Answer: You assume the codes are correct unless you learn different. If we learn differently we would need to act on it by updating the codes with the correct information.

If we had someone coded as a C and we later found out they were pregnant for those months, we would need to change any C codes received in error to a Y.

Or if we had someone coded a P and we later found out the children had moved out of the house 2 months ago; we would need to change any of the months coded as a P during that time to a C (if no other exemption exist). CLRC should be clear regarding how months are coded.



76. We have a customer that was an ineligible ABAWD. They came back and were considered expedite. They claimed they were now exempt due to being physically unfit for employment. We approved pending one-month verification. The verification was never provided, and the case closed. They have now re-applied again and are we are in the same situation. They are expedited and we need verification of their unfitness. Do we approve again?

Answer. **No.** This is in Federal Regulations: (iv) There is no limit to the number of times a household can be certified under expedited procedures, **as long as prior to each expedited certification, the household either completes the verification requirements that were postponed at the last expedited certification or was certified under normal processing standards since the last expedited certification.** The provisions of this section shall not apply at recertification if a household reapplies before the end of its current certification period

77. If we have a customer that has moved here from another state do we contact the other state to verify how many ABAWD months have been used in their 36-month clock?

Answer: Yes. Also, you need to ensure you are coding those months in ACCENT and documenting CLRC.

78. What is acceptable volunteer work?

Answer: The V code can be used on AEIIT when the individual is volunteering at/for religious or community organization/events or public/private agencies.

79. Customer has three countable "C" months. Case closed due to ABAWD. Two months later, customer reapplies and is pre-screened expedited. Do we pend the expedited case for verification of an ABAWD exemption/proof of participation with DLWD?

Answer: For expedited cases in which verification is needed for ongoing eligibility, you approve the customer with postponed verification based on the **customer's statement of eligibility** that they are exempt, meeting the ABAWD work requirement, or have otherwise met the criteria of re-gaining and as long as ID has been verified. If ID has been verified, there is no need to hold expedited cases and no need to file a claim if verifications aren't provided and ongoing benefits aren't issued. If verification is provided, ongoing benefits would be based on verification provided. However, the caseworker can deny the case on the **customer's statement of ineligibility**, that they have NOT met the re-gaining eligibility criteria and are not exempt.

80. Is there a time limit for a person to be coded "S?" For example: a person who is working toward their GED. As long as they are attending at least half-time, can we use the S code?

Answer: There is no time limit as long as the customer meets the student criteria.

81. We had a situation in an ABAWD county where we had 3 people in the household. One person worked and paid all the bills. The other 2 individuals had notes that they each do in-kind work for 20 hours per week (running errands, mowing grass, cleaning house in lieu of rent). Can each be coded as in-kind if the note says that is what they do?

Answer: As long as there is verification that confirms customer statement or working 20 hours in lieu of rent we can use it and exempt them from the time count.

82. Do R's count in the 15%?

Answer: No, H is the only code that should be used in the case for 15% cases.

83. In order to use the ABAWD exemption “Q, -Regular participant in residential or non-residential drug or alcohol treatment,” does the customer need to be participating in one of the treatment centers approved by the State of Tennessee, or would AA or other treatment or counseling for drugs or alcohol work?

Answer: Other treatments can work as long as it is verifiable. If you have questions about the validity of the treatment you can contact the SNAP Policy mailbox.

84. When a person who lives in an ABAWD county moves into a non ABAWD county, and they have a “C” on AEIIT, will they auto close? Or is there a safeguard in ACCENT for those type cases?

Answer: If they move from an ABAWD County to a NON-ABAWD county, their AEEIT screen should be updated to an “L” starting the month they moved to the county. This needs to be completed once the case is received in the new county. However, the ABAWD Auto-closure has a safeguard in place to only close cases that are in an ABAWD County at the time the Auto-Closure batch is ran.

85. Does a person completing their internship for school qualify as a student or a volunteer for AEIIT?

Answer: They qualify as a student, use code “S” on AEIIT.

86. How should screen AEIIT and documentation be completed for a customer that works 10 hours as well as volunteers 10 hours? Should AEIIT be completed by coding them as a volunteer for 10 hours with documentation being provided?

Answer: “V” would be more appropriate if the volunteer hours are needed to meet the requirement. “W” needs to be if the customer is working 20 hours per week or if the customer is earning income equal to the federal minimum wage times 30 hours.

87. For ineligible non-citizen, do we use code “N” or “P” on AEIIT when applicable?

Answer: Code “N” is more correct. But, if they have a child, you could use code “P”.

88. The 2-C’s on AEIIT for January and February 2016, are they still countable? The counties had the waiver placed back on them in March 2016.

Answer: Yes, they are still countable because they were a non-waived county during those two months.

89. Does “In-Kind” income go on AEIEI and is it listed with \$0.00?

Answer: If the customer is not receiving any additional income it can be listed on AEIEI as \$0.00.

90. Is there a hierarchy for ABAWD codes? For example if a customer meets more than one exemption is there a specific code that would trump another code?

Answer: If a customer meets more than one exemption, For Example: If there is a customer that has a child under 18, they are working 20 hours a week, and they are a half-time student, any of the applicable codes can be used and should be considered correct. If this same customer also lived in a Labor Surplus county the other exemption codes would need to be used. L should only be used if no other exemption is met.

Follow-Up: if a customer is coded as an exemption, such as “S”, and the case closes, for example for being over income does the caseworker need to change the code to a N?

Answer: We would like the case to be an “N” before they close, but as long as the customer meets the criteria for the code on AEIIT, if it isn’t corrected it should not be an error to leave the “S”.

Follow-Up: What if the reason the customer is leaving SNAP is because they are no longer meet the student criteria?

Answer: Then the “S” code would no longer be a correct code and the AEIIT screen has to be updated.

91. For ABAWD, the training material states you can grant good cause for hours dropping below 20 as long as the customer retains the job, and it was a temporary absence. Is this true for volunteering also?

Answer: The regulations at 273.24(b)(2) also allow us to determine good cause for failure to fulfill the ABAWD work requirement. When an ABAWD has good cause for failure to fulfill the required number of hours in a given month, it does not count toward the time limit.

Good cause applies to situations in which an individual would have normally met the ABAWD work requirement by working (paid, in-kind, or volunteer) or participating in a work program, but does not due to circumstances beyond the individual's control.

In cases where an individual is fulfilling the ABAWD work requirement through participation in SNAP E&T or workfare but fails to meet the 80 hour or workfare requirement in a given month, States would determine good cause under regular SNAP work requirements rather than under ABAWD.

92. We have a mother whose only child has turned 18 but will graduate before his 19th birthday. She has a FF work component; would she still be exempt from ABAWD till he graduates in May or should we change her to an L? If she is still exempt, what code would we use?

Answer: A federal exemption from E&T is an automatic exemption from ABAWD and being subject to FF work requirements would meet the criteria for an exemption.

At this time there is not an identified ABAWD code for this situation. The ‘K’ code can be used. If the K code is used for this purpose update AEFUC with the expected change and thoroughly explain in CLRC that the ‘K’ code is being used at this time due to the parent being eligible for a Federal exemption due to the Families First work component participation. If other codes are also applicable to the case situation, they may be used. Please note that this situation is being addressed further at the SNAP Policy level and more information will follow at a later time.

93. When the counties that were not ABAWD counties before 02/01/18 change over to ABAWD counties, will the L automatically change to a C?

Answer: Yes, cases will auto-change from L to C on AEIIT.

Follow-up: Will cases with 3 C’s auto-close in January to prevent over issuance for February?

Answer: We cannot close cases in these new counties in January since the counties themselves won’t be ABAWD countable counties till February. A negative action notice for ABAWD ineligibility cannot go out in these counties until 2/1/18 or it could create a QC error. In these situations where benefits issue and February would be the 4th countable month, February will be an H. The allowable use of the H code in this situation will prevent an over issuance error. (Make sure all codes are documented in CLRC)

94. Can you clarify what happens when a customer turns in a diagnosis sheet from the medical professional as verification, but nowhere does it say the customer is unfit for work? Can the worker determine that the diagnosis is 'obvious' as being unfit for work and allow the M code on AEIIT?

Answer: If it is obvious that the customer is mentally/physically unfit to work the worker can make that determination. If a doctor's note has been provided it's the case workers responsibility based on the contents of the doctor's note to determine if the customer is unfit for employment, if there are any doctors' notes that the field is unsure about they can be sent to the SNAP Policy Mailbox.

95. For In-kind work are there a required number of hours the applicant/recipient has to work per month?

Answer: For In-kind work the customer still has to work 20 hours per week if that is their only activity they are participating in.

96. After a recipient has received their 3 countable months and reapply and it is determined that they meet an exemption i.e. receiving Unemployment is the code R for re-entry or U for unemployment?

Answer: The applicable exemption code would be used (ex. U for unemployment).

PUN 24.04-17.00 Re-entry R coded months are for when the customers meets re-entry criteria to receive up to 3 additional consecutive months of ABAWD benefits when an exemption isn't applicable. Receiving unemployment is an exemption itself. Please refer also to PUN 24.01-18.00.

97. When it has been verified that customer appealed their SSI decision, is there a timeframe? Meaning if customer appealed it 1 year ago and it is still showing in appeal status, can customer get the exemption code still?

Answer: There is not time frame. As long as it is verified that the customer is still going through the appeals process the customer can receive the exemption and be coded an 'M' because this is a federal exemption.

98. Is transitional living/halfway houses considered drug treatment/facilities for ABAWD purposes? If so, would we then use 15/Q for these individuals?

Answer: A transitional living/halfway house would not be considered a drug treatment facility unless they offered those programs or were authorized by the state as one. However, a halfway and/or transitional housing where customers are responsible for their own food and participate in alcohol or drug treatment or rehabilitation programs are exempt as 15/Q.

Follow-up: If someone is participating in outpatient alcohol or drug treatment while in transitional living/halfway houses/homeless housing either voluntarily or as a requirement to stay there would they be considered exempt from ABAWD?

Answer: Yes. Regular participants in a drug addiction or alcoholic treatment/rehabilitation programs are exempt.

99. If a customer agrees to cooperate with E&T how does the AEIIT screen get updated?

Answer: Each county has a contact that receives updates from DLWD in regard to E & T status. E & T will inform us when the customer is in compliance and AEIT will be updated, if needed. The customer should NOT be coded an 'E' until the customer is fully complying with the 20-hour requirement.

100. What type of verification is needed to give code K? Does it need to be from a doctor, or can it be a written statement from the person being cared for?

Answer: A Doctor's statement is not needed. If verification is needed, it can be a statement from the person being cared for, their family, collateral contacts etc.

Follow-up: Does it have to be 20 hours per week?

Answer: Caring for ill or incapacitated person is an exemption in itself, the amount of time is not needed, just the fact that caring for the individual interferes with them obtaining employment.

101. If a customer has used his/her 3 'C' months and then comes in and says they will work with E&T, do we pend the case for 10 days, or automatically deny it since they are not eligible and then re-run it once E & T verifies compliance. We can't tell them they have to comply first because an application can be filed anytime, but do we allow a pending period?

Answer: We do not pend if it has been determined the individual is ineligible. We only pend if the customer states they are eligible and need time to provide verification of such. We do not do E & T referrals on closed SNAP cases because the customer must be SNAP eligible to be referred. If they are not currently participating and are not otherwise eligible, the case would be denied. The case would not be re-run and approved after an eligibility denial unless there is a new application. The customer can however do their own activity. That can include going to DLWD and enrolling in an approved component.

102. When the customer's case is closed and they are coded 'N', do we need to indicate when they worked to gain eligibility for the 'R' code on AEIT?

Answer: No, you do not have to indicate it on AEIT. You can document in CLRC the justification for the 'R' code.

103. Do ABAWD cases auto-close after they get their three 'C's or do alerts need to be worked and do certifications need to be shortened?

Answer: There is an auto-closure process, however, there are some exceptions and not all cases will auto-close. It is extremely important to work all ABAWD reports and alerts. For the certification period, we provide a 12-month certification unless the worker deems it appropriate to provide a shorter one due to case circumstances. Justification of a shorter certification will need to be provided in CLRC.

104. If a customer moves from another state and the other state verifies that the customer used their 3 countable months and the customer does not meet an ABAWD exemption, is the customer eligible for SNAP?

Answer: AEIT would be coded "B" for months in which it has been verified that the customers received countable months in another state. If the customer has already used all ABAWD months in another

state and applies in Tennessee and there is no other exemption that the customer meets, the customer would not be eligible in Tennessee until ABAWD compliance is met.

105. What is the best code to use for customer's participating in AmeriCorps?

Answer: "V" for volunteering because it is a volunteer program.

106. Can the Department of Labor and Workforce Development (DLWD) provide a written statement that a customer is complying with their 20-hour work requirement for non-SNAP participants for ABAWD purposes?

Answer: No. The Department of Labor and Workforce Development (DLWD) will not provide proof of activity for non-SNAP participants; however, the participant can print off their activities through their account in Jobs4tn.gov.

107. When the ABAWD Mass Auto-Closure runs do the customers that were registered for E&T become deregistered?

Answer: See below from [PUN: Synopsis of ACCENT Enhancements for SNAP ABAWD \(Able Bodied Adults Without Dependents\) Processing – ABAWD Mass Change Process](#) "For ABAWD-ineligible individuals who have previously been referred to the Department of Labor, ACCENT will update the Food Stamp "WORK PROGRAMS" (AEIWP) screen and deregister the individual. ACCENT will update the "Deregistration Date" on AEIWP to the run date of the mass change and will update the "Deregistration Status" to "38 – DEREGISTRATION – ABAWD NON-COMPLIANT." The individual will be sent on the interface file as a de-registration to the Department of Labor on the night of the ABAWD mass change."

108. If a case closes for ABAWD ineligibility and they later reapply but do not complete the interview and if we have an active case number that has not yet been sent to closed files, when we run the driver to deny do we need to make the recurring month 'N' so that the 654 code doesn't populate since we have not completed an interview to determine their ABAWD status?

Answer: Yes 'N' would be the most applicable code because they would not be receiving benefits because they did not complete their interview. Additionally, that will prevent an incorrect notice from going out because their ABAWD status has not been determined.

109. Do the ABAWD and E & T handouts need to be provided to the customer during their interview?

Answer: Yes, ABAWD and E & T handouts are required to be given in writing and discussed verbally at each intake and recertification. If worker is conducting a telephone interview these need to be mailed to the customers.

110. Is there a report that can be checked to determine when an alert has been received and worked to know when the office became aware of a customer's possible ABAWD exemption? For example, if a customer is approved for Unemployment Compensation is there a way to verify the date the county received and worked the alert?

Answer: Yes, the GDE321RA report can be used to verify the date the alert was received and worked. You can only do a search through 50,000 lines on an Info Pac report, so it is important to search within the county.

111. An ABAWD auto closed in 01/2018 with an effective date of 01/31/2018. The customer contacts us on 02/12/2018 to request a referral to Employment and Training as a way to satisfy the work requirement. What action should be taken on this case?

Answer: A referral should not be sent on a closed case. The customer may go to the Department of Labor and Workforce Development on their own to try to meet the hours needed to qualify for ABAWD re-entry. If the customer has participated long enough in a qualifying activity to re-gain eligibility, they can re-apply and be determined eligible at that time.

112. If a customer has used the original three countable months in the 36-month period, has regained eligibility by meeting ABAWD work requirements in any 30 consecutive day period for 80 hours or more and subsequently loses employment or stops working or participating in training or a work experience program, the individual is eligible for up to three consecutive months (beginning the date the county is notified that work activity has ended). Once initiated, this three-month period must be consecutive. The individual is only eligible for one consecutive three-month period during the 36 months. when does the first 'R' re-entry month start?

Answer: Previously the 'R' months would begin immediately upon eligibility. Now the first re-entry 'R' month would start the first full countable month the customer receives benefits, and the prorated month would be coded a '0'. **This process has changed due to a clarification provided by USDA-FNS National Office.**

113. Can court ordered community service hours count as volunteer hours for ABAWD?

Answer: The court ordered community service would be considered work in exchange for goods and services and be considered In-Kind Work. The customer would be coded an "I" on AEIIT.

114. Is there an ABAWD exemption for customer's that are on house arrest?

Answer: No, there is not an exemption for a customer being on house arrest and the months would be countable unless the customer meets an approved exemption or participates in a 20-hour work activity.

115. If expedited SNAP benefits are authorized with an "R" on AEIIT, but we do not get verifications for the "R" code and the SNAP auto-closes. Would the customer be eligible for any "R" months for the rest of the thirty-six (36) month ABAWD cycle or not?

Answer: No. Customer statement can be accepted as verification for the "R" code to be used for the first expedited issuance. Customers are potentially eligible for up to three (3) "R" months and they must be consecutive, otherwise, they are not eligible for "R" for the rest of the 36 months.

Follow-up: Would eligibility counselor need to approve the customer using a different code for the expedited approval pending receipt of the verifications? If so, which code?

Answer: If the customer applies on the first of the month “R” would be used based on their statement. Ongoing benefits would need to be verified. A prorated application month would be “O” followed by “R” if there is additional expedited issuance period.

The expedited issuance would be either the month of application or month of application and following depending on the timing of application. Verification would be needed for benefits to continue beyond the expedited benefits. If verification is not provided the case should be closed and the customer would not be eligible for another “R” period unless it is later actually determined they did not meet the “R” criteria.

116. If a customer was approved for unemployment and then the unemployment stopped for failure to register for work, but now they are appealing, are they still considered a “U” on AEIIT?

Answer: The customer is considered non-compliant with the Tennessee Department of Labor and Workforce Development. The customer would no longer be exempt from ABAWD using “U” due to the appeal. Other exemptions should be explored at this time.

The customer can receive the “U” if the customer has applied for, but is not yet receiving, unemployment or if the person is receiving unemployment compensation/complying with work requirements that are part of the Federal-State unemployment compensation application process.

117. If a customer is required to register for work with TDLWD when they apply for unemployment compensation, and we verify with the customer that they registered for work with TDLWD, would they be exempt from ABAWD?

Answer: Yes, as long as they are complying with TDLWD they are eligible as a “U” on AEIIT.

118. An individual applied on 05/01/2019. May 2019 was her 3rd countable month. The eligibility counselor approved the case as expedited on the day of application. ABAWD policy was explained, the individual did not claim any exemption. The eligibility counselor went in on 05/06/2019 and coded customer as an “X” ongoing. The SNAP case was closed. The customer has now brought in a statement from her father stating she does 20 hours of in-kind work per week. Does the customer need to file a new application, or can we use the one filed on 05/01/2019?

Answer: A new application would be required to determine eligibility since the application filed on 5/01/2019 has been completed and the customer received a correct closure notice at the time of the closure.

119. Customer received his 3 C’s: January, February, and March. Customer then reported he was working and was given a W code for April, May, and June. Customer reported in July that he is no longer working, and we cannot locate an exemption for him. Does re-entry come in to play at this time or is customer an X since he has used his 3 C’s this 36-month period?

Answer: If the customer has met the ABAWD requirement by completing the work requirement for 30 consecutive days, then the customer will be eligible for 3 R (re-entry) months. The customer’s benefits do not have to be closed or suspended in order to receive R (re-entry) months. Below are PUNs that may provide additional info.



120. In regard to the Census Income Waiver PUN, census income is excluded for SNAP. Could you clarify whether the hours worked would count towards the ABAWD work requirement?

Answer: The customer's hours while employed through the Census Bureau would count towards the hours for the ABAWD work requirement. It would be sufficient to code them as a 'W' on AEIIT if they are working over the required hours as a temporary Census Worker.

## ALLOTMENT

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1. When a customer applies for SNAP with a prorated amount under \$10, ACCENT will not issue the prorated amount. Are we supposed to issue an auxiliary for the prorated amount under \$10?

Answer: If the prorated amount is less than \$10 for an initial application, the customer is entitled to no benefits. I have copied the policy below for your review.

1240-1-4-.22(2)

(a) General Information

Initial month means the first month for which the household is certified for SNAP following any period during which the household was not certified.

All household's initial month's benefits are subject to proration and such benefits are based on the households' application date.

Using the calendar month, households' initial month's benefits are prorated from the application date to the end of the month.

**When initial month's benefits (before or after proration) are less than \$10.00, the household will receive no benefits for that month.**

2. We have a case reviewed by the QA unit and have a question about it. The customer passes gross and net income but 30% of the net income is over the allotment amount. ACCENT approved him for a \$15 allotment. He is not categorically eligible and after reading the manual section on budgeting I'm still not sure if he is eligible for the \$15. The ACCENT Help desk said it looks at gross, net, categorical then at the allotment amount and suggested we contact the SNAP unit for rule number. Our question is does ACCENT calculate this correctly by approving him for the \$15 allotment? If so, is that in the manual and we just missed it?

Answer: I realize the terminology regarding "coupons" etc. is outdated but I was able to find in Federal Regulations that 1 and 2 person households that pass all eligibility requirements would be eligible for ongoing benefits. The one-person household in question passed gross and net income limits and technical eligibility requirements and would therefore be eligible for at least the minimum allotment based on the information below.

**§ 273.10 Determining household eligibility and benefit levels.**

**(e) Calculating net income and benefit levels**

B) If the calculation of benefits in accordance with paragraph (e)(2)(ii)(A) of this section for an initial month would yield an allotment of less than \$10 for the household, no benefits shall be issued to the household for the initial month.

(C) Except during an initial month, all eligible one- and two-person households shall receive minimum monthly allotments equal to the minimum benefit

(iii) For an eligible household with three or more members which is entitled to no benefits (except because of the proration requirements of paragraph (a)(1) and the provision precluding issuances of less than \$10 in an initial month of paragraph (e)(2)(ii)(B)) of this section:

(A) The State agency shall deny the household's application on the grounds that its net income exceeds the level at which benefits are issued; or.....etc. etc. etc.

The Categorically eligible part would come into play if he was over net. Individuals that are over net may receive an allotment based on being categorically eligible based on:

1240.1-.14-.15(5)

Because the CE households are exempt from the net income limits, the Basis of Issuance (BOI) chart cannot be used for CE households whose net income exceeds the net income limit for the corresponding household size. Use the following procedures to determine the allotment.

- a) Determine the household's net income based on normal SNAP policy.
- b) Use the BOI chart to determine the allotment for households whose net income is at or below the net income limit for other SNAP households of the same size.
- c) When the household's net income is over the net income limit for other SNAP households of the same size, no allotment will appear in the BOI. Determine the allotment for such households as follows:

1. Provide a \$15 allotment for all such one-and two-person CE households.
2. Use the following formula to determine the allotment for such CE households with more than two members:

multiply the household's net income by .30 (30%), and round this amount up to the nearest dollar

subtract the rounded 30% figure from the Thrifty Food Plan amount for the appropriate household size. The result is the household's allotment.

If the formula results in a zero allotment, the household is not eligible for benefits. Deny the household's application (or terminate benefits for active households).

3. What is the minimum monthly allotment that can be issued to a customer? Initial? Recurring? Supplement? Does the minimum also apply to household size larger than 2 person HH?

Answer: \$10 minimum is for all HH sizes in regard to the initial allotment, meaning if HH is eligible for less than \$10 in their initial month, they will NOT receive an allotment for that month.

ACCENT will release benefits less than \$10 for recurring months after the initial month.

ACCENT will release supplements and replacements in any amount.

The \$15 minimum is for regular 1 and 2 person that pass the net income.

The \$15 minimum is also for categorically eligible 1 and 2 person households regardless of gross or net income limits.

The \$15 minimum does not apply to regular or CE households of 3 or more.

4. Father receives SSI and has a drug felony. The SSI and FF grant is the household's only income. The worker calculated the budget manually and used the online calculator, and it shows HH is not eligible for SNAP. Since the father receives SSI, should they be entitled to the minimum SNAP allotment?

Answer: No, they are not entitled to the minimum allotment. Households consisting entirely of Supplemental Security Income (SSI) and/or Families First (FF) recipients are categorically eligible (CE) for SNAP. **However, if any member of the HH is ineligible due to a drug-related felony, they are not considered CE.**

5. We have a 3 person HH that should be categorically eligible, but ACCENT is not giving customer the \$15 allotment. The Help Desk said to have my FS1 email the SNAP Policy unit to get a clearance to get the fiat approved to release the funds.

ANSWER: For this specific case, they are not eligible for SNAP benefits.

Use the following formula to determine the allotment for such CE households with more than two members:

- multiply the households net income by .30 (30%), and round this amount up to the nearest dollar;
- subtract the rounded 30% figure from the Thrifty Food Plan amount for the appropriate household size. The result is the household's allotment.
- **If the formula results in a zero allotment, the household is not eligible for benefits.** Deny the households application (or terminate benefits for active households).

3 person HH has a TFP of	505.00
This case has a 30% net adjusted income of	613.20

6. I am working a case that has a 2-person household, mother, and child, they have the following incomes: Mother has SSI of \$26.00, SS disability of \$727.00, the daughter has SS income of \$13.00 and the mother also has self-employment income of \$800.00 that started in January 2015 and ended March 2015. Would this household be considered categorically eligible? In review of the policy manual under defining Categorically Eligible, it states (a) Households consisting entirely of Supplemental Security Income and or Families First recipients are categorically eligible. The ACCENT system issued the household \$15.00. Is this correct? Does the system issue the \$15.00 because the mother is considered disabled?

ANSWER: This HH is categorically eligible (CE). Households consisting entirely of Supplemental Security Income and or Families First recipients. Every member in the HH has to be a recipient of SSI and/or FF. This case meets that policy. The adult is receiving SSI and the child is receiving FF. This is a HH consisting entirely of Supplemental Security Income and or Families First recipients. These recipients can have other income as well, but every member must be receiving SSI and/or FF to be CE. ACCENT is correct to issue \$15.00.

7. If benefits are released on BIFS and the whole amount has been recouped in error is there something we can do to get this corrected?

ANSWER: If an auxiliary/restoration is issued in error on BIFS on a case with a recoupment and overnight processing has occurred, Rick Reese at [Rick.Reese@tn.gov](mailto:Rick.Reese@tn.gov) in Fiscal Services can back the restoration off of the claim so the county can issue a supplement on BISF instead.

8. HH of two and one person is elderly. Our screen shows \$5 in excess medical deductions and \$1 in excess shelter deductions with a net income of \$1393. Is the HH subject to the net income test? It seems according to the Basis of Issuance Chart that this HH of 2 would receive \$15.

ANSWER: In order for you to not have to meet the gross and net income standard you would be "CATEGORICALLY ELIGIBLE" (CE). According to SNAP policy, in order to be CE you must meet the below guidelines.

(CE)=Households consisting entirely of Supplemental Security Income (SSI) and/or Families First (FF) recipients. Consider individuals as SSI or FF recipients when they are:

- receiving a Families First or Supplemental Security Income cash assistance; or
- eligible for FF or SSI payments, but the payments are being recouped or suspended; or
- approved for FF, but do not receive a payment because the grant amount is less than \$10.

To explain this a little better, the daughter and the mother must both be receiving SSI and/or FF cash. From what I can see, the daughter is receiving SSI, but the mother is receiving SSA not SSI and neither are receiving Families First. This Household is not CE and therefore must pass the income standard. Since they are over the net income of \$1,372 they are not eligible.

9. I have a customer that is eligible for \$15.00. Their benefits are being recouped by \$10 so they are only going to receive \$5.00 a month in SNAP benefits. ACCENT won't release benefits less than \$10.00, correct?

ANSWER: If the prorated amount is less than \$10 for an initial application, the customer is not eligible for any benefits or an auxiliary. Ongoing benefits, replacements, and supplements will issue for \$10 or less.

10. In regard to manual issuances, I understand we cannot issue SNAP benefits for an initial application in which the monthly allotment or prorated amount is less than \$10. In reading cases as well as the recent May Q&A findings issued today, I have found an issue I need to resolve in our district.

- SR is not returned by 02-10-15.
- Benefits are suspended 03-2015.
- Customer reapplies 03-30-15. He is reapproved for \$194 ongoing, however the prorated amount will be \$6.00 eff. 03-30-15.
- BISF is requested for \$6.00

Question: Would we issue the \$6.00?

ANSWER: If their benefits are closed and they re-apply it is considered a new application and benefits should not be sent if they are less than \$10.00.

11. Do you have a website that does offline SNAP issuance calculations?

ANSWER: Both the proration and budget calculator are on the [Toolbox](#)

SNAP calculator <http://calculator.dhs.tn.gov/>

SNAP Proration calculator <http://prorate.dhs.tn.gov/>

12. We are seeking clearance/input on the method in which continuation of benefits (COB) is completed on the FF program when both FF sanction and SNAP penalty are involved. That is, in instances where we have an FF appeal only and the removal of the FF sanction also ends the SNAP penalty which increases the SNAP benefits. Should a fiat be completed to hold the SNAP benefits at the penalty level, or should the SNAP

benefits be issued at the level increased by the removal of the sanction? What are your thoughts on how this should be handled?

ANSWER: Snap benefits should be corrected ongoing. There is no need to go back and make any adjustments to SNAP benefits unless the appeal states otherwise. A fiat should not be completed. As FF benefits change, the SNAP allotment should show the change in benefits.

Follow-up: FF appeal only: If the FF appeal is withdrawn or DHS wins the appeal, then a Claim referral is completed on the FF COB-benefits and currently no SNAP claim referral is made for the increased amount received with the FF-COB. (Unless the Order states to take an action)

Answer: Correct

Follow-Up: FF appeal only: If the appellant wins the appeal, then the Order Implementation address the FF benefits that should have been received due to the improper sanction; however, the SNAP benefits are not addressed as there is not a SNAP appeal (Note: there has been instances where the Order speaks to both programs regardless of the lack of the appeal on the SNAP and they are implemented as instructed)

Answer: Correct

13. In regard to the Emergency Allotment and initial prorated amounts less than \$10. If household is eligible for a prorated amount for \$10 or under, will they be issued the Emergency Allotments (EA)?

Answer: Yes. As long as there is an issuance amount showing in ACCENT for the initial prorated month and it does not show a \$0 amount for the initial month, the Emergency Allotment will be issued. These cases are reviewed manually, therefore the EA's will not be issued immediately.

## APPLICATION PROCESSING

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1. Is the Federal Regulation below stating that as far as verifications are concerned that the case would be treated as though they are re-certifying, or would cases that reapply after their certification has ended but within 30 days be required to provide verifications that are required at intake?

### § 273.14: Recertification

#### (e) Delayed processing.

3) If a household files an application within 30 days after the end of the certification period, the application shall be considered an application for recertification; however, benefits must be prorated in accordance with §273.10(a).

Answer: The case would be treated as if they are recertifying except for the proration. Verification requirements at 273.2(f)(8)(i) would apply (these are the requirements for recertification).

Follow up: We have a question in regard to the regulation listed.

Does this apply any time someone's certification ends for any reason? Example: If someone's certification ends early for failure to provide their 6-month reporting form or for failure to provide verification of a change etc.

Answer: Yes, this policy applies regardless of the closure reason. However, state computer systems may require you to handle it differently from the system side, but to the customer it remains a recertification and not a new application within those first 30 days.

2. Can a SR form be used as a reapplication? What are procedures for releasing benefits?

Answer: No. Bulletin No. 27 [FA-11-16](#) addresses the procedure used to release benefits.

3. Can you explain how an application filed within 30 days of closure is treated?

Answer: The re-application is to be treated like an application for timeliness standards and in-regard to proration of benefits.

The re-application is to be treated like a recertification in regard to verifications required. Verifications required are those that are required for timely and untimely recertifications.

4. Why is the FASC stating that a HH has a right to a full month of benefits if this has occurred?

Recert Application received March 17<sup>th</sup>

Interview date March 19<sup>th</sup>— (missed interview)

Called the FASC April 2<sup>nd</sup> to reschedule.

The understanding from the FS1 is that they would only be eligible from the date they contacted the FASC.

Answer: They would be eligible for benefits based on the date of application that is still within 30 days.

5. When an application is denied because the household is not eligible for the month of application due to income, resources, or receipt of benefits in another state, but is eligible for benefits the following month can this same application be used to approve for the following month or is another application required?

Answer: One application is all that is needed if eligibility for ongoing month is known at the time of the decision. If the customer has been determined ineligible ongoing and later there is a change, the customer would need to reapply.

6. A customer applies for benefits during the month of their 22<sup>nd</sup> birthday and wants to be a separate HH from their parents. Based on the policy below are they not eligible for benefits until the next month or could they receive prorated benefits beginning with the day they turn 22 if they applied on or before their 22<sup>nd</sup> birthday?

Answer: FNS clarified that they may be eligible as of their 22<sup>nd</sup> birthday unless already active in a case.

7. We know on an application, if we request verifications at the interview, we must give them a full 10 days to provide the verification before we act, even if the application 30 days comes due prior to that.

What about a renewal? Are we still required to give them the full 10 days to provide the verification from the interview?

Answer: They must be given the full 10 days.

Federal Regulations 273.14 (b) Recertification Process (4) Verification. Information provided by the household shall be verified in accordance with §273.2(f)(8)(i). The State agency shall provide the household a notice of required verification as provided in §273.2(c)(5) and notify the household of the date by which the verification requirements must be satisfied. The household must be allowed a minimum of 10 days to provide required verification information. Any household whose eligibility is not determined by the end of its current certification period due to the time period allowed for submitting any missing verification shall receive an opportunity to participate, if eligible, within 5 working days after the household submits the missing verification and benefits cannot be prorated.

8. When an application is denied after being provided at least 10 days from written request to provide verification does the worker have to explain in the denial notice that if verifications are received within 30 days of the date of application that a new application is not required and benefits will be provided from the date of current application?

Answer: **Important update from USDA, March 31, 2014.**

The notice of Denial provided to impacted households MUST contain clear language notifying the customer as to:

1. Why their application was denied, and that
2. Their application will be reopened **if the required verification** is received within 30 days of the date of application and, if eligible, benefits will be provided from the date of application.

9. I am trying to clarify the situation below. The renewal application was received 05/19 for a June renewal. The verifications were not received, and application denied on 06/20. Is this action considered untimely because the application is over 30 days old or is it considered timely because it was a June renewal, and we gave them 10 days to provide and denied before the end of the month?

Answer: This was timely if it was a June recertification. Since the re-application was received prior to June for a June recertification the tracking would be from June 1st and they were given 10 days and denied by the end of the month.

10. We received a picture of an application via email. Is this an acceptable application?

Answer: Yes, according to federal regulation this would be considered an electronic transmission and we can accept an application in this form as long as you can see the applicant's name, address, and signature.

11. Application filed 10/17 and HH was over income limit for month of application but will be eligible starting 11/1. Do you start the certification period count based on the application date or sign date?

Answer: In your scenario the certification count would begin in November and end in October. The ineligible month does not count.

12. Application filed 9/17 for an October renewal. Customer failed to complete the October renewal, but contacts the county office on 11/19. If we look at the application date of 9/17, then the application is over 60 days and customer would have to file a new application. If we look at the application date as 10/1 (since this is the date that we key on AEFPY) the customer would be in the 2nd 30 days for application and would not have to file a new application.

Answer: The sign date for a recert is the date of the renewal application except when the application for renewal is received the month prior to the renewal month then the application sign date will be the first day of the renewal month. In your scenario, the correct date to base the 60 days off of is the sign date of 10/1.

13. When a SNAP application is approved for ongoing benefits and following the approval the customer reports a change. A notice is mailed, and the customer fails to respond to the notice and the case is closed on the 11th day. Following the closure, the customer does provide the verifications which is after 30 days but between the 31st and 60th day. My question is can we re-open benefits signing on AEFPY the date the verifications were provided since this was a verification closure with an application filed within the last 60 days or is a new application required?

ANSWER: If an application is approved (not postponed verification) then that application is complete because an eligibility decision has been made. If they come back later and report a change, then you would work that as a change. The application date has no bearing on the change. You give the customer at least 10 days to provide the requested required information. If the information is not provided, you close the case after the 10th day and a new application would be required.

Follow-up Question: If the application is denied for failure to provide the verifications and the verifications are returned between the 31st and 60th day is a new application still required or can we sign the date the verifications are provided? Just want to be sure if the same policy applies for both approvals and denials.

ANSWER: If the application is denied for failure to provide requested verifications and they provide later, you approve with the date they provide if provided day 31-60.

14. Customer mails in their application on 01/28 for their February renewal. Their scheduled appointment is Feb. 6th. On Feb 6th, 2 phone attempts are made to the customer but unable to contact. On Feb 24th, customer calls and reschedules. New appointment set for Feb 25th. On Feb. 25th customer is interviewed. Since this is an untimely renewal now, would it be proper to use 2/25 as the sign date on AEFPY especially if we must pend the case for mandatory verifications and give them 10 days to return? This would show as overdue on renewal data otherwise.

ANSWER: Sign date is still 2/1. Recertification applications received by the 15th that don't receive an approval or denial by the end of the month will show overdue on the GRP307RA, but we must not deny them without giving them time to provide verification-even if the delay is caused by them. As long as the verifications are provided within 10 days of request the application sign date (2/1) would be protected even if this causes the case to go beyond 30 days.

15. Looking at the Q & A we got and talking with my front desk staff I am noticing a little break down in reference to the 60-day application process. It is my understanding that the 60-day process applies to intake and renewal applications, correct?

ANSWER: This is correct

FOLLOW-UP: So, if we have a good denial on case, for something other than no show or lack of verification, which considers all verifications and information rec'd than it stands and a new application or appeal is needed, right?

ANSWER: This is correct.

FOLLOW-UP: If we deny case because requested verification was not received then customer still has the opportunity to provide verification as long as they do it before the 60 days expire, right?

ANSWER: Correct, if application/reapplication is denied for failure to verify or if expedited approved with outstanding verifications needed and benefits ended for failure to provide outstanding verification.

16. When processing an application and the customer was in foster care (children ages 18 – 24 per Bulletin 42 – FA 09-21 Services for youth aging out of Foster Care) we are to direct them to a website. That WEB page does not exist. Is there an updated link available?

ANSWER: DCS provided us with this updated link:

<https://www.tn.gov/dcs/program-areas/youth-in-transition.html> and for young people to inquire about potential eligibility for benefits from DCS they can use the following referral <https://www.tn.gov/dcs/program-areas/youth-in-transition/il/contact-us.html>

17. QA called this case in error. This application was denied before the 30th day but after the 11th day after request for verification. Would this actually be untimely?



ANSWER: We MAY deny early, but we don't have to. The application should be considered timely if action to deny for lack of verification is taken after 10 days but by 30th day.

FNS wording of our early denial waiver states:

“Under the waiver, State agencies may deny an application if the applicant fails to provide verification within 10 days of the state agency's request. However, the customer still has the right to provide the information by the 30th day and if she or he does so, the application must not be denied”

18. Customer originally denied assistance in getting the required verification for her application. She called yesterday and requested assistance. Her 60th will be soon. Is she eligible to have an extension?

ANSWER: When the application is 60 days old and we still do not have all of the information needed to determine eligibility, we deny the application (if it hasn't already been denied) regardless if it is our fault or the customer's fault for the delay.

SNAP Manual.

(5) Delays Beyond 60 Days

(a) County Caused Delay - All Information Received

If the county is at fault for not completing the application process by the end of the second thirty-day period, and all the information necessary to complete the application has been received, the caseworker must continue to process the original application until an eligibility determination is made. ♦ If the household is determined eligible and the county was at fault for the delay in the initial 30 days, the household must receive its initial benefits retroactive to the day of the month it applied for benefits.

(b) County Caused Delay - Information Incomplete

If the county is at fault for not completing the application process by the end of the second 30-day period (60 days) but the case is not complete enough to reach an eligibility determination, the caseworker should deny the case and notify the household to file a new application unless the original application can be processed immediately, and the household notified of the action that will be taken.

(c) Household Caused Delay in Second Thirty Days

If the household is at fault for not completing the application process by the end of the second 30-day period, the caseworker shall deny the application and require the household to file a new application if it wishes to participate.

19. Is there a difference in how to handle the 11th day depending on whether or not it is an application being processed or a change reported during the certification period?

ANSWER: When we request verifications (regardless if application or change) we have to allow the customer AT LEAST 10 days. We can deny after the 10th day. For an application they actually have until the normal application processing timeframes to provide (30days/60days). For a change once closure action was taken, if we were correct in our action they must re-apply.

Follow-up: If it is an application being processed and you need verifications to finish, you give the customer 10 days to turn in verifications (offer assistance; give them a self-addressed stamped envelope, document CLRC, etc.). If on day 11, you do not have the verifications, you deny the case. Technically, you have from day 11 to day 30 to do this, right?

ANSWER: Yes. QC will consider it timely day 11 through 30. It is also considered timely if the case is properly pending on day 30 while allowing the customer 10 days to provide and timely denied after they have had 10 days.

20. When processing a recertification and we do not have an application; do we have to run the case and deny with reason code 495 to generate a notice to the customer?

ANSWER: No, they do not get an additional notice if they do not provide an application. They have already received their notice when they get the CS05-C4 (APPOINTMENT-RECERT/REVIEW - SNAP EXPIRATION). It states:

**IF YOU GET FOOD STAMPS:**

**YOUR FOOD STAMP APPROVAL PERIOD WILL END ON 12/15/2027.**

You must complete a new application and be interviewed if you want to keep getting Food Stamps.

This acts as their notice or expiration and their appointment notice.

Follow-Up: But if we have an application, we have to deny with reason code 495 if they miss their appointment?

ANSWER: Yes. The application must be processed and denied with proper reason code, 495.

21. If we have someone who was closed for refusal to co-operate with QC review, and they reapply, what is the process for them to clear that issue? Is there a particular contact person?

ANSWER: Once benefits are terminated due to refusal, when the customer reapplies, once the interview has been completed and the customer wants to cooperate now, field staff would contact the QC supervisor. You would hold the case pending until the customer cooperates; QC will email the county when this has been resolved and it is okay to authorize benefits.

Follow-up: When a household reapplies, how will staff know the case was closed due to non-coop with a QC review?

Answer: When a household is closed for refusal to co-operate with QC review, staff will document the case notes and the expected change screen (AEFEC) so if the household reapplies, field staff will see the screen and know to contact QC.

22. When we receive a renewal the month prior to the renewal month, sometimes we call the customer and interview them early. Example: August Renewal received July 20th. Interview is completed July 20th. Our question is if we request verification when is the 10<sup>th</sup> day?

ANSWER: As long as when we contact the customer, they are consenting to doing the interview early, the due date for any verification will be 10 days from request. As long as you are allowing AT LEAST 10 days, you're good.

However, I'm not sure what ACCENT will let you do. The sign date on AEFY will be Aug 1<sup>st</sup>....so it may not let you deny prior to that date. So if you did happen to interview someone on July 20.... You may not be able to deny till Aug 1<sup>st</sup>, which is still ok because we have to allow AT least 10 days and we did. According to federal regulations CFR 273.14 Recertification states

e) *Delayed processing.* (2) If a household files an application before the end of the certification period, but fails to take a required action, the State agency may deny the case at that time, at the end of the certification period, or at the end of 30 days.

23. On the ME review, one of the things noted for program access was a customer she interviewed who said he was not aware a phone interview as an option. The review says, "ensure customers are aware of phone interview option." We do phone interviews on all renewals. On intake, we do them face to face unless the

person requests a phone interview for some reason. If they request it, we do it. But, otherwise, intake is scheduled face to face in this county.

Is it a requirement to OFFER a phone interview when the application appointment is scheduled? I know we have to do one if they request one. But we do not tell every customer at intake that they can do a phone interview if they want to.

ANSWER: Tennessee has been operating under the state option to waive the face-to-face requirement. In lieu of the face-to-face interview, either at initial certification or at recertification, interviews are conducted by telephone, although we can still conduct a face-to-face interview if it is deemed appropriate (they don't have a phone) or if the customer request one. Due to this option, please schedule initial and recertification appointments as telephone interviews unless the customer requests otherwise.

24. I understand that if we have more than one code on the customer notice and 2 codes are correct and 1 code is wrong that it this is still a QC error. I thought someone said during the meeting that we should only use 1 reason code that we knew was correct, but I thought we are supposed to use all applicable reason codes-for example if someone reports income from a new job and a HH member had moved out we needed to use both codes. Is this correct?

ANSWER: According to Quality Control, they only review the listed reason code and worker comments. If both are correct, then we are good. Keep in mind less is more... in your example if someone reports income from a new job and a household member had moved you can use either of the correct codes you do not have to use all applicable reason codes.

25. Due to some confusion on application processing in our mist; I have tried to locate a good clearance, but no luck. Does the count for an application start the \*day of\* or is \*day 1 the next day\* in determining 30-day count?

Answer: Day 1 is the day following the application date.

Here is the application tracking guide that is located on the toolbox. It lets you know when an application is due.

[SNAP Application Processing Guide](#)

EX: If you have an application dated 10.01 day one begins on 10.02 and the 30th day is 10.31.

26. Customer currently has one active program [SNAP] and renewal is May. Customer applied for TANF the previous December. Is there a policy, procedure, or practice that mandates the worker to offer customer an early renewal?

Answer: For SNAP: Yes, we should always offer the customer a chance to review early when applying for other benefits. This is beneficial for the customer and the EC. Please refer to Chapter 31 of the July 2017 SNAP Policy manual page 191 under Special Circumstances.

Follow-Up: What should review date be? If it follows SNAP, it may allow the FF to be longer than 12 months.

Answer: When AEORE is used to process a SNAP renewal and initial Families First application, ACCENT sets the recertification date based upon the earliest sign date of all case assistance units. Therefore, SNAP is certified for 12 months and Families First is certified for 13 months. It has been determined to allow a 13-month certification period for FF, in order to accommodate Simplified Reporting for SNAP. Please refer to AIA 11-05, SNAP Simplified Reporting Clarifications dated July 13, 2011 for directions.

27. I heard that applications for SNAP must include a Social Security number, is this true?

Answer: An application is considered to be valid if it contains name, address, and signature.

28. When processing a renewal application, should the worker use a code other than 091 if there is a change in the case? For example, during the renewal, an increase in rent results in the SNAP benefits increasing. Should the worker use a specific code for that situation? If there is no change to the renewal case, should the worker use the 052 code? Should the 091 code only be used for intake approvals?

Answer: 091 is an appropriate code for renewals or intakes that are being approved. (091 Your aid group meets all the rules.)

29. If a SNAP case is open until 3/31, and the AG reapplies 3/02, and they are reapplying for SNAP shouldn't the sign date be 4/01? I don't understand why the AEFY date is during the month, they are currently receiving benefits.

Answer: The sign date for reviews is the date of renewal application unless the renewal application is received the month prior to the recertification month for a renewal month appointment, then the sign date is the 1st day of the review month.

Example:

March Renewal: Application received 02/27 sign date = 03/1

March Renewal: Application received 03/02 sign date= 03/02

March is the renewal/review/recertification month. The new certification will begin in April.

30. Question: Should QA call cases untimely if we are allowing the customer the required time to provide verifications?

Answer: QA should not cite a case as untimely for customer caused delays. Cases may show up as untimely on reports, but they should not be cited as untimely, if the case was properly pended and followed up on as required by policy. QC will call a renewal as untimely if a reapplication is filed by the last day of the renewal month and benefits aren't received on their normal issuance date the next month.

Here is an application processing guide on the toolbox:

[SNAP Application Processing Guide](#)

31. We use the application date as the date they submitted the application online? So, if they submitted it Friday night, we use Friday's date, not today's?

Answer: If the application was received outside of normal business hours then the application date would be the next business day. This applies to **ANY** applications received outside of normal business hours.

32. Case is due for renewal. Application is dated timely prior to the 15th, but we aren't able to contact the customer for an interview until the 25th. Customer has pending verifications that must be requested and are requested on the 25th. The last day of the month comes and we don't have the needed verifications. Are we to go on and deny the timely renewal as we don't have verifications, or must we give the customer the full 10 days from the 25th to provide the verifications?

Answer: You must allow the customer 10 days to provide.

Follow-up: Same scenario on a renewal that's filed after the 15th and the 30th day to process is coming up before the 10 days for awaiting verifications has expired.

Answer: You must allow the customer 10 days to provide even if this goes beyond the 30th day.

33. If I have a person who has been determined to have refused to cooperate with QC and they move into another household and applied for benefits, does the non-coop follow them to that case?

Answer: From Federal Regulations: In the event that one or more household members no longer resides with a household terminated for refusal to cooperate, the penalty for refusal to cooperate will attach to household of the person(s) who refused to cooperate. If the State agency is unable to determine which household member(s) refused to cooperate, the State agency shall determine the household to which the penalty shall apply.

34. If an application is denied due to failure to appear for interview within 30 days [household fault], and the customer reschedules within the 2nd 30 days, (1) is a new application required? (2) if so, what date is used?

Answer: **No**, a new application is not needed. When a customer contacts to reschedule after denial for no-show, day 31- day 60, the date of contact after denial becomes the new sign date if the interview is kept, and verifications are provided within 10 days of interview or the case is denied for lack of verifications. If the verifications are provided beyond the 10th day, the date the verifications are provided becomes the sign date if they are provided within 60 days of the application.

35. If we do not receive an application for renewal and it is Families First (FF), we are to attempt a contact and send a notice and then close the FF. These cases usually also have SNAP. In order to close the FF, we must remove the budget effective date on AEIAC which automatically puts the case in the driver (AEABC). So we have a pending SNAP case with no renewal application. The FF has to be closed by cutoff to avoid an overpayment for the FF. Can we close the SNAP when we close the FF with reason code 461? Or do we have to wait until the last day of the month?

Answer: We have talked to QC and have been told that if we are past the interview date, you can close the SNAP with 461 if there is **no** application.

If we are past the interview date, and there **is** an application you must use 495. **NOTE:** Do not close if customer has rescheduled.

36. We have an application from a lady who left the active SNAP household due to spousal abuse. I know in this situation she can receive dual participation. My question is are benefits prorated from the date she applies or is she entitled to a full month allotment?

Answer: You are correct. If she is a resident of a shelter for battered women and children, she can have dual participation. She would be potentially eligible from the date that she applied.

37. My understanding of policy is: If a customer missed their first interview appointment for renewal, they lose their right to having the renewal processed by the end of the renewal month and we had 30 days to process. This renewal was received 12/14 but she missed her first interview appointment, so we thought we had 30 days to process. We received a QC Error and are confused. Could you clarify this for me and then we will address with the worker?

Answer: It is possible for the agency/worker to correctly apply policy and still have a customer caused QC error. QC considers this a customer caused recertification timeliness error if the customer did not receive her benefits on the regularly scheduled allotment date. This is explained in an application processing guide on the TRW.

38. January renewal received 01/09; the county is unable to contact the customer in January to complete the January renewal. The customer contacts the office on 02/08 and completes the interview. 02/08 is actually 30 dates from the date of application. What date is entered on AEFPY as the as the sign date?

Answer: If the customer contacts the office before denial the application date is protected.

If denial was for not completing interview, if they contact within 30 days of the application then application stamp date is still protected--If the rescheduled interview is kept and verifications are provided within 10 days of interview, or the case is denied for lack of verifications. If the verifications are provided beyond the 10th day, the date the verifications are provided becomes the sign date if they are provided within 60 days of the application

If a customer contacts to reschedule after denial for no-show, day 31 thru day 60, the date of contact after denial becomes the new sign date, if the interview is kept and verifications are provided within 10 days of interview, or the case is denied for lack of verifications. If the verifications are provided beyond the 10th day, the date the verifications are provided becomes the sign date if they are provided within 60 days of the application.

39. A fax was sent to another state to verify end date of SNAP benefits for a customer. The state sent a reply fax back requesting a faxed copy of customer's Tennessee SNAP application with his info and signature so they can close his snap in that state. The caseworker contacted the customer and requested that they contact the state requesting the Tennessee application and close their case there. Are we able to fax other agencies our customer's Tennessee SNAP application?

Answer: No. We should not be providing another agency with a customer's application. For the purposes of verification, the caseworker instructed the customer correctly to "make contact with the other state in order to complete determination of benefits". Our agency should only provide as much information as we request ourselves.

40. What is the retention timeframe on the paper affidavits once scanned into FARAS?

Answer: Paper applications, records, and verification being brought into the office and scanned into FARAS, those documents will need to be retained for 90 days in the office, per [RDA 1716](#) however, digital images are to be kept for 5 years.

41. Does a notice have to be sent to the customer to notify them of their missed renewal appointment?

Answer: No. The reason code of 495 is considered as their notice of missed interview and a notice is NOT "required" to be sent out.

If the customer provides an application, deny with 495 if they miss their interview and have not rescheduled.

If the customer does NOT provide an application and has not rescheduled, you can let the case auto close OR you can take action to close after their appointment but use reason code 461.

42. When an application has been mailed to the county office for a renewal appointment and the customer does not keep the appointment, does the application have to be held pending until the end of the month?

Answer: No. Federal regulations state that (2) If a household files an application before the end of the certification period, but fails to take a required action, the State agency may deny the case at that time, at the end of the certification period, or at the end of 30 days.

The moment they miss the interview we can deny the case if they have not rescheduled. If there is an application, we deny with reason code 495, if there is no application, we deny with reason code 461.

43. Is it required to offer assistance to customers in obtaining verifications during their intake/renewal interview?

Answer: Yes. It is in the CLRC guide that is in the Toolbox and needs to be documented at each intake/renewal interview:

List each verification needed that was requested verbally and in writing, date requested, and due date:

How written Notice of need was provided:

*Assistance was offered to customer in obtaining verifications. Was Assistance needed?*

44. There is a section on the SNAP/TANF application that states the following:

**Release:** The State of Tennessee or people who work for it may need to prove the information I gave is true. By signing this paper, I am saying it is OK to get proof. This will let them decide if I can get SNAP or Families First. I am also saying that I have read and understand the Statement of Understanding.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Witness (if signed with an X):** \_\_\_\_\_

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

**Guardian or Authorized Representative:** \_\_\_\_\_

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

Since the customer signs under the statement giving us permission to obtain needed verification, can this be used as a release? There are times when we contact employers and they want a release showing that the customer has given us permission to obtain this information on their behalf, will sending them the application be sufficient? There is hesitation to use the application since it has personal information and Social Security numbers for people other than the applicant.

Answer: Per legal "This statement on the application grants our Department permission to contact references, collaterals, etc. However, since the application is confidential, it cannot be used as consent for someone to share customer information with our Department. We do have a release form for that purpose." The release form is HS-2940 General Authorization for Release of Information to the TDHS.

45. What does LEP and ADA stand for?

Answer: LEP stands for Limited English Proficiency which refers to individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English.

ADA stands for the Americans with Disabilities Act and refers to civil rights law that prohibits discrimination against individuals with disabilities in all areas of public life, including jobs, schools, transportation, and all public and private places that are open to the general public.

Follow Up: What are examples of services provided for customers that are LEP or in need of ADA services?

Answer: Examples of LEP services are, but not limited to translation services such as AVAZA and interpreter services. Examples of ADA services are, but not limited to text telephones (TTYs), qualified

interpreters on site, written materials, exchange of written notes, for the deaf and for the blind devices such as qualified readers, taped texts, audio recordings, and large print materials.

46. Is it acceptable for the customer's entire SSN to be documented in the CLRC?

Answer: We have been instructed to treat CLRC like public record. However, it is fine to include any customer information that assists in administering the customer's case. This includes confidential information, such as social security numbers. The CLRC screens are confidential. However, the CLRC entries could become accessible to others as a result of a judicial subpoena or court order.

The warning to treat CLRC like public records had to do with not putting any insulting or inflammatory comments in CLRC that could become public someday.

47. Daughter has applied for SNAP and is 21 and lives with her husband in the home with her mother, does mother have to sign the application or can we process without her signature?

Answer: Yes, the application can be processed without the mother's signature if the daughter is a responsible member of the household over 18. Please view Section B in [Administrative Policies and Procedures:24.02 SNAP Application Processing](#).

48. Would an individual that has a legal conservatorship over someone be able to file an application on their behalf even though they are not an Authorized Representative? Our application currently indicates Guardian or Authorized Representative can sign the application, but not a legal conservator.

Answer: Per legal it would be permissible for the conservator to sign.

49. Can SOLQ be used as ID if necessary?

Answer: ID can be verified by Documentary Evidence (ex. DL, Pay Stubs, Voter Registration Card, Birth Certificate), Collateral Contacts, and confirmation of system information. SOLQ can be used to confirm/verify a customer's statement of identity through verifying a social security number that has been provided by the customer combined with their name and date of birth.

50. Does the act of putting a name on the application validate them as the authorized representative as long as the customer signs the application?

Answer: Yes, if a responsible member of the household has designated the individual as an authorized representative on their signed application, this meets the requirement for the individual to apply for customer, obtain the household's SNAP benefits; and/or use the household's SNAP benefits to purchase food for the household.

CFR 273.2 (n)(1) (i)A non-household member may be designated as an authorized representative for the application process provided that the person is an adult who is sufficiently aware of relevant household circumstances and the authorized representative designation has been made in writing by the head of the household, the spouse, or another responsible member of the household. Paragraph (n)(4) of this section contains further restrictions on who can be designated an authorized representative.

51. If a customer who is working with E&T comes into the office and applies and is approved for Families First, do they need to be deregistered on AEIWP before sending them over to the customer representative?



Answer: If a customer is registered for E&T, but is then approved for Families First/TANF, the customer should be de-registered from E&T the same day of Families First/TANF approval to prevent co-enrollment in two (2) federal programs.

52. Do individuals that are truly homeless need to be coded a specific way on AEIID?

Answer: Yes, individuals that are truly homeless need to be coded a 13 for living arraignment on AEIID. "Homeless individual" is defined below.

§271.2 Definitions.

"Homeless individual" means an individual who lacks a fixed and regular nighttime residence or an individual who has a primary nighttime residence that is-

- (1) a supervised publicly or privately-operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations;
- (2) an institution that provides a temporary residence for individuals intended to be institutionalized;
- (3) a temporary accommodation for not more than 90 days in the residence of another individual; or
- (4) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings

53. Do the due dates of the verifications being requested need to be added in the worker comments on AEVTR?

Answer: **No**, the date the verification is due should **not** be added in the worker comments on AEVTR. ACCENT will place the due date of the verification(s) being requested on the notice generated from AEVTR. **The comments should contain the time period the verification is intended to cover.** Below are examples of what the notice should contain.

**Example:** Please provide paycheck stubs from Sonic for the months of 03/2018-05/2018

**Example:** Please provide a rent receipt or current lease agreement for 04/2018

**Example:** Please provide a bank statement for the checking account for 05/2018

54. During the renewal process if there is a change in SNAP benefits will simply using the reduction or increase reason code be sufficient to use on AEWAA or is the 091-code required?

Answer: We do NOT require the 091 code. If we are approving a renewal and there is a change in SNAP benefits simply using a reduction or increase reason code, depending on the change, would be sufficient to inform the customer of their change in benefits.

We also do not require the use of the reduction or increase reason code when processing a renewal. Since we are approving a new certification the 091 code is sufficient.

55. In the CAPER training in Edison there was a situation for intake applications when the 10th day for verifications fell on the 30th day of the application and verifications had not been received, the worker would take action and deny the application on the 30th day. What happens when this occurs now, when the notice is sent with the new AEVTR screen is there a different day to deny/take action?

Answer: If the date on AEVTR is on the application's 30th date take action ON the day listed on AEVTR.

56. If a household received SNAP benefits in another state, but proof was provided that the SNAP case was closed in the other case and the Medicaid was still open, is the customer required to provide proof that the Medicaid case was closed in order to receive SNAP?

Answer: No, if it was verified that the customer's SNAP case in the other state was closed and residency was verified that the customer reside in Tennessee; the verification of the Medicaid closure is not required.

57. How many times do we have to attempt to call the customer for interviews for an intake or a recert?

Answer: Regardless if it is an initial application or a recertification application, two (2) phone calls should be attempted for their scheduled interview.

58. If a customer comes into the office to reschedule a renewal appointment with clerical staff and the CLRC cannot be documented, how is this rescheduled appointment recorded?

Answer: The field should document the rescheduled appointment in CLRC if they have access to it and if not, then scan the rescheduled appointment letter into FARAS.

59. When an application is filed that is over income the month of application but eligible ongoing are two authorizations/notices required?

Answer: No, QC has stated they will no longer require 2 actions. The application sign date may be used, and the case can be authorized showing over income for the ineligibility period and eligible for ongoing benefits in one action. ACCENT will populate the over income code and not issue benefits for the ineligible period. The worker can add the approval code and approve the ongoing benefits. The certification starts the first eligible month. When one action is used if pulled it would be pulled as an active not a CAPER. We would continue to clearly explain in CLRC and on the notice to the customer.

60. The Phone Interviews and Renewal Scheduling/Processing PUN states that if a customer cannot be reached on the first phone call attempt, a second phone call attempt should be made "at least (15) minutes after the first attempt on the same day." What are the times for the second phone call attempt?

Answer: The 2nd attempt can be anytime throughout the same day as long as it is at least 15 minutes after the 1st.

Follow-up: Are staff required to make a third phone call to customers if the customer cannot be reached after the second phone call attempt?

Answer: No, a third phone attempt to the customer is not required.

61. For customers that are on furlough, does their application get processed differently than other customer's applying for SNAP who are not on furlough?

Answer: No, we would process the application as usual. The customer would have to meet the same requirements for benefits as any other customer.

62. Does identity need to be verified for authorized representatives?

Answer: Yes. Initial verification of the identity of the authorized representative would follow the same guidelines as verifying ID for the customer.

63. Can seeds and plants be purchased with SNAP benefits?

Answer: Yes. Seeds and plants can be used for SNAP in order to grow foods for personal consumption. It is important that the purchases are for personal consumption.

64. If an individual is involved in the Safe at Home program, is their information confidential with all government agencies or just DHS?

Answer: For individuals in the Safe at Home Program their information remains confidential with any of the Tennessee state government agencies.

65. If an applicant/recipient is transgender and asks to be referred by their sexual orientation the customer identifies with, do we enter the gender that is on their identifying information or the gender the customer prefers to go by on AEIID?

Answer: Per the USDA Office of Civil Rights, we should classify the customer as their preferred gender.

66. Some districts conduct same day application processing. If the customer is prescreened as expedite and do not wish to stay for an interview but wish to be called the same day, they are scheduled for an interview that day and provided the interview time in person. If the worker cannot reach them in two attempts, should the worker have the customer rescheduled for the 4th day? Or should the worker just document CLRC and at that point the customer has lost expedite status?

Answer: If the customer misses their scheduled appointment for same day scheduling and they were provided their interview time then they lose their right to expedited processing. It is very important that CSAS be scanned into FARAS to show that an appointment was scheduled, and that the customer knowingly missed their appointment.

67. When information doesn't indicate a case is expedited until verifications requested are worked, when is the date of discovery?

Answer: The date of discovery would be the date that the state agency discovered the customer was expedite, not the date the verification was necessarily received. The date that it was received may be different than the date the verification was processed to discover the expedite status. Therefore, the date of action would be the date of discovery on AEFSD.

Regulations state that the processing standard should be based on the date the State agency discovers the HH is entitled to expedited service.

68. For an initial application that is being denied on the 30<sup>th</sup> day for a missed appointment, should the missed appointment date and time be put into the notice when it is denied?

Answer: Yes. Please see [SNAP Notice Language Desk Guide](#).

69. We have a case that will qualify for a 24-month certification but the child in the case will turn 18 before the end of the 24 months? Would we still give the household a 24-month certification period?

Answer: If the child will be 18 within the first 12 months of a 24-month certification, it would be best to allow a 12-month certification and document CLRC as to why that certification period was given.

70. If a household that was assigned a 24-month certification reports a change that no longer makes them eligible for the 24-month certification, what action would need to be taken?

Answer: This depends on when the change was reported to what action needs to be taken. See below

- a) \*\*If the change is reported prior to 12<sup>th</sup> month (before mid cert provided). The certification should be set for 12 months based on the date the change was reported. For example, change reported 5/2/2020 and the HH no longer meets a 24-month cert. Shorten the certification to 4/30/2021.
- b) \*\*If the change is reported on the mid-cert form. Process the mid cert form, authorize the case and be sure to set an SR date if the household meets SR requirements for a form.
- c) \*\*If the change is reported after the mid-cert form (months 13 through 24) process the change, keep the same certification date and be sure to set an SR date if the household meets SR requirements for a form and there is more than six (6) months prior to recertification.

71. If the customer provides an email address on the application or during the interview, does staff need to fill out AEICI screen?

Answer: Yes, staff are encouraged to obtain an email address and if the customer provides one, it should be documented on AEICI.

72. If a household is due to return a Mid-Cert form and instead submits an SR form, can that be used, or should we send correct form and contact customer to provide correct form?

Answer: Since each form contains the same questions and wording, it would not be necessary to advise the customer to fill out a new form. Please be sure to scan it into FARAS as a mid-cert form and update CLRC accordingly.

Follow up: If the household turns in a mid-cert form when they are due an SR Form, can this be accepted?

Answer: Yes, the forms are interchangeable. Staff should be sure to document CLRC clearly when one form is submitted rather than the requested form due.

73. We would like to determine if FA-10-03 ([Memo FA-10-03](#)) - Handling Multiple Applications Submitted by the Same Assistance Unit is still applicable as written now that we are under the SR Form Process. Under FA-10-03, any application received after eligibility has been determined would not be processed as an application unless applying for a different program. This memo was instituted prior to [Bulletin FA-11-16](#) - Extended Food Stamp Simplified Reporting Certification Period which implemented the SR Form Process. Could the memo feasibly be considered outdated with regard to our current processes?

Answer: Memo FA-10-03 is outdated. All applications received during the certification period must be processed accordingly. If an application is received the month prior or the month an SR form is due, the application shall be treated as a re-certification application and a new certification period can be given, if the customer remains eligible.

74. If multiple applications are received for a customer that has already been interviewed and the case is pending, does an appointment need to be scheduled?

Answer: No, if the customer has already been interviewed and the case is pending, another appointment notice does not need to be sent to the customer. Sending another appointment notice when the case is pending from a previous interview could cause the customer to receive conflicting notices. For further guidance on how to handle multiple applications, please refer to the Multiple Application Processing PUN.

75. An application was filed on 8/11 and the worker was unable to contact the applicant for the scheduled appointment. The application was denied on 9/13/2021 for no contact. The applicant contacted us in 2nd 30 days and a 2nd interview was scheduled on 10/23, in which the customer was also a no contact. Does the application need to be denied on the 60th day?

Answer: No further action would be required since the application has already been denied and the household did not complete the required actions in the 2nd 30 days to determine eligibility.

## **AUTHORIZATION CODES**

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1. As per Bulletin #13 (FA1-07) dated 09-04-13, the cases which are pure FF and/or SSI and considered categorically eligible will have a deduction in the allotment from \$16 to \$15 per month. Our CW's are now running across these cases and are uncertain of the correct RC to use. I researched the bulletin but did not find the code for this particular deduction, so I was unsure if we should use one of the other mass change codes or if there was a certain code.

Answer: Code 405 can be used.

405 The Thrifty Food Plan went down in the state.

FS SR1-4-.27&1-19-.05

### **Changes that are effective November 1, 2013:**

1. Maximum allotments will decrease and
2. Minimum allotment will decrease

2. What is the best reason code to deny an ARAD that does not show for their interview?

ANSWER: 368- You did not help us prove your eligibility. Be sure to document that customer was a no show/no answer to their scheduled appointment date/time

Note: If they miss their interview, we need to make sure they receive a NOMI. If a missed appointment notice isn't mailed by ACCENT you can ensure this is sent by running the case, sending a CNCC, and documenting missed appointment notice mailed. Leave the case pending until the 30th day and can deny with 368 on the 30<sup>th</sup> day (or next workday if the 30<sup>th</sup> day is a weekend or holiday). if the customer hasn't rescheduled.

3. We had a Caper QC in which the customer's case came up as 041; however, the case had been pended several months: in the past for 1 month for verification of attendance or completion of a drug rehab course. What could have been keyed into ACCENT to keep the 041 code from popping up?

Answer: Currently the 041 code automatically generates and has special edits that limit the abilities for it to be keyed over it.

## **CATEGORICAL ELIGIBILITY**

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1. One-person household that receives both SSI and SSA. Their adjusted net income exceeds the net income limit. Since they have income other than SSI, are they considered to be Categorically Eligible?

Answer: If she is the only person in the HH and she is receiving SSI, then her household consist entirely of Supplemental Security Income (SSI) and/or Families First (FF) recipients and is therefore CE. Policy does not state that the only HH income is from SSI or FF, but that everyone in the HH is receiving SSI or FF.

A. Defining Who is Categorically Eligible (CE)

1. Households consisting entirely of Supplemental Security Income (SSI) and/or Families First (FF) recipients are categorically eligible for SNAP. Consider individuals as SSI or FF recipients when they are:

- a. receiving a Families First or Supplemental Security Income cash assistance; or
  - b. eligible for FF or SSI payments, but the payments are being recouped or suspended;
- or
- c. approved for FF, but do not receive a payment because the grant amount is less than \$10.

## CERTIFICATION

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### 1. How is the certification period calculated?

Answer: For an application where the customer is not currently receiving benefits the application month is month 1, if eligible for benefits in application month (even if prorates to zero).

If the customer is not eligible during the month of application, the 1<sup>st</sup> eligible month is month 1.

NOTE: In AEORE mode the worker needs to manually count the certification period, update AEFSA if needed, and check IQCP to ensure that the certification period is correct.

NOTE: HOW TO COUNT TO 12- If January is month 1, December is month 12.

### 2. If we have certified a customer for 12 months, can we shorten their certification if we think they are now working?

Answer: Federal Regulations state that the “Loss of public assistance or a change in employment status is not sufficient in and of itself to meet the criteria necessary for shortening the certification period. “

### 3. OK, we have read the policy manual, Q&A’s, AIA’s, and Memorandums....and feel it best if we give examples to get direction ....

Answer: I consulted with QC and answered below.

- Customer is certified January 15 to December 31<sup>st</sup>. On July 2<sup>nd</sup>, she applies for TANF. She also decides to recertify her SNAP Cert at that time. We believe the certification for SNAP will should be: 08-01 to 07-31.

Is this correct?

Answer: The certification count for recertification begins the month after the AEFPY sign date. A recertification sign date of July 2<sup>nd</sup> would be certified for 12 months if certified through 7/31.

- Same Certification as above but Customer is certified in someone else’s case but is now applying for her own SNAP case. Due to Cutoff, we cannot get her out of the other case until 7-31-14, what would be her cert period?

Answer: The certification for the case would begin with the first eligible month in the case. In this case month 1 would be August.

- Same Certification as above and situation as in # 2, but we cannot get the customer out of open SNAP case until 8-31 due to her missing appointments and not being interviewed until after cutoff in July? What should her cert period be?

Answer: The certification for the case would begin the first eligible month in the case. In this case month 1 would be September.

### 4. If we certify someone less than 12 months do we still receive SR protection, or must we certify SR cases for 12 months?

Answer: Most SR cases can be certified for 12 months unless the caseworker determines that a shorter certification is warranted based on the household’s circumstances. Cases certified at least 4 months can be considered simplified reporting households unless self-employment is the only earned income

in the case. Simplified reporting households certified more than 6 months, other than households whose only adult members are elderly or disabled with no earned income, have a 6-month reporting form requirement.

FNS: Based upon information contained in 7 CFR 273.12(5)(i) the state agency may include any household certified for at least 4 months in a simplified reporting system. As long as you properly notify the household of the SR requirements and annotate the case as SR, it would receive the protection of an SR case.

The 12-month period is the maximum certification period allowed for non-elderly or disabled households, 273.10(f). Certifying some households for less than 12 months, based upon the predictability of the household's circumstances, would not impact your choice.

## CHANGES

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1. We had a case in which closure action was taken on 5-21-14 due to over income. Case closure effective date on Accent was 6-30-14. Does the household have to reapply if there is a change in income verified before 6/30?

Answer: SNAP cases closed correctly must reapply after closure action. Their option during the 10-day adverse action period is to appeal or reapply.

If we close in error and recognize our error, then we can reopen to correct a recognized incorrect action to keep the customer from having to appeal.

Please refer to section S, Notice of Adverse Action in the July 2017SNAP Policy Manual.

2. We have a question about the adverse notice period for SNAP/FF cases, so I am sending to get clarification for both programs. When benefits for an open case are reduced or terminated due to failure to provide verifications, etc., are they allowed to provide the verifications within the 10-day adverse time frame for us to be able to open the case back up or do they have to reapply (or file an appeal and get continuation of benefits)?

Answer: For SNAP, once negative action is taken on an active case, if we aren't working an application or reapplication filed within the last 60 days that was denied/closed for lack of verification, then they would need to reapply, or appeal and request reinstatement, unless we closed the case in error and recognize our error.

Federal wording:

Continuing Participation 273

(3) Unclear information. During the certification period, the State agency may obtain information about changes in a household's circumstances from which the State agency cannot readily determine the effect of the change on the household's benefit amount. The State agency might receive such unclear information from a third party or from the household itself. The State agency must pursue clarification and verification of household circumstances using the following procedure:

(i) The State agency must issue a written request for contact (RFC) which clearly advises the household of the verification it must provide or the actions it must take to clarify its circumstances, which affords the household at least 10 days to respond and to clarify its circumstances, either by telephone or by correspondence, as the State agency directs, and which states the consequences if the household fails to respond to the RFC.

(ii) If the household does not respond to the RFC or does respond but refuses to provide sufficient information to clarify its circumstances, the State agency must issue a notice of adverse action as described in §273.13 which terminates the case, explains the reasons for the action, and advises the

household of the need to submit a new application if it wishes to continue participating in the program.

3. We have had several appeals ruled in favor of the appellant based on the county not exploring good cause. What is policy?

Answer: Good cause must be explored prior to an E&T sanction. If the customer is contacted and doesn't claim good cause it should be documented. The customer should be notified in writing and given 10 days to provide verification of good cause if good cause is claimed, or if it is unknown as to whether the customer is claiming good cause.

Please refer to [Administrative Policies and Procedures: 24.15 SNAP Failure to Comply with Work Requirements](#)

section B. Information from the SNAP Policy Manual Section 11.4 Failure to Comply with Work Requirements is below.

4. "\_\_\_ has a case on the LWD compliance report that we aren't sure what to do with. The correspondence from LWD says that he kept his appointment and reported that he was employed to them. We were not showing he was employed and that is why we referred him to them. Under SR policy are we allowed to send a request for income verification to this customer based on what he reported to LWD? Thanks!"

Answer from FNS: "yes, the worker must send the request for contact to the household based upon the correspondence from LWD"

5. When receiving the deemed newborn report, are we to update the SNAP case with this information? Are they eligible for any restoration of past benefits?

Answer: These reports are not considered verified upon receipt and the information should be treated as any other information that has become "known to the agency". (see Memo FS-15-01). No, they are not eligible for any restoration of past benefits because they did not report the change.

6. After we send a CNCC requesting contact, we are also asking for verification. If they call but don't provide verifications, are we giving them a new 10 day or does the original count stand?

Answer: The first CNCC is actually a request for contact (RFC). We are asking for verification too so we can be proactive and hope they turn it in. However, if they contact us regarding the RFC but do not provide verification, we do not close them; we send an AEVTR to specifically be requesting verification and allow them 10 additional days to provide.

7. In lieu of the recent changes regarding Work Number not being verified upon receipt—when a QA is received stating information has been found showing customer is employed and found on Work Number, does the Eligibility Counselor consider this as verified upon receipt or does a CNCC need to be sent by the EC following the new guidelines? Often times, it is asking the EC to explore a possible claim due to income going unreported for several months.

ANSWER: When QA sends out an email letting workers know that a customer has shown up on the work number it is information that has now become known to the agency. This information is not verified, and the procedures will need to be followed that were discussed in [Memo FS-15-01](#).

Send a CNCC requesting the customer to contact you regarding a possible change in employment. If they do not contact you, close the case using reason code 368 and the required statement on AENWC should state, "Due to your failure to contact our office, your SNAP benefits are closing."



If the customer does contact you, ask them where they are working, how much they get paid an hour, and how many hours they average a week. If the work number verifies their statement, you can use the information and process the case. If it does not, you will need to allow the customer a chance to provide verification. **Note: If the customer states their hours vary the work number can be used to verify their average.**

8. In regard to forwarding address on returned mail, if the forwarding address is their new residence can the forwarding mail, we received be used to confirm their statement or if they respond based on their receipt of our RFC be can that be used as verification of residence based on mail received at stated residence address?

ANSWER: If they respond to our RFC and they provide an address that matches the returned address mail, we can use that as verification to confirm customer statement.

9. If we have non-recipient reported change, I've been trying to call them to verify. If I don't reach them, I am sending CNCC. Is this ok?

ANSWER: If the worker makes/has contact with the customer the request for contact wouldn't be necessary, but if unable to contact it would. It is ok to attempt phone contact prior to sending CNCC; it just isn't listed as a requirement.

10. When we receive a non-recipient reported change regarding income, should "?" be placed on AEFMI screen in ACCENT when a CNCC has been sent.

ANSWER: The case should not be updated with any information until we have spoken with the customer. If the customer has stated that this information is correct, then the case can be updated with a "?" if verification is needed.

11. I wonder if you could find out something for us. We have all been getting a couple of alerts, DESX in particular, that shows a customer is receiving income, but SOLQ does not verify this. We had 2 people verify that they were receiving SSI and SOLQ didn't show it. So, I don't know which is correct, and we need to know why the alert screens are not matching SOLQ.

ANSWER: The act on all change bulletin states DESX and DEBB are considered verified upon receipt and that SOLQ is considered 3rd party information. Based on that-SOLQ can be used to confirm/verify a customer's statement and SOLQ may indicate a possible change in circumstance but is not itself considered verified upon receipt in and of itself alone. If what we have contradicts a customer's statement, the customer can provide verification from the Social Security Office to verify.

12. When a SR household reports the birth of a newborn, can we ask about changes in the HH income (Ex. Maternity leave), or do we simply work the HH composition change reported by the SR household?

ANSWER: Our requirement is to act on the change reported. It is not mandatory to act on anything outside of what is reported. Information that becomes known during the discussion with the customer may be acted upon.

13. In regard to shelter deductions-when do we remove the deduction or leave the old amount in the case?

ANSWER: If a change is reported in shelter (increase or decrease) and the shelter amount is not verified, we need to remove any expense in the case and process without a shelter deduction

EXAMPLES:

- If they report or we become aware of a decrease in shelter and they do not verify it, do we remove the expense?

ANSWER: Yes, remove the deduction.

- If they report or we become aware of an increase in shelter and they do not verify it, do we leave the old amount, or do we remove it?

ANSWER: Remove the deduction

- If at renewal, they say there is a change in shelter and they do not verify it, do we remove the expense all together?

ANSWER: Yes, remove the deduction

14. We make a lot of changes that involve adding a baby and we verify their birth on clearinghouse. Is Clearinghouse not able to be used as verified upon receipt?

ANSWER: Clearinghouse is not verified upon receipt, but it is still acceptable verification to confirm a customer's statement.

15. If customer is working and they call to report no longer working, we send a notice requesting verifications to be turned in within 10 days. The customer does not follow through. We do not receive anything from the customer. Do we close the case for not returning the verification or do we leave the income in the case?

ANSWER: You would close the case. Just a note: No longer working could get into more than income also—work requirement, ABAWD, vol. quit, etc....

16. If we receive a non-recipient reported change can we just have them call the fraud hotline?

ANSWER: People calling in to report on customers do not need to be told to call the fraud hotline as their report may not be fraud. When we receive anonymous calls/reports On ACTIVE cases, those need to be routed to the EC and they would take the appropriate action, and then determine if there is a claim.

17. We came across a case where the customer called and reported that they had a change in rent amount. The case was closed because they did not verify this information. Is this correct policy?

ANSWER: No, this is not correct policy. We are to remove the deduction and keep the case open if eligibility remains.

18. Caseworker completes an application on 2/05/15 by approving for 12-month cert. (no info on Work number, income verified by paystubs)

Case is chosen for QA review.

QA reader finds a change in work by looking at the Work number (new hire).

She sends caseworker who approved the case an email to request information (send CNCC). Is this correct process?

ANSWER: During the QA (or QC) review this information would now become "known to the agency" and should follow the procedures for a non-recipient reported change. It would be correct for this information to be passed to the EC and for the EC to send a CNCC.

19. I have a question about the use of DEBB or DESX as a verified source. I know it is a verified source as far as the amount/receipt of Social Security benefits, but if a DEBB or DESX alert shows a person deceased, is that considered a verified source for death? Just wanted to double check before we send CNCC's on those cases.

ANSWER: No, DEBB/DESX can be used as a tool to verify statements made regarding a deceased individual, but it is not verified upon receipt. DEBB/DESX is however, verified upon receipt for the amount/receipt of Social Security/SSI/Railroad benefits.

20. We have received some guidance that we need to run AEORE on all changes. Is this correct?

ANSWER: It is generally more appropriate to run AEABC when processing a change on an open active case.

21. If an Authorized Representative calls us and reports a change that one of the HH members is deceased is it ok to remove the HH member based on that statement?

ANSWER: Yes, we can remove based on the HH statement or the Authorized Representative statement.

22. If a case has been approved without expenses or lower expenses and HH reports a new expense (or an increased expense), when the verification is received of this reported change, how should the change be processed?

ANSWER: If an application has been approved and a change occurs during the cert period and that change causes the worker to re-approve an already open benefit category, you can run AEABC. The sign date should stay the same. There should be no need to change the cert date or change the S/R date. As always, please check IQCP to confirm the cert date and S/R date are correct.

23. I have a case on the TOMIS parole violators report that I am currently working CLRC says the SR was returned 04/13/15 and worked 04/14/15 and it was in FARAS and marked as completed, but AEFSR was not updated. So CNHS shows a notice was sent on cut-off that the case is being suspended due to failure to return the SR form. I know that this would be an error since we actually did have the SR. What I am wondering is whether or not to manually close the case with 483 since at the time the SR was filed he was listed as absconded (03/27/15)?

ANSWER: We need to manually close with the correct reason code, so they get the proper notice.

24. A lady reported at the FASC, that she was living with her father at the address given in the case. She was not a member of this case at the time. She called the Morristown FASC to report the address of this case where her father was living and stated she was a household member. A CNCC was sent to her at this address and no reply was ever made. As a result, this SNAP case is now closed. The customer is in the office today to inquire as to why the case would've been closed when the person that called the FASC wasn't a member of the SNAP case. I understand her frustration. Was it correct to close this case when the head of case wasn't aware of any mail coming to their house to contact our department for any reason, especially to verify a new household member that wasn't actually living there?

ANSWER: Actions to close case were correct. They followed the procedures for a NON-Recipient reported change. The stepdaughter was a NON-Recipient that reported a possible change to a SNAP household. Sending the CNCC to the head of household is our action to give them a chance to confirm or deny the information that was provided to us by a non-recipient. The household never responded so their case was closed. Per the Act on All Change memo, actions taken were correct.

25. When TANF QA sends us information to act on (i.e. employment) are we required to still contact the customer for SNAP?

Answer: Yes, we need to act on it because it has become "known" to us.

26. 1. Customer has requested an increase in benefits because she is going to be off work for 2 weeks next month. Can we adjust their benefits for being off work for 2 weeks?

Answer: This is in the Federal Regulations.

**If a household reports a change in income, and the new circumstance is expected to continue for at least one month beyond the month in which the change is reported, the State agency may act on the change in accordance with paragraphs (c)(1) and (c)(2) of this section. The timeframes in paragraphs (c)(1) and (c)(2) of this section apply to these actions.**

27. We have a customer that has a new Social Security Number. I remember “back in the day” we were not allowed to change the Social Security number we had to call the help desk. Is that still correct?

Answer: Any time you change either a SSN or DOB on an existing individual you need to get the help of the ACCENT Help Desk to make sure the customer’s RID does not change as that will trigger a new EBT account. Any change made on ACCENT today does not get processed until overnight batch runs. Therefore the incorrect DOB is what shows on the EBT system until midnight at minimum. Please call the ACCENT Help Desk to make sure the correct RID stays with the customer.

28. Customer reported a change in income on SR. Customer did not provide all of the verification; however, the work number was used to confirm no longer employed at that employer. In the process, it was discovered customer started working a new job and this was seen on the Work Number. Can we act on that new job seen?

Answer: Yes you can act on it. But keep in mind it is not verified upon receipt. You will need to treat this like a non-recipient reported change and the customer will need to confirm the information.

29. An absent father reported to DHS Program Integrity Unit that his children’s mother is no longer in Tennessee and the children are now in his care. As far as we know, the father did NOT apply for assistance for the children. The caseworker sent the mother a 10-day notice asking her to verify her residence and household composition. The mother failed to respond to the notice. Can we take action on this case? If we are allowed to take action, do we remove the children and leave the SNAP open? Or can we close case down because of failure to verify household composition and residence?

Answer: Yes, you would take action on the case and issue a notice of adverse action to close case down because failure to verify household composition and residence. Per federal regulations (§273.12 Requirements for change reporting households) which states:

(3) The State agency might receive such unclear information (i.e. changes in a household's circumstances) from a third party or from the household itself. The State agency must pursue clarification and verification of household circumstances.

(ii) If the household does not respond to the Request for Contact (RFC), or does respond but refuses to provide sufficient information to clarify its circumstances, the State agency must issue a notice of adverse action as described in §273.13 which terminates the case, explains the reasons for the action, and advises the household of the need to submit a new application if it wishes to continue participating in the program. When the household responds to the RFC and provides sufficient information, the State agency must act on the new circumstances in accordance with paragraphs (c)(1) or (c)(2) of this section.

Follow-Up: To be clear, even if it is a SR certified HH, we can take action?

Answer: Yes, you would still take action. Please refer to the July 2017 SNAP Policy Manual Chapter 41 Continued Responsibilities section H Households Subject to Simplified Reporting.

30. If working a change, is the worker acting on the change responsible for updating AEIT/AEIWP as it applies to the change being worked?

Answer: Yes.

31. When a SNAP recipient reports an address change, are the workers required to explore continued eligibility for the Standard Utility Allowance (SUA) and excess shelter deduction?

Answer: Yes, per federal regulations when a household reports a change in residence, the worker must investigate and take action on potential changes in shelter costs arising from this reported change.

273.12 (C)(4)(iv)

...When a household reports a change in residence, the State agency must investigate and take action on potential changes in shelter costs arising from this reported change. However, if a household fails to provide information regarding the associated changes in shelter costs within 10 days of the report, the State agency should send a notice to the household that their allotment will be recalculated without the deduction....

32. We have a case where the customer provided an SR form with changes reporting birth of newborn. The newborn's name, social security number and date of birth was provided. Would we need more verification in order to add the baby to the case?

Answer: The customer provided enough information to add the baby and update the case as long as SOLQ verified the social security number provided.

Follow up: If the customer only provides the name and date of birth, would we need to request any other form of verification?

Answer: Verification may be requested but is not required until six (6) months from the month following birth of the child or at next review after the six (6) months is given. The customer statement of the child's name and date of birth would be sufficient to add the child to case.

## CLAIMS

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1. I've got a case where the individual applied for SNAP, and was approved, and then was incarcerated in the county jail, and was ultimately transferred to a State facility. The case was certified for 13 months with no 6-month report requirement due to disability. Do we do a COTS on this to recover the amount?

Answer: Since the customer had no reporting requirement there would be no claim for failure to report. If there was a time the agency failed to act on information or acted in error that resulted in an over issuance of over \$200 then there could be an agency error claim. The 13 months would be in error and if it resulted in an over issuance of over \$200.00 there should be an agency error claim.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-07-12.pdf>

2. We have been acting on cases when working the incarcerated report. Now we have received some cases back from Investigations in which we have filed claims. Investigations are indicating there is no need for a claim as going to jail is not a reportable change during SR. Are we correct?

Answer: Memorandum [FA-13-05](#) is the most recent Memo. "Matching Process for Families First and SNAP"

We work the report, seek verification, and take action on the case.

As investigations has indicated, a claim would not be needed if when working the report we find that the customer became incarcerated during a time that they were not required to report the change to us.

3. An accent issue allowed a customer to receive benefits in 2 cases during the same month? Do we file and agency error claim?

Answer: The issuance would be considered an agency error. If it resulted in an over issuance of greater than \$200.00, then we would file a claim.

4. When can claims be filed?

Answer: Claims should only be field when there is a verified/confirmed over issuance estimated to be over \$200.00, per [FA-07-12](#).

5. Customer applied for SNAP including herself and her children on her application. Only the children were citizens. Customer is here in an undocumented status. She has no work permit, no “green card” and is not a LPR. She has been correctly coded as IA on ACCENT. When the SNAP aid group forms, she groups as an EA but then ultimately fails the non-financial test. Her income then prorates among the household with only that portion counting for the children picked up by the budget. ACCENT worked the budget as it should with the information given. It would appear that she has been committing fraud as she has had income for some time that she failed to report. As the claim was classed as an IPV, it would also seem she falsified at least one application.

When the failure to report was discovered, the county made a referral to Investigations and documented the case. Investigations processed the case and then “sent it back” to the county to run and impose the “disqualification” of Ms. Perez and the established recoupment. The worker states she did not receive an initial alert but when she received an email from the COTS worker she ran the case requested. There was no change.

I talked with the SNAP trainer to make sure my suspicions were valid, and she agreed. I believe that the recoupment is not processing because she never actually received benefits. She was an EA in the aid group who failed non -financial eligibility. The benefits that were issued were for her children.

I had called back to talk with the COTS worker to explain the dilemma but wound up talking with Richard Carr. Is this a “glitch” in the system or is this correct?

Answer: It is correct to file a claim and they can try to recoup those benefits, just not from allotment reduction. There is no system error in this circumstance.

6. Is the \$200 claim threshold for SNAP cases AND Families First cases?

ANSWER: No, For SNAP the claim amount must be more than \$200 (\$201 or more). For FF, the claim amount is \$35.00.

7. Discovery date on COTS form- is it the day the alert was generated by the system, the day the alert was worked or the day any requested verification was received by the EC?

ANSWER: The discovery date on the COTS form is the date that the EC discovers that the customer was overpaid. The discovery date is important because it has an effect on the overpayment period. The receipt of an alert would not tell you that there is an overpayment. When you work the alert, you will verify whether the customer received benefits, if the circumstances were reported, and whether it was required to be reported under policy. If you determine that circumstance had a bearing on the

eligibility of the customer AND may have caused the household to be overpaid, you will attempt to obtain evidence to determine the amount of overpayment. When you determine that the customer was overpaid and there is a claim; that date would be your discovery date.

8. The training material says that if the application is not signed, that a claim would be invalid. But wouldn't that be an Agency Error, and shouldn't it be sent as a claim?

ANSWER: Failure to get a signed application is a procedural error that we are not allowed to file claims as a result of. State rule 1240-1-20-.01: certain procedural errors are listed that do not result in claims and an unsigned application is one that is listed. It is really important to make sure that the applications are signed.

9. If an application for benefits isn't marked that the person is applying for SNAP or FF, does the application default to an application for SNAP only? If an application that isn't marked goes to claims, would it be a valid claim if neither program is marked on the application? Again, for applications in FARAS, what would the process be to make sure the application is correctly marked?

ANSWER: Yes, the application would still be valid despite the program not being marked. However, the CLRC should document the programs that the household was applying for during the interview.

10. We have a case that has a claim filed for February and March. In February, they received 2 allotments: 1 regular allotment and 1 replacement allotment due to a power outage. Our question is, do they have to repay both February allotments?

ANSWER From FNS: the replacement allocation was to address the power outages which led to the spoilage of food. It would not be considered to be an additional allocation but rather a replacement of the lost food. Therefore, the claim should be computed on the amount of the regular benefits.

11. Do we key COTS based on the Head of Household or based on who signed the application?

ANSWER: COTS is keyed based on who is the head of the household or Assistance Unit. Although the claim should be pended in the head of the household/assistance unit, the Department can designate any adult member as responsible for repayment of the claim.

12. If there is an overpayment but not due to an income issue, is verification always needed? (ex. HH comp – worker finds out someone was in the case and shouldn't have been or vice versa)

ANSWER: Yes, verification is needed for claims. If you do not have evidence, you cannot determine if there was a claim. We must do our due diligence and obtain the evidence to make a determination if there was an over-issuance.

13. Do you have any suggestions of what we need to focus on to improve claim submissions?

ANSWER: S/R seems to be one of the biggest issues with claims. We need to be able to explain the SR process to customers IN DETAIL. They need to take the time up front to do this. The claim determination process begins after the eligibility process ends. We must have evidence to determine if there was/is a claim. Unfortunately, this means obtaining verification! No way around it. Lastly, **document, document, document**.... the CLRC is considered the state's record of events. If the documentation is non-existent or lacking it has a direct impact on the claims process.

14. If someone marks “no changes” on the S/R form and they did have a change can we issue a claim for that? I heard that it had to be a falsified application.

ANSWER: A falsified S/R form could result in a claim if it resulted in over \$200 over issuance. It does not HAVE to be an application.

15. On the COTS triage checklist it asks if the RID number is correct, but what about the social security number? On this case the social security number was entered on the COTS system one digit off. Does that make it invalid?

ANSWER: The social security number can be modified after the claim has been created, so this would not make the claim invalid.

16. If the claim comments section is documented well and CLRC is documented well regarding a DESW alert etc. that has aged off the system, did Katrina say that we could consider it to be valid and that the investigator may have documents or request verifications?

ANSWER: For claim comments to be sufficient, you must be able to answer at least: WHO, WHAT, WHEN, and WHERE. WHY is also important, but at least the first four should be answered. It is insufficient for the COMMENTS section to only state “See CLRC”, “DESW ALERT”, or “See ATTACHED”. This is always important but is especially critical for this task as we were not able to send back paper referrals or verifications if they had been originally sent with the claim.

Verification other than the alert should be sent with the original paper referral because claims cannot be established solely on the receipt of an alert. However, if a claim is determined valid through triage and that verification has not already been referred to us, the investigators will attempt to obtain verification for the claim.

An Example of Sufficient comments: Jane Doe received \$6,000 in unreported wages from Walmart during the 2nd quarter of 2014 which caused her to exceed the GIS for her household size (1).

- b. WHO? JANE DOE
- c. WHAT? \$6,000 in unreported wage
- d. WHEN? 2nd Quarter of 2014
- e. WHERE? Walmart
- f. WHY? Income exceeded the GIS for her HH size (1)

17. Is it a policy requirement for eligibility counselors to obtain verifications on wage matches on past budgets that do not affect current or future budgets? I.e., former employment that was not reported and the customer is no longer working there?

ANSWER: It may be requested to determine if a claim is needed. It may or may not be needed for current eligibility. Before a claim is referred, the caseworker should make any necessary adjustments to the case to ensure the correctness of ongoing benefits. It is very important to actually verify that an over issuance has occurred before making a claim referral. (i.e. When an anonymous caller reports that an individual has unreported income, this must be verified before a claim is referred.) Any verification obtained in support of the claim referral should be submitted to the Investigation Section.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-07-12.pdf>

Follow-Up: In reading bulletin [FA-07-12](#), I’m viewing it as claims related to current and ongoing benefits. The case worker is to obtain verifications in this situation. Maybe I’m taking it to literal but, to me, it isn’t saying that the worker should obtain information on past income that no longer affects the budget. I’m mainly



basing this on paragraph three. This I can completely see the need for the worker to do, but I really have concerns about the ability and timeliness for workers to try to obtain information that no longer affects the current or future benefit.

ANSWER: It states in paragraph 3: "Before a claim is referred, the caseworker should make any necessary adjustments to the case to ensure the correctness of ongoing benefits."

- We must get current verification to ensure that all future benefits are correct. "It is very important to actually verify that an over issuance has occurred before making a claim referral. (i.e. When an anonymous caller reports that an individual has unreported income, this must be verified before a claim is referred.)"
- In order to know if an over issuance occurred, we need to verify what was happening at that time. Having current information does not prove an over issuance occurred in the past. For Example: If we receive anonymous call that Customer is working. We send a CNCC requesting contact/verification. We receive an employer statement that states they are paid cash \$13 an hour/\$40 a week. We update AEIEI to reflect this for future benefits. This puts them over the GIS and case is closed. If you sent this to PIU they can't file a claim because it has not been verified that an actual over issuance has occurred. We need to have verification of this before making a claim referral.

18. The PUN on the claim referral process on the bottom of the second page says:

"PIU will accept claim referrals where the verification of employment is from third party employer verifies like Work Number..." I assume that means only if the customer confirms that the income source is valid, right? Like if we get a DESW and the income is on work number, but we are never able to reach the customer to validate the income source, we would not be able to submit a claim at that point with just the work number verifications, right?

Answer: You can still refer it as a possible claim even if you do not have the customer confirm the information first. PIU has confirmed this.

19. We have customer who died in January and came out on the deceased report for March. We had no application or SR due during this time. Would this be logged as an overpayment?

Answer: If the case was simplified reporting, this is a non-reportable change and will not be a valid claim.

20. Do you know the proper procedure that the County is supposed to follow if a supplement is issued on the wrong SNAP sequence number? EX: Customer is due a supplement of \$195 on the FS-03 sequence; Supervisor issues the \$195 supplement on the FS-01 sequence in error then posts a second supplement of \$195 to the FS-03 sequence.

Answer: Issuing benefits to the wrong sequence is an agency error. If it is a SNAP claim, it is subject to the \$200 threshold for claims. The only claims that are not subject to the \$200 threshold are SNAP QC Error claims and SNAP Continuation of benefit claims. **We are working on establishing a cost effectiveness threshold policy for TANF**, but it is not finalized at this time. Thus, at this time TANF claims would also be exempt from the threshold.

21. Lifetime disqualifications: Can we file a claim back to 2006? I'm thinking we can only go back three years. She has been on benefits here off and on since 2006.

Answer: The only way you can go back that far on a claim is to prove the failure to report was intentional. We will need to prove 3 elements: 1. that the recipient knew that he/she had an out of

state disqualification; 2. knew that he/she had an obligation to report it, and 3. failed to report it. I'm not sure, but is/was this a question on the application? If it wasn't a question on the application and there is no documentation in CLRC that the question about out of state disqualification was asked, it would be hard to prove intent. Even if there is no intent, there could be a claim. As you know we are required to check eDRS for an out of state disqualification at application and recertification. If we did not check eDRS or document the case that we checked it, it could be classified as an Agency Error overpayment? If it is an agency error, then the claim period could only go back 12 months from the time we discovered the error in the case.

22. There was a situation that was brought to our attention about claims due to issuance error that was prepared inaccurately. The benefit was issued to the wrong sequence that had a different person as head of assistance unit (that had been inactive for some time). This claim got prepared under the Head of Assistance Unit that was active (01) instead of the Head of Assistance Unit who was on the incorrect sequence (02). Is this incorrect?

Answer: Claims should be written under the Head of the Assistance Unit. Family Assistance should make an attempt to notify that person of the issuance error and attempt to recoup it through a Voluntary EBT repayment form first. A claim must be established if the Voluntary EBT form is completed because this gives us an account to apply the recouped monies to. However, the recipient does not get a demand letter because we pay out the debt immediately (via Fiscal Services). However, if they are unable to get the voluntary EBT repayment form completed, there should not be a claim filed. This is because there is no signed application from the individual that received the benefit in error, which makes it a procedural error.

Per State Rules, Chapter 1240-1-20-.01 (2)

Instances When Claims Shall Not Be Established. A claim shall not be established against any household if an over issuance occurred as a result of the following:

(a) Procedural Errors. The county office failed to ensure that a household fulfilled the following procedural requirements:

1. Signed the application form; or
2. Completed a current work registration form; or
3. Was certified in the correct project area.

(b) Expired ATP. A household transacted an expired ATP card, unless the household altered its ATP card

Follow-Up: On issuance errors (to wrong sequence) with different head of assistance unit (not

the current HOA), if the person didn't sign an application, it is a procedural error which shouldn't be a claim. However, Eligibility should make an attempt to contact the recipient to get them to sign a voluntary EBT repayment form to return the monies issued in error back to the Department. If they can get the EBT form signed, then we would open a claim to collect the monies. This step is needed for reporting purposes to USDA-FNS.

You can't send a claim referral on it without attempting to make contact with the recipient about the issue first to get that voluntary EBT form signed. If they don't get that form signed, then they should not send a claim.

23. Typically a claim isn't filed for less than \$200.00. Is it true that we wouldn't ask for voluntary repayment forms which would result in claims on amounts under \$200.00 also?

Answer: That is correct, we wouldn't ask for voluntary repayment forms because the claim still has to meet the cost-effective threshold unless it was the result of a quality control finding or continuation of benefits.

24. How does a DHS employee report suspected fraud?

Answer: Fraud, waste, and abuse can be reported to the Comptroller of the Treasury through its hotline by calling 1-800-232-5454 or electronically at

<http://www.comptroller.tn.gov/hotline>.

Additionally, fraud, waste and abuse can also be reported to the Department of Human Services, Office of Inspector General's Fraud Hotline at 1-800-241-2629 or electronically at

[InspectorGeneral.DHS@tn.gov](mailto:InspectorGeneral.DHS@tn.gov).

## CITIZENSHIP

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1. I am going to do my best to explain this situation. In the last two weeks Crockett and Haywood have each had Cuban families come in and apply for benefits (Families First and SNAP). They have provided a passport and an I-94A card. The card is stamped "PAROLED" and has Public Law 89-732 written inside the stamp. On the bottom it says "US-Visit Single Use". We read in the manual where it says if they are paroled into the US they are eligible, but then it says if the I-94 card is annotated with any letter A through L, they are not eligible. We are not sure how to interpret this and would like some clearance on this policy if possible. We also received a phone call from an agency out of Memphis called World Relief Memphis, stating they are helping Cuban refugees apply for benefits. One of the applications has been faxed from this agency and the cover sheet states that the refugees are enrolled in Refugee Cash Assistance through Tennessee Office of Refugees and they will receive vendor payments to help with housing in the amount of \$491 per month for 8 months. I will attach a copy of the passport, I-94A card, the back of the I-94A card, the cover sheet from World Relief Memphis and the policy we found in the manual. Are the non-citizens eligible and are is in the vendor payments counted in the SNAP budget?

Answer: After reviewing material sent from the regional office, we believe the individuals are eligible based on the fact that:

Parolees and Cuban or Haitian Entrants are listed as "Qualified", and Cuban and Haitian entrants have no waiting period or additional condition needed to be eligible for SNAP.

"Cubans or Haitians classified as Cuban or Haitian Entrants under Section 501(e) of the Refugee Education Assistance Act of 1980 are considered qualified aliens. **This law defines a Cuban or Haitian Entrant as:**

**(1) any individual granted parole as a Cuban/Haitian Entrant** (Status Pending) or granted any other special status subsequently established under the immigration laws for nationals of Cuba or Haiti, regardless of the status of the individual at the time assistance or services are provided; and

**(2) any other national of Cuba or Haiti –**

**(A) who—**

**(i) was paroled** into the United States and has not acquired any other status under the Immigration and Nationality Act:

**(ii) is the subject of removal proceedings under the Immigration and Nationality Act; or**

**(iii) has an application for asylum pending with the Immigration and Naturalization Service; and**

(B) with respect to whom a final, non-appealable, and legally enforceable order of removal has not been entered.

As qualified aliens, Cuban or Haitian Entrants are eligible for SNAP benefits indefinitely without a waiting period.”

The Stamp on the card states that they have been “paroled”.

Vendor payments are not countable income under, our July 2017 SNAP Policy manual states:

**(26) Vendor Payments**

Money payments that are not payable directly to the household but are paid to a third-party for the household’s expenses are vendor payments and are excluded.

FNS also provided this link [https://fns-prod.azureedge.net/sites/default/files/snap/Non-Citizen\\_Guidance\\_063011.pdf](https://fns-prod.azureedge.net/sites/default/files/snap/Non-Citizen_Guidance_063011.pdf)

2. We have a person who was granted asylum and then became an LPR in 2010. She is not subject to the 5-year ban but policy states Asylees who become LPRs continue to be eligible as Asylees effective the date of entry for up to seven years or until they meet a qualifying condition that makes them eligible for an unlimited period of time. Her 7 years have passed but according to Bulletin 5 [FA-10-03](#), dated 2-26-10 and the manual it says qualified aliens have unlimited eligibility if they were granted asylum under section 208 of the INA. So is this person not subject to the 7-year rule or no?

Answer: Here is a link to the Handbook from FNS.

[https://fns-prod.azureedge.net/sites/default/files/snap/Non-Citizen\\_Guidance\\_063011.pdf](https://fns-prod.azureedge.net/sites/default/files/snap/Non-Citizen_Guidance_063011.pdf)

(Page 4 has a good flow chart. The paragraph at the top of that page also talks about the seven-year rule.)

The bulletin and SNAP Guidance on Non-Citizen Eligibility states that they have **unlimited** potential eligibility is correct, so they are **not** subject to the 7-year rule.

3. This is the second case in 2 days that we have had an alien that was coded correctly but ACCENT is not working correctly. The supervisor called the help desk and was told that the codes did not work, and we needed to either fiat these people in or out or deny the case? Is this correct?

Answer: We found in the bulletin linked below that “In FF and SNAP AGs, ACCENT will automatically fail citizenship **only** for individuals with alien status code of “IA.”

[https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/aia\\_eia/aia-13-06.pdf](https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/aia_eia/aia-13-06.pdf)

[https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/aia\\_eia/aia-13-06-a1.pdf](https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/aia_eia/aia-13-06-a1.pdf)

4. We received an application for SNAP benefits. We ran the customer through SAVE and it coded them “DACA employment authorized” with an entry date of 8/1/2003. In doing some research I do not think they would be eligible for SNAP benefits. However, since I am unable to find any DACA specific documentation from FNS I was hoping you could verify their eligibility status.

Answer from FNS: Based upon information from the US Citizenship and Immigration Services, this status was created in 2012 to allow certain individuals who initially arrived in this country as children a period of deferred action on any potential action by USCIS to remove them from the US. While it does allow them to work, it does not provide lawful status. Unless this individual has additional information about an immigration status that meets the SNAP criteria, they are not SNAP eligible.

5. We checked SAVE and it listed them as “Non-Immigrant” are they eligible for SNAP?

Answer: Non-immigrants are here on temporary basis (such as a student). They are not eligible for SNAP, unless they meet other qualifying criteria.

6. How should I code this child on AEICZ? His father stated he has a visitor's VISA, and was born in Jordan, but since his adoption in March, has been issued a ST of TN BC.

Answer: Since they have been legally adopted they are now a US citizen. You will delete the AEICZ screen, go back to AEIIM and code them as a Y for US citizen use BC has verification and update CLRC with actions taken.

7. What is the SNAP policy regarding children (under age 18) of an ineligible alien family. They are admitted to the U.S. as lawful permanent residents but less than 5 years.

Answer: If they are here legally and are under 18 they are eligible. They do not have to meet the 5-year rule.

To be eligible for SNAP, most non-citizens must be in a qualified alien category **and** meet one additional condition.

**5 years of residence** – has lived in the U.S. as a qualified alien for 5 years from the date of entry.

**40 qualifying work quarters** – an LPR with credit for 40 qualifying work quarters.

**Children under 18** – any qualified alien under 18 years of age who lawfully resides in the U.S.

**Blind or disabled** – blind or disabled receiving benefits or assistance for their condition regardless of entry date.

**Elderly born on or before 8-22-31 who lawfully resided in the U.S. on 8-22-96.**

**Military connection** – an individual who is lawfully residing in a State and is on active duty in the military (excluding National Guard) or is an honorably discharged veteran whose discharge is not because of immigration status (includes spouse, surviving spouse if not married, and unmarried dependent children). A discharge —Under Honorable Conditions, which is not the same as an honorable discharge, does not meet this requirement.

8. We have a SAVE outcome we have not seen before. If an applicant has a citizenship status of “Temporary Protected Status – Employment Authorized” – are they eligible for SNAP benefits?

Answer: [https://fns-prod.azureedge.net/sites/default/files/snap/Non-Citizen\\_Guidance\\_063011.pdf](https://fns-prod.azureedge.net/sites/default/files/snap/Non-Citizen_Guidance_063011.pdf)  
Individuals granted Temporary Protected Status (TPS) are permitted to remain temporarily in the U.S. because their home nation is suffering under armed conflict, environmental disaster, or other —extraordinary or temporary conditions. **Any non-citizens granted TPS, unless in some other qualifying status, are not eligible to receive SNAP benefits.** For example, this exclusion applies to Haitian nationals granted TPS unless they otherwise meet the definition of a Cuban or Haitian entrant under Section 501(e) of the Refugee Education and Assistance Act of 1980.

9. Case has two minor children and two adults. SAVE says: TEMPORARY I-551 STAMP. Would they or the children be eligible for SNAP benefits?

Answer: The Temporary 1-551 Stamp means they are granted LPR status, but the stamp is temporary for 1 year and is typically stamped on their passport. Before the end of the first year they should receive their permanent papers. They should be treated like any other LPR. The children are eligible based on the highlighted section below. The adults would have to meet one as well.

**They need to meet one of the following criteria**

- 5 years of residence – has lived in the U.S. as a qualified alien for 5 years from the date of entry.
- 40 qualifying work quarters – an LPR with credit for 40 qualifying work quarters.
- Children under 18 – any qualified alien under 18 years of age who lawfully resides in the U.S.
- Blind or disabled – blind or disabled receiving benefits or assistance for their condition regardless of entry date.
- Elderly born on or before 8-22-31 who lawfully resided in the U.S. on 8-22-96.
- Military connection – an individual who is lawfully residing in a State and is on active duty in the military (excluding National Guard) or is an honorably discharged veteran whose discharge is not because of immigration status (includes spouse, surviving spouse if not married, and unmarried dependent children). A discharge —Under Honorable Conditions, which is not the same as an honorable discharge, does not meet this requirement.

**If they are any of the below they are eligible without a waiting period.**

- Refugees
- Victims of severe trafficking
- Asylees or Deportation Withheld
- Amerasians
- Cuban and Haitian entrants
- Iraqi and Afghan special immigrants
- Certain American Indians born abroad
- Hmong or Highland Laotian tribal members
- Qualified Alien children under 18
- Individuals receiving benefits or assistance for blindness or disability<sup>1</sup>
- Elderly who were lawfully residing in the U.S. and 65 or older on 8/22/1996
- Military connection<sup>2</sup>

Follow-up: If a non-citizen child receiving SNAP turns 18 years of age during a certification period, and has been living in the United States for over five years, is the child still eligible to receive SNAP?

Answer: Yes. Once a child turns 18, the child may continue to be eligible for SNAP as long as he or she meets other program criteria.

Follow-Up: What if they have been here less than 5 years? Are they still eligible?

Answer: Maybe. If the non-citizen meets one of the other additional eligibility conditions and meets other SNAP policy criteria, he or she continues to be potentially eligible to receive SNAP benefits.

11. We have a question regarding the green cards expiring during the certification period. Example, individual provides the green card at application and was approved as LPR but come renewal the green card has expired, and the individual does not have a new card. Are they still eligible for benefits? If not, would they now be considered an illegal alien?

Answer: According to the U.S. Citizenship and Immigration Services, once you become a lawful permanent resident (green card holder), you maintain permanent resident status until you:

- Apply for and complete the naturalization process; or
- Lose or abandon your status

Having an expired card does not mean you have lost or abandon your LPR status.

To lose or abandon your status you must:

1. Removal Proceedings (losing your status)

You will lose your permanent resident status if an immigration judge issues a final removal order against you.

INA sections 212 and 237 describe the grounds on which you may be ordered removed from the United States.

2. Abandoning Permanent Resident Status

You may also lose your permanent resident status by intentionally abandoning it. You may be found to have abandoned your status if you:

- Move to another country, intending to live there permanently.
- Remain outside of the United States for an extended period of time, unless you intended this to be a temporary absence, as shown by:
  - o the reason for your trip;
  - o How long you intended to be absent from the United States;
  - o Any other circumstances of your absence; and
  - o Any events that may have prolonged your absence.
  - o Note: Obtaining a re-entry permit from USCIS before you leave, or a returning resident visa (SB-1) from a U.S. consulate while abroad, may assist you in showing that you intended only a temporary absence.
- Fail to file income tax returns while living outside of the United States for any period.
- Declare yourself a “nonimmigrant” on your U.S. tax returns

This customer has not lost their LPR status by simply having an expired card. However, we should encourage the applicant to contact USCIS ( <https://www.uscis.gov/about-us/contact-us> ) to renew their status. There is a fee for renewal, but it may be waived due to destitution. Although DHS cannot help with the cost, some advocacy agencies may have funds available.

12. An 18-year-old high school student is pregnant. She lives with her mother and it appears neither are citizens or resident legal aliens; however, would they be considered eligible for SNAP based on their income. Are they eligible for SNAP?

Answer: There are a lot of criteria that would need to be discussed with the customer to know if they are eligible or not. The EC must ask the customer what brought them here. Examples of this would be are they: Refugees, victims of severe trafficking, Asylees or do they have Deportation Withheld, Amerasians, Cuban and Haitian entrants, Iraqi and Afghan special immigrants, Certain American Indians born abroad, Hmong or Highland Laotian tribal members, Individuals receiving benefits or assistance for blindness or disability, Elderly who were lawfully residing in the U.S. and 65 or older on August 22, 1996, or have a Military connection? The Alien Status Desk Guide on the toolbox is a good resource for citizenship questions.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/train/toolbox/ce/ALIENSTATUS.PDF>

13. We are doing a review on a case that has 2 Asylees from Uzbekistan. They have been admitted under Section 209. The woman in the household has her LPR (less than 5 years), the husband does not. The manual speaks to Asylees admitted under Section 208, but not 209. Does this matter?

Answer: In regard to being admitted in as section 209 the Asylee has to first be admitted under section 207 based on the U.S. Citizenship and Immigration Services.

<https://www.uscis.gov/ilink/docView/SLB/HTML/SLB/0-0-0-1/0-0-0-29/0-0-0-1825.html>

Individuals admitted under section 207 are eligible for SNAP benefits. They are qualified aliens and are eligible without having to meet an additional condition (such as having 40 qualifying work quarters). There used to be a 7-year limit on how long someone could receive benefits. Now, there are no time limits for how long eligible non-citizens can receive SNAP.

14. Can a non-citizen receive credit for work performed while he or she was in an undocumented status?

Answer: Yes. The SSA counts quarters worked while a person is living in this country regardless of the person's immigration status at the time the work was performed. For SNAP purposes, these quarters are counted unless they are quarters in which not enough income was earned or are quarters earned after December 31, 1996 in which the non-citizen received Federal means-tested public benefits. Therefore, a non-citizen may be eligible for SNAP who has not been in qualified alien status for 5 years if they have reached 40 qualifying quarters.

15. Are all U.S. Citizens considered U.S. Nationals?

Answer: Yes, but there are some U.S. Nationals who are not U.S. Citizens. A U.S. National who is not a U.S. Citizen is defined as a person born in or having ties with "an outlying possession of the United States". As of 2005 this only applies to American Samoan and Swains Island. In order to be considered an Alien, FNS says that any person not a citizen or national of the United States is an alien.

16. Are Iraqi refugees that citizenship status changes from a refugee to a LPR status less than five years still eligible for SNAP benefits?

Answer: Yes, Iraq Refugees are qualified aliens when they are admitted under § 101(a)(27), they are exempt from the five-year residency requirement if they meet the special immigrant status. The FNS Guidance on Non-citizens states "those non-citizens are exempt from the five-year residency requirement and are eligible indefinitely, both before and after adjustment of status to LPR. Their exemption from the five-year waiting period is not affected by their adjustment to LPR status."

17. If an illegal alien under DACA status "DACA employment authorized" is a minor in high school and they are working is their income included in case?

Answer: There are a lot of DACA individuals still in high school, if they are a minor in school, even though their pro-rata share should be included on AEIEI, but it will correctly be excluded in the budget. Below is section Q from Chapter 21: Payments/Benefits Excluded in Eligibility Determination.

#### Earnings of Children

Do not count the earned income of a household member under age 18 when:

1. that person is a student at least half-time in elementary, high school or classes to obtain a General Equivalency Diploma (GED); and
2. lives with a natural or adoptive parent or stepparent, or
3. is under the control of a household member other than a parent

If their pro-rata share is included on AEIEI, it should be excluded in the budget based on earnings of children policy.

18. SAVE verified a code of admissions as "AO", what does this code of admissions mean?



Answer: "AO" on the INS Codes of Admissions under "Classes Currently in Use-Other Categories of Aliens" AO stands for "AO ASYLEE APPLICANT WITHOUT WORK AUTHORIZATION" Asylees are granted asylum under Immigration and Nationality Act (INA) §208 and are considered qualified aliens.

19. If during an interview in which the applicant has been receiving benefits states to the worker they are not U.S. citizens and verification of citizenship is not received, how does the county proceed? The applicant only provided a verbal statement that they are not a citizen, but without documentation we can't confirm if they are eligible for the service.

Answer: Section M from Chapter 6: Citizenship and Alien Status Requirement goes over the action to take when citizenship cannot be verified and that in the case of not being able to verify immigration status, the alien is ineligible to receive benefits and without appropriate documentation, we cannot determine eligibility.

#### M. Ineligible Aliens

If the alien declines or fails to present documentation of immigration status or the caseworker is unable to obtain verification of the alien's status, the alien should not be assumed to be an illegal alien. However, without appropriate documentation, we cannot determine eligibility for benefits.

20. Are customers admitted under INS 207C eligible for SNAP?

Answer: Yes, this clarifies entry to the U.S. as a refugee and admitted under §207 of the INS are eligible for SNAP.

## DEDUCTIONS

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### (Shelter)

1. Customer lives in Housing apartments. Doubled checked today with Housing and verified she does pay her utility bill herself and not with utility check or assistance. It is a pay as you go meter where they can put any amount they wish on the account, and then add money as they use the electricity. An electric printout was seen at the time she moved to this location. Is the customer eligible for the BUA?

Answer: According to the utility chart and BUA policy customers who are billed for excess are eligible for the BUA.

2. Does LIHEAA assistance affect a customers' eligibility for the SUA?

Answer: Based on the Farm bill if households receive a payment greater than \$20 Annually in Low Income Heating Assistance Program (LIHEAP) benefits in the current month or in the immediately preceding 12 months they may qualify for the Standard Utility Allowance (SUA) based on receipt of LIHEAP. Please refer [Administrative Policies and Procedures: SNAP Deductions from Income](#) to section K under e.

3. In regard to shelter deductions. If a homeless household lives in their car are they entitled to a shelter deduction for the car payment? We found the hard copy of a 1992 Policy Memo from FNS to another state that states a household "may claim the car payment as a shelter cost, but not gas, repairs, or other operating cost." We were unable to find the clearance on the partner web and wondered if it still applied?

Answer: From FNS regional office. Yes, we can confirm that the car payments can be considered as a shelter expense. We have reviewed this policy with the FNS national office as recently as 2013. Specific factors are:

- Payments may be considered as a shelter expense if the payments exceed the homeless shelter deduction amount.
- Insurance on the vehicle itself can be considered, but not liability insurance, etc.
- Costs of gasoline, operation, tags, etc. are not considered.
- Actual utilities if any may be allowed but not the Standard allowances.

4. Can rental Insurance be an allowable shelter deduction?

Answer: No, According to Federal Regulations rental insurance would not be an allowable deduction. Federal Reg: 273.9(d)(6)(ii)(B) Property taxes, State and local assessments, and insurance on the structure itself, but not separate costs for insuring furniture or personal belongings.

5. During interview at certification or recertification, if we recognize that a household's expenses exceed income, we are to ask more probing questions as to how needs are met. If expenses exceeds income and the customer cannot explain how needs will be met, what should be the departments actions?

Answer: Shelter Deductions are allowed as incurred regardless of ability to pay. Although the household has no money to subtract the deduction from, if they have verified that they have the expense then the expense can be keyed.

The household should be questioned as to how they have been paying the expense and how they plan to continue to pay the expense to see if they had money in the past that they were paying it with that they no longer have, if someone has been giving them money to pay the expense, or if someone has been paying the expense for them.

If someone has been giving them money and plans to continue or gave them money in month of application then that would be unearned income.

If someone is paying for them ongoing directly to the provider then the expense would not be allowed. If they don't know how they will be paying in the future then that should be documented.

6. I have a father, mother and daughter who applied for SNAP benefits. They were found to be over the income limit. The mother came to the office and spoke with me regarding the disposition on her case. The mother has been attending school in another county. She is staying down there 50% of the time (paying rent and utilities). If she is still a student and staying down there 50% of the time can we consider the rent she pays while she is staying there in addition to the rent that she and her husband pay in Kingsport?

Answer (Past clearance from FNS): Since the HH occupies both residences, the rent for both may be allowed. However, only one SUA is allowed per household. The SUA is intended to cover all of the household's utility expenses. If the HH can verify actual utility expenses in excess of the SUA, it may claim actual utility expenses on both residences. However, only one telephone deduction is allowed.

7. In regard to shelter deductions-when do we remove the deduction or leave the old amount in the case?

ANSWER: If a change is reported in shelter (increase or decrease) and the shelter amount is not verified, we need to remove any expense in the case and process without a shelter deduction.

EXAMPLES:

- If they report or we become aware of a decrease in shelter and they do not verify it, do we remove the expense?

ANSWER: Yes, remove the deduction.

- If they report or we become aware of an increase in shelter and they do not verify it, do we leave the old amount, or do we remove it?  
ANSWER: Remove the deduction
- If at renewal, they say there is a change in shelter and they do not verify it, do we remove the expense all together?  
ANSWER: Yes, remove the deduction

8. If a customer is charged rent, but they are unable to pay it at this time can they still receive a deduction? I have been told differently in the past.

ANSWER: Yes. "except as provided in section 1240-1-4-.17(8)(d) and 1240-1-4-.17(8)( e ) **a deduction is allowed in the month the expense is billed or otherwise becomes due**, regardless of when the household intends to pay the expense. Amounts carried forward from past billing periods are not deductible, even if included with the most recent billing and pay by the household."

9. We received a clearance in 2013 that said flat rate to a landlord is BUA. The new manual says SUA. Which is correct?

ANSWER: The information in the updated manual is correct. Federal Regulations: §273.9 Income and deductions. (6) Shelter costs (iii) Standard utility allowances (C) "A heating or cooling standard is available to households in private rental housing who are billed by their landlords on the basis of individual usage **or who are charged a flat rate separately from their rent.**

10. We have a customer that has air conditioning and is charged electric May-Sept. Is this customer eligible for BUA or SUA?

ANSWER: They are eligible for the SUA. They only have to have major heating **or** cooling during the certification period. They don't have to have both, and it doesn't have to be every month.

11. Customer provided a letter from her landlord stating that she is to pay \$600 per month of which \$100 is for utilities and \$500 is for rent. She also provided receipts showing she paid \$600 for "utilities/rent."

Per policy and state rules into order be eligible for the SUA you have to be billed separately and apart from your rent in order to be eligible for the SUA. Would the letter described meet this standard making her eligible for the SUA?

ANSWER: Yes, it is broken out as to how much she is billed for her rent and how much she is billed for her utilities. If they have a major heating/cooling she is eligible for the SUA.

12. Is the cost of wood an allowable shelter cost? Does that qualify a HH for the SUA?

ANSWER from FNS: The cost of wood itself is an allowable shelter cost. When wood is used as the primary heating source, the cost of wood shall entitle the HH to the SUA.

13. We have a customer that is paying a mandatory homeowners association fee. Is this an allowable shelter deduction?

ANSWER: A mandatory maintenance/membership fee (such as HOA) should be considered a part of the shelter cost since the occupant is required to pay it as a condition of residence.

14. Customer transferred their home to a daughter over 5 years ago. They retained a life estate to the property.

The daughter is now going to charge them \$450 a month rent to stay in this home. Can the \$450 a month rent be allowed as a shelter deduction since they retained a life estate to the property?

Answer: No. The parent is the Lifetime owner of the property and still has the exclusive right to the property during their lifetime. They are entitled to all income from the property in the event the property is rented. The children are called a “remainderman” and have an interest in the property, but they do not have the right to occupy it or rent it out. In other words that \$450 they are paying should be given back to them because the income on that property is theirs.

15. We have a customer that has an IPV. The case is her and her child. It is excluding her from the allotment amount however she is included in the SUA. It is giving them an SUA deduction for a 2 person not a 1. Is that correct?

Answer: Yes, (i) Income, resources, and deductible expenses. The income and resources of the ineligible household member(s) shall continue to count in their entirety, and **the entire household's allowable earned income, standard, medical, dependent care, child support, and excess shelter deductions shall continue to apply to the remaining household members.**

16. If a mortgage is in foreclosure, would the mortgage amount count as a shelter deduction?

Answer: If they are not being billed for the payment, we do not need to allow the deduction. If they are still being billed and owe the amount, then allow the deduction.

17. A customer got a \$4,000.00 tax refund a few months ago and because she was out of work, she used the majority of that refund to pay ahead on her rent. So she is currently paid up through August of 2017. Can she get an ongoing rent deduction in her budget if she has paid up through August?

Answer: Yes, she can get an on-going rent deduction since she will have “Continuing charges for the shelter occupied by the household, including rent” it does not matter how she paid it or even if she is paying it.

18. Can pet fees be included as a shelter deduction?

Answer: Yes, if the pet fee is included in the rent billed by the landlord as a continuing charge for shelter, it can be included in the shelter costs as long as it is not a onetime deposit. Please view the section from Federal Regulation 273.9 (6)(A) below.

(A) Continuing charges for the shelter occupied by the household, including rent, mortgage, condo and association fees, or other continuing charges leading to the ownership of the shelter such as loan repayments for the purchase of a mobile home, including interest on such payments.

19. If a mortgage is in the name of another member of the household who passes away and the mortgage continues to be in the deceased person’s name, if another household member resides in the home and continues to pay the mortgage although they are not obligated to it, can they receive a shelter deduction?

Answer: Yes, the mortgage can count as a shelter cost even if the mortgage is not in their name. They are paying continuing charges for shelter occupied by the household. Federal regulations defines shelter costs as CFR 273.9 (6)(ii)(A) “Continuing charges for the shelter occupied by the household, including rent, mortgage, condo and association fees, or other continuing charges leading to the

ownership of the shelter such as loan repayments for the purchase of a mobile home, including interest on such payments.”

20. If a customer is renting and charged a mandatory entertainment/IT monthly charge for expanded TV cable service and free internet services, do we allow the entertainment charges as rent expense. It is specified as a different added charge. \$640 rent and \$70 for the entertainment charge, but it is mandatory as part of the rental agreement.

Answer: If the \$70.00 entertainment fee is required as a condition of residence that if not paid could result in eviction, then it can be included as shelter cost. If it is just an extra that they have elected to have, then no, it is not allowed.

21. A customer has a “Pay as You Go” Pre-pay account which they would deduct daily from an account that is pre-paid. When there was no money left or the account got low, they would send a text and the customer would have had to put money in or the utilities would have been cut off. This is what many people are doing now in lieu of paying the deposit. The customers are responsible for the entire amount of the electric bill in the “Pay as You Go” account. Would this qualify them to get the SUA deduction?

Answer: Yes, the “Pay as You Go” would receive the SUA because they are charged and is responsible for a major heating and cooling bill regardless of how the customer pays it (early, on time, or not at all).

22. Are late fees allowed as a shelter or utility deduction?

Answer: No, late fees, penalties, and amounts carried forward from previous billing are not an allowable shelter/utility deduction.

23. Can voluntary payments that a customer makes to the USDA for a subsidy recapture loan on a home be considered a shelter cost even if the USDA is not requiring the customer to make the payments?

Answer: Monthly subsidy recapture payments made to the USDA can be used as a shelter deduction as the payment is made to reduce the payment due on the home.

The customer has the option to pay the loan or defer to the sale of the home. If the customer has chosen to repay the loan, the payments can be used as a shelter deduction.

(Child Care/Support)

1. Absent Parent paying on arrearage Child Support for child who is now over 18. If we see court order, can we give as a SNAP deduction?

Answer: Please refer to Section L in the [Administrative Policies and Procedures: 24.18 SNAP Deductions from Income](#).

From Federal Information

17) Legally obligated child support payments paid by a household member to or for a non-household member, including payments made to a third party on behalf of the non-household member (vendor payments) and amounts paid toward child support arrearages.

2. Do we count child support paid in a SNAP budget by someone who is convicted of a drug felony? The SNAP manual addresses shelter and dependent care costs billed to an excluded HH member, but I wasn't sure that this applies to child support payments.

Answer: Child support payments are considered a type of dependent care cost and should be handled accordingly.

3. HH member is receiving childcare assistance through families first. They have an overage they are responsible for paying. Are they eligible for a childcare deduction?

Answer: For SNAP, customers are eligible to receive a deduction for actual costs for the care of a child or other dependents when necessary for a household member to accept or continue employment, seek employment in compliance with an E & T component (or an equivalent effort by those not subject to E&T), or attend training or education preparatory to employment. This includes overages and co-pays when they are receiving childcare assistance through Families First. For Families First, they can NOT receive childcare assistance and a deduction at the same time.

\*In order to give the customer credit for paying the overages & co-pays in SNAP, we list this information on the AEFCS (Child Support Payment) screen. This will allow ACCENT to place the deduction correctly in the SNAP budget and exclude it from the Families First budget. Be sure to explain in CLRC.

4. If a child is over a certain age (12 and older) and not disabled, can the household still qualify for a childcare deduction?

Answer: Federal Regulations state: *Dependent care. Payments for the actual costs for the **care of children or other dependents** when necessary for a household member to accept or continue employment, comply with the employment and training requirements.* This deduction is not limited to the care of young children. It allows for cost of care for children (under 18) and/or disabled individuals when needed for a customer to accept or continue employment or comply with the employment and training requirements.

5. We have a case where they are paying child support to the mother in KY, however, the child is in the home with the father. There is not good documentation in the case. We are thinking that we should remove the deduction, correct?

ANSWER: Policy states 1240-1-4-.17(8)(f)(6)

“Court ordered child support payments paid by a SNAP household member to or for an individual living outside the household are allowed as a deduction.”

The child Support is being paid to someone that lives outside of the home.

6. An investigative specialist was asking if tuition expense for a private school is an allowable deduction for SNAP?

ANSWER: It depends on the type of tuition the customer is paying. Some private daycares and pre-schools charge “tuition”. The tuition for private nursery schools and private day cares are deductible when such care enables a household member to accept or continue employment, comply with the employment and training requirements, or attend training or pursue education which is preparatory to employment. The tuition of kindergarten varies depending on the situation. Where attendance in kindergarten is required, no deduction would be allowed. In these situations’ kindergarten would be considered as the first level of school. If attendance were voluntary, tuition for kindergarten would be considered as childcare and a deduction would be allowed. Although the tuition of school is not allowed, day care costs/tuition for time outside the normal operating school hours, sometimes labeled "extended day care," could be allowed.

7. The child support that is being paid is to a parent living outside the home but the child that it is ordered for is living with the parent that is paying the child support. We have been told in the past that we could not give a credit for paying court ordered child support for a child that was getting stamps in the case. What is the correct answer?

ANSWER: The current clearance is correct and supersedes the previous clearance. Federal regulations match our policy. *Child support deduction*- "legally obligated child support payments paid by a household member to or for a non-household member". Payments legally obligated to a parent not in the HH are allowable.

Follow-Up: I think what we confused is usually the child support is obligated to the child.

ANSWER: My understanding is that the child support was parent income. I reached out to General Counsel to confirm my thoughts. Here is their response:

*"the support is ordered to be paid to the Primary Residential Parent (PRP) (although in some cases wherein the PRP has a much greater income than the Alternate Residential Parent (ARP), the PRP may have to pay the ARP.) The support ordered belongs to the obligee for the benefit of the child. Some people make the mistake of believing the support belongs to the child such as a case where the child has emancipated and is now an adult trying to get the support from their parent. This is incorrect. The support is owed to the obligee to support the child during his/her minority."*

We can give the parent credit for paying child support **TO** the parent that is not in the home even though the child is in the SNAP HH.

8. A customer has a child that attends a karate academy and wants to use the expense as day care deduction in her SNAP case, is this an allowable deduction?

Answer: Yes, as long as the after-school care is needed to accept or continue employment, seek employment in compliance with an E & T component (or an equivalent effort by those not subject to E&T), or attend training or education preparatory to employment.

Follow-Up: So if this is a 1 or 2 day after school program, can the customer receive the deduction?

Answer: Yes, it does not matter how many days in the week the dependent care is used as long as it is used for the reasons mentioned above.

9. We have a customer who is court ordered to pay \$133 per month in child support. Instead of paying monthly, she chose to pay up front for several months-\$6000. Do we use this to deduct the \$133 per month ongoing as the ordered amount, or is this only allowed as a one-time deduction in the month they paid it?

Answer: The court ordered child support of \$133.00 is what would be listed on AEFCS because although the customer paid a lump sum of \$6000.00, the deduction is reoccurring, and the reoccurring amount needs to be listed. Clearance was received in the past from FNS that stated they didn't want to punish someone that made responsible decisions and paid-up front. Even if a lump sum is paid up front, the customer is still eligible for the monthly deduction.

10. Customer is out on maternity. She is continuing to pay her childcare expense in order to "hold" her spot and is hopeful to return to work in September. If the customer has a job and is out due to a "short term disability" can we allow the deduction in that instance?

Answer: SNAP Policy received a policy clearance from FNS stating that if the leave is "necessary for the household to accept or continue employment" per 273.9(d)(4) in some situations payments for dependent care to enable the customer to return back to work could be considered to fall within this scope if sufficiently documented.

11. What ACCENT screen should be used to enter dependent care expenses that are being paid for a non-household member?

Answer: In this scenario, AEFCS would be used to input the dependent care payment in order for it to calculate in the SNAP budget. Please clearly document CLRC with the actions taken.

12. Does the mileage to and from daycare count as a deduction?

Answer: Yes, federal regulations states that allowable dependent care costs include “(ii) Transportation costs to and from the care facility;”

(Medical)

1. Service animal – Customer is requesting to have a deduction in the SNAP benefits for the cost of dog food. The customer has provided a note from her physician stating “due to patient’s current medical condition, it would benefit xxx to have a pet” ... Customer has **not** provided any documentation to verify the pet is a Certified Service Animal. Question: Is this an allowable deduction if the animal were a Certified Service Animal? Does the animal have to be certified?

Answer: There is no indication that the animal must be certified. The material does refer to specially trained. Please refer to number 7 section P Allowable Medical Expenses in [Administrative Policies and Procedures: 24.18 SNAP Deductions from Income](#).

2. I have checked the SNAP manual and found at 25.1 (1) 9 that “reasonable cost of transportation and lodging to obtain medical treatment services” (can be used as a deduction). The Rules at 1240-01-04-.17 (8) 6. (iii) (ix) say the same thing. Have we said somewhere that it is \$.47 a mile? At 25.1(2) the SNAP manual states further that a medical deduction is the non-reimbursable portion of an allowable medical cost that exceeds 35.00 a month. This seems to be saying that if a customer spends in excess of \$35.00 per month in travel for medical reasons, then anything over 35.00 can be counted as a deduction.

Answer: For SNAP we key all potentially allowable medical expenses into accent and then accent allows the deduction based on the amount of them altogether that is over \$35.00.

I found this in the training region Q and A’s:

8. What mileage amount do we allow for transportation costs to a doctor or for treatment? **(3/07 – 6/07)**

Response: We can allow the state mileage rate.

We have also been instructed that we can allow Taxi and bus fee’s etc. etc., the above is considered reasonable if the customer is using their transportation.

3. If a customer has medical bills that have been turned over to collection agencies can those bills be counted as medical expenses in either of the following situations:

[Assuming all other requirements are met](#)

A. The collection agency paid the medical provider and is now the owner of the bill.

B. The medical provider still shows the bill as due.

C. The medical provider has written the debt off as a bad/uncollectable debt and is no longer attempting to collect.

Answer:           A. No                   B. Yes   C. No



4. Would a Life Alert monthly fee or any form of medical alert system which is paid monthly be an allowable medical deduction?

Answer: We have an email from FNS explaining that ““other prescribed equipment” can qualify as a medical deduction. Provided that the physician verifies for the worker that the cell phone and/or the emergency response beeper program are a medical necessity/requirement for the individual, the deduction should be allowed. It is advisable that the worker include documentation in the case file confirming that medical need has been verified (this may include contacting the physician).”

5. Appellant, an SSA recipient, is hearing-impaired and uses Video Relay Service, for which he pays an out-of-pocket monthly fee.

VRS is a relatively new technology that allows a hearing-impaired person to communicate with voice telephone users through video equipment rather than through typed text (<http://www.fcc.gov/guides/video-relay-services>)

I do not see this particular expense listed in the manual, which in connection to hearing-impaired individuals refers only to “monthly telephone fees for amplifiers and warning signals for handicapped person”, “hearing aids”, and costs of typewriter equipment for the deaf.”

Is the VRS monthly fee an allowable medical expense?

Answer: We consulted with FNS regional office and they provided the response below.

**Background Information:** Tennessee asked if charges for a video relay service can be considered allowable medical deductions. The video relay allows hard of hearing persons to communicate with a service that sends and receives conversation via American Sign Language.

**Regional Analysis and Conclusion:** We concur the monthly charge is analogous to a hearing aid and other accommodations for disabilities. The charge would be considered a medical expense. The cost Internet access would not be.

6. Can the purchase of Depends (for incontinence) be used as a SNAP medical deduction under any circumstances?

Answer: We just received confirmation from FNS Regional Office that they can be considered “medical supplies.... or other prescribed equipment” if approved or prescribed by a qualified health professional.

**273.9 (d)(3)**

(iii) Prescription drugs when prescribed by a licensed practitioner authorized under State law and other over-the-counter medication (including insulin) when approved by a licensed practitioner or other qualified health professional; in addition, costs of medical supplies, sick-room equipment (including rental) or other prescribed equipment are deductible.

7. I have been asked a question about coding a SSI terminated person as disabled when they have not gotten SSI cash in many years. SOLQ shows on-set of disability as date of birth. The SSI in this case has been closed for some time due to over the income standards for the family.

Answer: The policy manual and Federal regulations both indicate they must be receiving cash or Medicaid due to disability; however we asked and were provided with clearance from FNS that if Social Security determined them disabled and the payment ended or never started due to income/ resource rather than due to end of disability, as long as they still show as classified as disabled by the Social Security Office then we can consider them to be disabled.

8. I am reviewing a case and the person is a disabled vet. Based on AEIDP, it states he is 90% disabled. I thought a person had to be 100% disabled, but I am having trouble finding this in policy. The only thing I have found thus starts the following:

(4) is a veteran receiving VA benefits for a service or non-service-connected disability rated or paid as total or is considered by VA standards to be in need of regular aid and attendance or considered permanently housebound.

**Answer:** They must be rated or paid as totally disabled OR be considered by VA standards to be in need of regular aid and attendance or be considered permanently housebound.

9. Are individuals that receive SSI payments potentially eligible for medical deductions? Are SSI essential individuals potentially eligible for medical deductions?

Answer: Elderly and disabled individuals are potentially eligible for medical deductions themselves. Individuals receiving SSI because they are disabled are potentially eligible for medical deductions. SSI essential individuals are not eligible for medical deductions because they themselves are not disabled. The link below may help in regard to understanding the term SSI essential.

<http://www.disabilityadvisor.com/qualifying-for-ssi-disability-2/>

Please refer to section O Criteria for Determining Who is Eligible for a Medical Deduction in the [Administrative Policies and Procedures: 24.18 SNAP Deductions from Income](#).

10. If the Social Security Office has determined that someone is disabled and still considers them to be disabled but the disability payment ends due to income etc. can the person receive a medical deduction?

Answer: Yes. Emails and letters from FNS regional office are on file in State Office.

11. Is the cost of ENSURE an allowable medical deduction?

Answer: NO. From Federal regulations: (3) Excess medical deduction. That portion of medical expenses in excess of \$35 per month, excluding special diets, incurred by any household member who is elderly or disabled as defined in §271.2.

12. I have a customer who is visually impaired and uses an iPhone because she states it has functions that increase accessibility for the visually impaired. If it has been verified as needed by a Dr, would her monthly phone bill be able to be counted as a medical deduction? However, she is receiving the BUA so does the BUA cover this deduction?

Answer: They are eligible for the BUA if they have two non-major heating/cooling utilities. If the BUA is based solely upon the telephone expense and one other, and you allow the monthly phone cost as a medical deduction, then the BUA should be removed so the expense is not allowed twice. An option may be to calculate the budget both ways and choose the one which is a greater benefit to the household.

Follow-Up Question: This same customer provided a receipt where she bought this iPhone for \$551.70. She borrowed this money from a friend and is paying it back in monthly installments as a loan. Can this be counted as a medical deduction?

Answer: Yes, you may allow payments on a loan for a one-time medical expense, but you cannot allow any interest on that loan.

Follow-up Question: She also provided a receipt for Apple Care, which is insurance on her iPhone. The charge is \$109.24. Is this an allowable dedication?

Answer: Unless the Doctor included Apple Care in the prescription, no, this is an optional expense not necessary to meet the medical need of the individual.

13. Have a customer who is turning in visits to a massage therapist with a Dr.'s statement that these are medically necessary to keep patient in good health. Are these allowable expenses?

Answer: According to FNS: Massage Therapy is allowable as long as the treatment is performed by a licensed therapist. A Doctor's recommendation does not automatically qualify. You will need to verify that it is performed by a licensed massage therapist.

14. I have a customer that goes to a Psychological Center and pays a \$35.00 co-payment 2 times a month. Can we use the co-payments that he pays as a Medical expense?

Answer: Yes. Co-pays are considered out of pocket medical expenses and are allowed as medical deductions.

15. What medical expenses are allowable for a veteran who is 100% disabled? We have a customer here that is 100% certifiable VA disabled. He has a girlfriend and children from that girlfriend. He is paying for medical insurance for his children. The VA reimburses him for any medical expenses for himself. I am thinking that he can claim medical expenses for his children, correct?

Answer: It looks like for SNAP only the actual expenses incurred by the disabled person are allowable—not the ones they may be responsible for that are incurred by someone else.

#### (1) Medical Expense

A medical expense is an identifiable medical cost incurred by a household member who meets one of the criteria given in Section B.

#### (5) Health & Hospitalization Insurance Policies

A health and hospitalization insurance policy pays for medical services, either on an out-patient basis (major medical), or due to hospitalization. The payment is normally made directly to the medical service provider or as a reimbursement to the insured.

Do not consider the following:

- a. the cost of health and accident policies that are payable in a lump sum settlement for death or dismemberment;
- b. the cost of income maintenance policies that continue mortgage or loan payments while the beneficiary is disabled; or
- c. the entire amount of a health or insurance premium if it includes coverage for household members not entitled to a medical deduction.

Allow only that portion of a health or hospitalization insurance premium assigned to a HH member eligible for a medical deduction. If specific information is not available on what portion of the premium is for the eligible member, pro rate the premium to determine the allowable amount for the eligible HH member.

Follow-up Question: I see, where it says a household member, would not the children's medical premiums, since he is the parent and responsible for their well-being, and them being part of the A/G constitute them as a household member? Couldn't he be given a medical deduction for them?

Answer: FNS provided a “Medical Handbook” that further explains how to handle medical expenses. “Only the portion of a medical insurance premium assigned to the elderly or disabled household member may be considered when computing the deductible amount. If the policy does not spell out how much of the premium is for each household member, the worker may prorate the premium amount amongst all household members. Only the prorated amount for the eligible member would be considered a deduction. If the policy holder is not elderly or disabled, but the family policy includes a person who is eligible for the medical deduction, that part of the premium for the eligible member may be used in computing the deduction”.

16. We have someone that has provided a gas receipt from Kroger in the amount of \$55.00 for a medical deduction. I know that we can count transportation and lodging but how exactly to do count this? Do we count mileage, etc.?

Answer: Our policy is to allow reasonable cost of transportation and lodging to obtain medical treatment/services;

A receipt from Kroger (I’m assuming fuel) would not be proof that this gas was used to obtain medical treatment/services. Yes, we can count mileage at the state rate, but this is just one option. We can also count cabs, van services, buses, paying a friend, etc. Say this receipt was because a friend said I will take you to the doctor, but you will have to fill up my tank, it could be allowed as a deduction if reasonable, but we would need to verify that.

17. Medical Bill has been paid by Care Credit (Customer’s Credit Card for medical bills); can this still be a deduction?

ANSWER: Page 139 in SNAP Manual c. **Charge Accounts**

Once in a while, a household pays on a one-time medical bill through a charge account, VISA, etc.

Consider the one-time medical expense as billed when the household receives the first charge account statement. At that time, give the household the option of treating the one-time medical expense as:

- a one-time medical deduction; or
- prorating the one-time expense over the remainder of the certification period.

Do not consider payment of a one-time medical expense through a charge account as a repayment plan. This is due to the fact that there is no means of establishing what portion of the individual’s monthly payment on the charge account is actually credited towards the medical expense, as opposed to other items that were also charged on the same account.

18. Customer qualifies for medical deductions as disabled. She has a treatment dental plan with total cost of service to be \$1776.00. Services have not yet been provided yet as she must pay the date of each service. The plan notes show a breakdown of 5 appointments... only the first one has been scheduled. She will schedule the next appointment after the procedures. She must pay upfront before each service is provided. The first service will be \$330 and so on until all five services are provided. Since she has to pay the day of each service, there will not ever be an unpaid balance. If it were an intake application, I know we could count the month she pays out of pocket in the application month. But, for the other services while in an open case, I am thinking we cannot count any of those since there will never be an unpaid balance as she has to pay up front. Is that correct?

ANSWER from FNS:

Information provided states that household is eligible for the excess medical deduction. Household has reported a medical bill for dental care which is an allowable expense. Expenses are “as billed” so the future medical expense should be anticipated. If the household is entitled to an excess medical deduction as provided in § 273.9(d)(3), determine if total medical expense exceed \$35. If so, subtract the portion which exceeds \$35 and allow as a deduction.

§273.9 Income and deductions.

(d)(3) Excess medical deduction. That portion of medical expenses in excess of \$35 per month, excluding special diets, incurred by any household member who is elderly or disabled as defined in §271.2. Spouses or other persons receiving benefits as a dependent of the SSI or disability and blindness recipient are not eligible to receive this deduction but persons receiving emergency SSI benefits based on presumptive eligibility are eligible for this deduction. Allowable medical costs are:

(i) Medical and dental care including psychotherapy and rehabilitation services provided by a licensed practitioner authorized by State law or other qualified health professional.

19. Customer has over the counter medication. They are Vitamin D3 200IU, Aspirin 81mg and Omega XL 300mg. As long as the individual has verification that his/her doctor or health professional approves the medication then it can be countable?

Answer: The over the counter can be allowable as long as it was approved by a Doctor/health professional. Please refer to section P Allowable Medical Expenses in the [Administrative Policies and Procedures: 24.18 SNAP Deductions from Income](#).

20. For a travel deduction for medical, is the mileage rate still \$.47/mile?

Answer: The travel rate is based on the state rate. The state rate is still .47 and has been since 2011. They are reviewed every fiscal year.

21. Is the monthly payments on a wheelchair van considered an allowable deduction or actual cost for that van?

Answer: We received a clearance in the past from FNS that the cost of a Van can't be deducted. The Miles/transportation can, the upkeep of the vehicle can, but the van itself and insurance on the van can't be included as a medical deduction.

22. We have a customer that has just applied for SNAP. His wife is in the nursing home and he wants to use her bills as a medical deduction. Is that allowable?

Answer: The husband would be eligible to count his wife's medical expenses if she was an eligible HH member, and eligible for a medical deduction, immediately prior to entering the nursing home.

23. At the point someone applies or reapplies, we use their medical bills in whatever way is to their greatest advantage. For example, if we use the medical deductions and the AU is going to be eligible for \$20 per month for 12 months (a total of \$240), or eligible for one month at \$194, or eligible for \$50 per month if spread over 6 months for a total of \$300, we will set the case up in whatever way is most advantageous for the customer. Is this correct?

Answer: It is whatever is best for the customer. If it is best for them to have it spread over 6 months to allow the customer to have a higher allotment amount, then we can do that. But, to allow it to be spread over 6 months, the certification period for the customer would need to be 6 months. When a repayment plan has not been established, there are 2 options: 1 month or the remainder of the certification period. Households reporting a one-time only medical expense, when a repayment plan has not been established, have the option of:

1. considering the expense as a one-time deduction; or
2. having the expense prorated over the certification period (if it is reported at the time of application) or prorated over the remainder of the certification period (if it is reported as a change during the certification period.)

24. Customer wants to use a medical deduction for prunes, POM juice, oregano, and “Herbal” Supplements. Are these allowable?

Answer: Food items purchased as a part of a special diet are not an allowed medical deduction. From Federal regulations (3) Excess medical deduction: That portion of medical expenses in excess of \$35 per month, excluding special diets, incurred by any household member who is elderly or disabled as defined in §271.2. You also mentioned herbal supplements rather than a prescription medicine. They only time we can allow vitamins/herbs are if they are prescribed by a licensed practitioner recognized by the state.

25. Is a dental insurance premium an allowable medical expense for an elderly or disabled individual?

Answer: Yes, *if* the customer’s dental coverage is Medicare the customer’s premium would be an allowable deduction.

1. medical and dental care, including psychotherapy and rehabilitation services, provided by a licensed practitioner authorized by state law, of other qualified health professional;
2. hospitalization or outpatient treatment, nursing care, and nursing home payments by the household for an individual who was a household member immediately prior to entering a hospital or nursing home licensed (or recognized) by the state;
3. prescription drugs when prescribed by a licensed practitioner authorized under state law, and over the counter medication (including insulin) when approved by a licensed practitioner or other qualified health professional; in addition, costs of medical supplies, sickroom equipment (including rental) or other prescribed equipment are deductible;
4. health and hospitalization insurance policy premiums;
5. Medicare premiums related to coverage under Title XVIII of the Social Security Act; and cost-sharing or spend-down expenses incurred by Medicaid recipients;

26. We have a customer who is on dialysis and says she must purchase Drano and has to clear her drains as a result of waste (See attached statement from doctor). She wants to use this expense in her SNAP budget.

Answer: Yes, the Drano can be considered a medical deduction since a licensed practitioner or other qualified health professional prescribed it or deemed it medically necessary.

27. Is transportation to and from the pharmacy an allowable medical deduction for an elderly/disabled customer?

Answer: Yes, it has been verified in a medical handbook provided from USDA-FNS that the costs of the trips to a pharmacy are an allowable medical deduction as a medical service. This supersedes the 2005 Q&A.

28. Employment and Community First CHOICES is a new program for people of all ages who have an intellectual or developmental disability (I/DD) and is under the long-term service and supports with the CHOICES program. We have a customer who receives a stipend from TennCare so she can care for her disabled son. Will payments from the Employment and Community First CHOICES program be included or excluded as income for the SNAP program?

Answer: The medical payments to care for her son would be excluded if the customer is being reimbursed for the care of her disabled son based on Federal Regulations. Please view the Federal Regulation below:

§273.9 Income and deductions

(i) Examples of excludable reimbursements which are not considered to be a gain or benefit to the household are:

(A) Reimbursements or flat allowances, including reimbursements made to the household under §273.7(d)(3), for job- or training-related expenses such as travel, per diem, uniforms, and transportation to and from the job or training site. Reimbursements which are provided over and above the basic wages for these expenses are excluded; however, these expenses, if not reimbursed, are not otherwise deductible. Reimbursements for the travel expenses incurred by migrant workers are also excluded.

(B) Reimbursements for out-of-pocket expenses of volunteers incurred in the course of their work.

**(C) Medical or dependent care reimbursements.**

29. A customer had stated that she buys adult diapers, bed pads and baby wipes over the counter and wanted to use these items as a medical expense. The customer provided a letter from Church Health indicating that these items were needed. The letter was signed by someone who identified themselves as a “Provider Counseling/Social Work.” Does the letter indicating that these items are medically necessary need to come from a medical doctor?

Answer: No, the letter does not need to come specifically from a medical doctor. Federal Regulations specifically state “other qualified health professional” are allowed to approve medical needs. So if the social work counselor can be considered a qualified health professional that would allow her to approve those items as medically necessary for the customer.

30. Can medical receipts from a different country be used as a deductible expense?

Answer: Yes, even though the store is in another country and has a different currency, if prescribed by a licensed practitioner or other qualified health professional has deemed the prescriptions medically necessary then the prescriptions can be used if the customer meets the elderly/disabled criteria and the prescriptions exceed \$35.00. Please be aware of the dates of the prescriptions.

31. When determining medical costs, how do you define “other qualified health professional”?

Answer: Other qualified health professionals include registered nurses, physician assistants, nurse practitioners, certified registered nurse anesthetists, and physical, speech, occupational, and massage therapists. All have demonstrated skill and expertise in their field of study to complete the education

and regulatory requirements, to obtain licensure, and to remain in good standing with the respective licensing boards.

32. Do we count medical expenses if the appellant states they have filed Chapter 7 bankruptcy on all medical expenses?

Answer: Generally if they file bankruptcy the obligation to pay is removed. However, if the customer can verify that a repayment is going to medical bills that have not been used as a previous deduction, the monthly payment that is going towards those expenses to the Chapter 7 bankruptcy can be used as a deduction.

33. If an elderly and/or disabled customer has an individual pick them up for doctor's appointments, does the cost of the travel from the individual's house to the elderly and/or disabled customer's house and back, count as a medical deduction?

Answer: The customer needs to be the one that is incurring the expense. If it is verified that the customer is providing the individual gas to drive from their house to the customer's house and then from the customer's house to the doctors then it can be allowable as it is "reasonable" to be charged for this service to "obtain medical treatment."

(Other)

1. I have FF case being reduced due to Bankruptcy. For SNAP, would we count the budget in FF before the decrease or would we count the decreased amount as income?

Answer: Bankruptcy would be considered a third-party payment so we should be counting the gross non-reduced FF grant amount in the SNAP budget. We are told to treat third party payments: Money legally obligated and otherwise payable to the household (the non-reduced FF grant) which are diverted by the provider (DHS) of the payment to a third party for a household expense (Bankruptcy) shall be counted as income and not excluded.

2. Are customers required to file taxes on their self-employment income in order to receive business expense credit?

Answer: They are not required to file taxes to receive deductions on self-employment income. Filing taxes is not listed in our Policy or Federal Regulations as a requirement.

3. A question has come up about allowing expenses for "adult" day care. Case is 30-year-old SSI recipient living with parents - can the payments to assist be counted as medical expenses?

Answer: It could be a medical expense or "dependent care"/childcare. In the past we only allowed up to a certain amount for dependent care deduction, so it was in the customer's best interest to be used as a medical deduction. Now that there is no limit on the dependent childcare expense, it would benefit the customer more to use it as a dependent care deduction. At no time can it be considered a medical expense AND a dependent care expense.

4. The customer provided verification on 9/20/19 that she went to eye doctor on 9/16/19 and paid \$600.00 for new eyeglasses, can this be an allowable one-time medical deduction?

Answer: Yes. This would be an allowable one-time medical expense and can be treated as follows:



1. considering the expense as a one-time deduction; or
2. having the expense prorated over the certification period (if it is reported at the time of application) or prorated over the remainder of the certification period (if it is reported as a change during the certification period.)

## DRIPS/eDRS

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1. Since we have been reminded we should have been checking eDRS all along, I have received some questions regarding this. If the CW finds a hit on the report, what process is followed at that point?

Answer: It is important to check eDRS at every intake, every recert, and anytime an adult individual is added to the assistance group. The EC should check eDRS prior to the interview.

- If there is a match, check the disqualification period. If it is in the past, no action needs to be taken.
- If they are currently still in their disqualified period it will need to be verified prior to taking action because this report is not considered verified upon receipt.
- If it is from TN (it should already be loaded in COTS and will show the individual failing on AEIES). If it is from another state, the EC will request contact from the customer and seek verification of status in the other state.
- Once the information is verified, the customer is not eligible until the disqualification period has ended.

2. For renewals--do we only need to check at renewals for a year--to catch any that might be currently getting benefits that we don't know about? If the customer has been a customer here in Tennessee for a while, Investigations has probably already been alerted by the Feds and has asked us to fix that case.

Answer: Federal regulations requirements for use of disqualification data are at 7 CFR 273.2 (11) and 7 CFR 273.16 (i) (3). These regulations state that at a minimum the State agency must check against the disqualification information PRIOR to certification, for newly added household members, and the current caseload at recertification for a period of 1 year. However, we have decided to check eDRS at every intake, every renewal, and whenever someone is added to the case.

3. If we ARAD a customer from another state, when does our system check the eDRS file? Reason I ask--we think it has to overnight batch to check (say a customer from Michigan has moved to Tennessee and is applying--never had a case in Tennessee).

Answer: eDRS is updated by other states. Tennessee updates their information once a month. If you have a customer that moved from Michigan to Tennessee and has NEVER had an application in Tennessee their information may already be listed in eDRS. It depends on when Michigan sent the information and when it was updated.

Follow-up Question: If it is overnight batched and eDRS hasn't had time to update the information, what should we do about Expedite cases?

Answer: As this is a point of eligibility, the customer should be asked at their interview if they are currently disqualified from the SNAP program in any State AND the eDRS system should also be checked. If eDRS shows they are disqualified and they affirm this information, they are ineligible. If eDRS shows they are disqualified and they deny this, you will have to obtain verification of the

disqualification from the other State to verify the disqualification. eDRS is NOT verified upon receipt so you have to verify it before you can perform an adverse action based on it. Verification would be electronic or hard copies of court decisions, administrative disqualification hearing determinations (orders), signed disqualification consent agreements or administrative disqualification waivers. You can also take the verbal or written statement from the other State affirming the existence of this documentation (listed above). If you check eDRS and the customer is not listed but the customer states they are disqualified in another state, we can take their statement of ineligibility. You would, of course, need to document CLRC with the customer's statement either affirming or denying. That being said, you cannot delay the approval of eligible expedited cases for verification of disqualification in another state, as this is not required to be verified prior to expedite approval. So you approve expedite benefits in lieu of obtaining verification that the person is actually disqualified based on customer statement. If disqualification information is later obtained to support the customer was not eligible at application, you would document the case record with the verification you receive, process the case, and send notification to the customer of adverse action.

4. We are to check eDRS for all adults--so adult means how old? 18? 21? 22?

Answer: As far as claims goes, any person who is considered an adult member of the household when the offense occurred can be disqualified. So that would mean anyone the age of 18 and over could possibly be disqualified from the program and the eDRS system should be checked.

5. What if a parent has falsified records and gotten benefits on a child in 2 states at once? Is the parent the only one disqualified?

Answer: If a parent falsified documentation and received benefits on a child in 2 states (dual participation), the PARENT is the one who committed for the Intentional Program Violation (IPV) NOT the child. So the parent would be the individual disqualified for the IPV.

6. There is a location in eDRS that is for type of disqualification. Do you know what the code means?

ANSWER: The type code is the Offense Type Code. There are several.

Offense code number 2, code letter B is used for disqualification due to any trafficking (drugs, firearms/explosives, benefits) conviction involving benefit value of \$500 or more.

Offense code number 4, code letter D is used for disqualification due to any conviction or administrative finding not specified in codes B, E, or F.

Offense code number 5, code letter E is used for disqualification due to duplicate participation.

Offense code number 6, code letter F is used for disqualification due to application fraud, including non-report of changes.

7. If a person is disqualified in another state, do we fiat that person out of the assistance group and leave the group intact or do we disqualify the entire aid group?

ANSWER: Once it has been verified that the customer is in fact disqualified in another state and the disqualification is current, you would only disqualify the person not the entire household.

8. Customer is currently listed in eDRS as a Type Z disqualification for 999 months. She provided proof that she completed a drug treatment program on 5/27/10. Does the completion of the drug treatment program end or cure the Type Z disqualification?

ANSWER: Z is other. You would need to contact the other state to know what they were actually disqualified for. It very well may be drug conviction because some states consider you ineligible for SNAP after you have had a drug conviction regardless if you have completed treatment.

9. We have some staff checking different sequences on the eDRS system. Checking to see which is correct or if we need to check both from the two options: E-Eligibility determination P –penalty determination. The training material said that workers should check the E, but the P actually shows if the customer had previously been penalized.

Answer: The E-Eligibility Determination should be used when we are processing eligibility to determine if a customer has a disqualification that they are **currently serving** that would make them ineligible for benefits. The P-Penalty Determination should be used by staff who are trying to determine if an individual has served a disqualification in **the past (expired)**.

10. We have new workers that are telling us that they have been told to use Drips, Is that correct?

Answer: DRIPS is still out there on Clearinghouse that way the option can still be seen from Clearinghouse, but it is not being updated.

Updating of DRIPS was discontinued when the new eDRS system was implemented. Staff should be using the new eDRS system to validate disqualifications.

## **DRUG FELONS and Probation/Parole Violations**

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1. If the individual is complying with or has already complied with all obligations (including any substance abuse treatment requirements) imposed by the criminal court, and a Licensed Social Worker that works for probation/parole has determined that the applicant doesn't need treatment, would that be sufficient to meet the requirements? I don't want to provide a clearance without being certain; this appears to be an area that is very specific.

### 2.10 EXCLUDED HOUSEHOLD MEMBERS 1240-1-2-.02(4)(a)

11. individuals convicted under federal or state law of a felony offense which occurred after August 22, 1996 and which involved the possession, use, or distribution of a controlled substance, unless the individual is complying with or has already complied with all obligations (including any substance abuse treatment requirements) imposed by the criminal court, and

- (i) is currently participating in a substance abuse treatment program approved by DHS; or
- (ii) if not actively participating in a substance abuse treatment program approved by DHS, is currently enrolled in such a program, but is on a waiting list for participation, and enters the treatment program at the first opportunity; or
- (iii) has satisfactorily completed a substance abuse program approved by DHS; or
- (iv) treatment provider licensed by the Department of Mental Health and Substance Abuse Services, has determined that the individual does not need substance abuse treatment according to TennCare guidelines.

Note: A substance abuse treatment program approved by DHS is defined as one licensed by the

Tennessee Department of Mental Health and Substance Abuse Services. A listing of such programs may be found on the Department of Mental Health's website at <https://www.tn.gov/behavioral-health/substance-abuse-services/treatment---recovery/treatment---recovery/adult-substance-abuse-treatment.html>

If the individual received treatment in a state other than Tennessee, this definition extends to a substance abuse treatment program licensed or approved by the appropriate state agency where the individual received treatment. Other treatment programs not covered in this definition may be considered on a case-by-case basis by contacting the SNAP Policy Section in the state office.

**Answer from Legal Counsel:** "Yes, provided that the Licensed Social Worker is licensed through the Dept. of Health, Division of Drug & Alcohol Services and there is documentation that the assessment is that the individual does not need treatment – that documentation should be kept in the customer's case file and the appropriate entry should be made on the CLRC. This relates to an audit finding by the Comptroller, so adequate and appropriate documentation that this individual does qualify under this exception is absolutely necessary."

2. Does the probation violation requirements apply only to adults in the HH?

Answer: Legal Department said No, this would apply to minors as well.

3. Customer has had prior drug charges and has undergone treatment for that. Currently, he has been convicted of another set of drug charges for selling. Does he have to have treatment again for the latest drug conviction charge?

Answer: Yes, we would need to apply the policy again for any subsequent drug felony. The treatment must be for the new offense in question.

4. Customer had a felony drug conviction. He was imprisoned for a time but was not sure he had completed any type of drug assessment or program. The worker processed the case and talked to him about establishing SNAP eligibility by providing verification of the classification of his drug felony and verification that he had completed/enrolled/or was attending a drug assessment/treatment program.

Customer stated he could not locate anyone who could do this assessment without a considerable sum of money. He had gone online and found a group called AJ Novick Group, INC in Laguna Beach, California. This was an online opportunity for alcohol awareness and drug education courses. You could take courses ranging from 8 hours to 16 hours in length. I was not sure that this was an acceptable program so I wanted to see if we could check to see?

Answer: For SNAP purposes this will not exempt them from the disqualification. With this being online, we looked at what state provided the class (California).

Our Policy says: If the individual received treatment in a state other than Tennessee, this definition extends to a substance abuse treatment program licensed or approved by the appropriate state agency where the individual received treatment.

I contacted AJ Novick and they are not licensed or approved by California for drug and alcohol treatment. They also stated that they are not licensed at all for Drug and alcohol treatment, but that some courts are considering this acceptable for court requirements.

5. I have a customer who has provided information to try to cure a drug felony. I have checked

<https://www.tn.gov/behavioral-health/substance-abuse-services/treatment---recovery/treatment---recovery/adult-substance-abuse-treatment.html>

I also tried contacting the agency. The numbers have been disconnected. Is the letter stating that the drug class is completed enough information to provide a cure for a drug felony?

Answer: I called the department of Mental Health and they stated that they don't have many records that go back that far. They said that because this has been the responsibility of the Department of Health and the Department of Mental health that it is hard to track down older information. Since the customer has tried and we have tried we need to allow this customer eligibility if all other criteria is met.

6. If an individual in the SNAP household is ineligible due to a felony drug conviction can we count their medical expenses as a deduction in the budget for the remaining HH members if they are disabled?

Answer: Yes, we can allow the medical deduction.

Federal regulations state:

(i) Income, resources, and deductible expenses. The income and resources of the ineligible household member(s) shall continue to count in their entirety, and the entire household's allowable earned income, standard income; medical, dependent care, child support, and excess shelter deductions shall continue to apply to the remaining household members.

The rationale behind this is, since all their income is in the budget the expense can be credited also.

7. A customer said yes to a drug felony but is unable to provide documentation that they completed the class/program. A call was made to probation and because of the timeframe they have no record... They are basically saying that she had to meet the requirements as she is not in jail...How do we proceed?

ANSWER: Just because it meets the courts requirements does not automatically mean that it meets SNAP requirements, but it does not automatically mean that it doesn't either. This is one of those verifications that it is EXTREMELY important to have. We must exhaust ALL means necessary but if we are still unable to obtain verification we can take customer statement and **thoroughly** document CLRC with all the attempts made by the customer and by us.

8. If a person is convicted of a drug felon and claims that drug treatment was not ordered; can they still be eligible for SNAP?

ANSWER: SNAP Drug Felony policy states:

1. individuals convicted under federal or state law of a felony offense which occurred after August 22, 1996 and which involved the possession, use, or distribution of a controlled substance, unless the individual is complying with or has already complied with all obligations (including any substance abuse treatment requirements) imposed by the criminal court, and

(i) is currently participating in a substance abuse treatment program approved by DHS; or

(ii) if not actively participating in a substance abuse treatment program approved by DHS, is currently enrolled in such a program, but is on a waiting list for participation, and enters the treatment program at the first opportunity; or

(iii) has satisfactorily completed a substance abuse program approved by DHS; or

(iv) a treatment provider licensed by the Department of Mental Health and Substance Abuse Services, has determined that the individual does not need substance abuse treatment according to TennCare guidelines.

9. Customer has a class E drug felony. Does the customer have to meet drug felony criteria?

ANSWER: Individuals with a judicial diversion for Class E felony drug charges, who are cooperating with the court or have successfully completed the probationary period, are eligible to receive SNAP benefits if other eligibility criteria are met and are not required to meet the eligibility criteria for non-Class A felons, unless the requirements are imposed by the court. Although court documents may state that a judgment has been made, the court does not recognize a diversion plea as a conviction. Please refer to [Memo FA-09-24](#) and [SNAP Policy 24.07 Non-household Members and Excluded Household Members](#) for specifics regarding Class E felony drug charges.

10. We have a customer that has a drug felony from another state. Our EC contacted the other state to get information about the class of felony. She was told their state does not attach classes to felonies nor misdemeanors. My question is will he be eligible since we cannot determine class type for the felony?

ANSWER: Based on state rule 1240-01-02-.02 in a case which involved a **state which does not have classes**, we would follow the “or its equivalent” phrase. So if he was convicted in another state of the same thing that we would call a Class A and that state did not classify it, then this rule would apply. State Rule Language: 1240-01-02-.02

(b) An individual convicted under federal or state law of a felony offense which occurred after August 22, 1996 and which involved the possession, use or distribution of a controlled substance, unless the individual is complying with or has already complied with all obligations (including any substance abuse treatment requirements) imposed by the criminal court, and

(i) the conviction was not classified as a Class A felony or its equivalent, if the offense occurred outside of Tennessee; and

(ii) is currently participating in a substance abuse treatment program approved by the Department of Human Services; or

(iii) if not actively participating in a substance abuse treatment program approved by the Department of Human Services, is currently enrolled in such a program, but is on a waiting list for participation, and enters the treatment program at the first opportunity; or

(iv) has satisfactorily completed a substance abuse program approved by the Department of Human Services; or

(v) a treatment provider licensed by the Department of Mental Health and Substance Abuse Services, has determined that the individual does not need substance abuse treatment according to TennCare guidelines.

11. Customer was denied SNAP benefits, due to having a class A drug felony. However, he has submitted Federal policy Subsection (e) of Title 21 U.S.C 862 Inapplicability of this section to Government witnesses for an exemption from being denied Federal benefits. Does this allow eligibility?

Answer from legal: SNAP is not a “federal benefit” for which a Class A drug felon, who happens to also be a government witness, may be eligible to receive. It is my legal conclusion that his cooperation with the federal government does not make him exempt from ineligibility from SNAP benefits. Although 21 U.S.C. 862(e) states that the denial of “federal benefits” shall not apply to any individual who cooperates or testifies with the Government in the prosecution of a federal or state offense, SNAP benefits are not a “federal benefit,” as defined in the Code. Under 21 U.S.C.862(d), it states that a “federal benefit” does not include any retirement, welfare, Social Security, health, disability, veteran benefit, public housing, or other similar benefit for which payments or services are required for

eligibility. Further, 21 U.S.C. 862a, expressly states that an individual convicted under federal, or state law of any drug offense classified as a felony shall not be eligible for SNAP benefits. The law codified at 21 U.S.C. 862a, does not have an inapplicability clause for cooperation with the government as does 21 U.S.C. 862(e). In conclusion, DHS was correct to deny SNAP benefits to this customer based on felony drug conviction.

12. If the customer was charged/arrested prior to 08/22/96, but not convicted until after that date, are they still considered a drug felon per our SNAP policy?

Answer: The policy is that individuals convicted under federal or state law of a felony offense which occurred after August 22, 1996 that the possession, use or distribution of a controlled substance.... So, the actual offense would have to have taken place after August 22, 1996. Not just the conviction.

13. Customer turned in verification that she states the Board of Probation told her this is all she needed for DHS. It states that she is released from probation. Is this probation order enough to verify she does not need rehab for SNAP eligibility?

Answer: Being released from probation is not enough to have her qualify for SNAP. She will need to attend drug treatment classes or be determined not to need treatment by a licensed provider.

14. We have customer that has pled guilty to a parole violation. She was on probation for one charge and then received new charges. She goes to court 11/30 to determine penalty. None of the charges were drug related per customer statement. Does parole violation policy apply when it is not drug related? Would she be disqualified?

Answer: It does not matter if it is drug related. Federal Regulations state that to be considered to be in violation of your parole or probation, law enforcement would have to be "actively seeking the individual". Since she already has a court date, they are no longer actively seeking her and there for would be eligible.

15. Would a customer that received clemency from the President be eligible for SNAP?

Answer: No. Excerpt from legal response....

"I think just answering the narrow underlying question as to how to treat clemency/commuting of sentences should get them on the right path to move forward." The drug felony still stands and should be processed and analyzed normally (is it a class A state felony => if not then has there been treatment or other second chance requirements to allow exemption from felony ban under 71-5-308(b)(1)-(2).

16. A customer's SNAP application was denied due to a felony drug conviction. The department requested verification that she has completed a state approved drug & alcohol program, currently enrolled and active in one or be evaluated that no drug and alcohol rehab is needed. She referenced "Subsection E21 USC, 862". Is the customer eligible for benefits if she cooperated with the government?

Answer: No. The Subsection E21 USC, 862 does not state that a customer that has been convicted of a drug felony is eligible for SNAP benefits. The drug felony still stands based on Tennessee Code 71-5-308(b)(1)-(2) listed below and the customer needs to meet the criteria laid out in Chapter 2 of the SNAP Policy Manual to become eligible for SNAP as a drug felon.

"(b)(1) Pursuant to the option granted the state by 21 U.S.C. §862a(d), an individual convicted under federal or state law of a felony involving possession, use or distribution of a controlled substance shall be exempt from the prohibition contained in 21 U.S.C. § 862a(a) against eligibility for SNAP program

benefits for such convictions, if such person, as determined by the department: “to meet the guidelines to be eligible for SNAP benefits, whether that be entering treatment or other second chance requirements.

17. I have a customer who was convicted of a drug felony in 1999, but his record was expunged 5 years ago. Since his record was expunged, does he still have to meet the convicted drug felon criteria to receive SNAP?

Answer: When your record is expunged, it is as if the offense **never happened**. Your record is removed or destroyed, and is not available for anyone to access, even by court order. As with a sealed record, you can legally deny the existence of the events that were on the record. If the drug felony has been expunged, they no longer have to meet the drug felony criteria.

18. SNAP Policy recently received an inquiry from an inmate who was convicted of a drug felony in 1993 and he is inquiring about receiving benefits upon his release date in September. Due to the drug felony being before August 22nd, 1996, I wanted to inquire if the customer can receive benefits?

Answer: Per legal “Drug convictions before August 22, 1996 would not disqualify an applicant for SNAP benefits. So the customer, if otherwise eligible, could receive SNAP benefits.”

19. Can someone who is not licensed by the Department of Mental Health and Substance Abuse make a determination that a customer convicted of a drug felony does not need substance abuse treatment?

Answer: No, per legal, the person making the determination must be licensed in accordance with DHS Rules.

20. Is participation with any of the Tennessee Drug Courts acceptable for the SNAP drug felony requirements?

Answer: No, the SNAP drug policy criteria still applies. If it is not an approved treatment provider licensed by the Department of Mental Health and Substance Abuse Services, then the information needs to be sent to the SNAP Policy Unit to be considered on a case-by-case basis, unless someone licensed by the Department of Mental Health and Substance Abuse has determined the individual does not need treatment.

21. For customers convicted of a drug felon, can their verification of treatment, enrolled in or on a waiting list for treatment, or letter from the licensed professional from the Department of Mental Health and Substance Abuse that the customer does not need treatment be placed on AEIEI?

Answer: No, this information should **not** be placed on AEIEI and should be documented in the CLRC.

22. If a customer who is a drug felon provides proof they are currently participating in a drug treatment program, but have not completed one will that allow the customer to receive SNAP if all other eligibility criteria is met?

Answer: Yes. Policy states that if a customer is convicted of a drug felony after August 22<sup>nd</sup>, 1996 they can receive SNAP if they are currently participating in a substance abuse treatment program approved by DHS. This policy can be found in the July 2017SNAP Policy Manual on page 27, Chapter 2 Household Concept.



23. For customers convicted of a drug felon, can their verification of treatment, enrolled in or on a waiting list for treatment, or letter from the licensed professional from the Department of Mental Health and Substance Abuse that the customer does not need treatment be placed on AEIEI?

Answer: No, this information should not be placed on AEIEI and should be documented in the CLRC.

24. Customer stated he was convicted of a drug felony but uncertain of the class, but he did provide a certificate of completion to an approved drug program. Since he has provided this verification, is it required to verify the drug class?

Answer: Yes, it is required that we verify what class drug felony the customer was convicted of since the customer would not be eligible to participate in SNAP if they have a Class A felony drug conviction. CLRC should also be clearly documented as to the specifics of the drug felony, what class, how verified and any drug treatment customer has had, waiting for or is needing.

## **EBT**

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1. We have been instructed that when a customer wishes to report a retailer who is charging a minimum transaction fee for their EBT cards, we are to instruct them to send an email to Linda Snow at Linda.snow@fns.usda.gov. What is the procedure that is to be followed when a customer does not have access to the internet? Are we to send the email on their behalf or is there a mail or phone in option?

Answer: They can also call the OIG Whistleblower Hotline: (800) 424-9121

2. We ordered an EBT card. My questions is in regard to the Address lines on AEICI: Do we have to enter a "Lot # or Suite # etc.... on the 2nd address line on AEICI? I have noticed a number of cases where EBT cards are being returned as "undeliverable" and a lot of them are addressed with a "2nd" line on AEICI. This causes the address to be "flipped" and the card is then returned. What can we do to correct this?

ANSWER: We still go by this AIA for second line of address

[https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/aia\\_eia/aia-05-09.pdf](https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/aia_eia/aia-05-09.pdf)

3. If we have a customer that has \$800 on their EBT card and they lose eligibility, when do their benefits expire?

Answer from EBT Unit: Benefits are deleted from EBT cards after one year of non-use, but the oldest benefits are used first. Meaning, if someone has \$800 in SNAP benefits on their card accruing since November of last year and they accessed their benefits today, they will need to use the benefits from November 2014 first. If they still had any funds left on their card that were issued in November '14, those funds would be deleted on December 1, 2015.

4. Can EBT cards be mailed to PO box?

Answer: Yes, you can mail an EBT card to a PO box.

5. What is the website that customers can check their balance or other information about their EBT card?

Answer: Over on the right-hand side is an option for cardholder login. <https://www.connectebt.com/>

6. Customer's card was issued 3 weeks ago, and it has not arrived. I wanted to make sure I'm looking at the screen correctly. This is the second one I've seen with "homeless" in street name. Will it automatically mail to the county office if it says homeless?

Answer: No, homeless will not automatically mail anything to the county office. If the customer wants their only their EBT card mailed to the county office, AEICI should be marked "Y" to "Do you want your

benefits mailed to the county office?” If they want all mail sent to the county office then the mailing address needs to be the county office address even if AEICI is marked “Y” to “Do you want your benefits mailed to the county office?”

7. For EBT cards reported lost or stolen, should we direct the customers to the EBT vendor’s customer service center? And what is the customer service center number?

Answer: If a customer calls and reports an EBT card lost or stolen, they need to be directed to the EBT vendor’s customer service center immediately. Their action to deactivate a card takes place instantly which will protect the balance on the card. If we take action in ACCENT it won’t process till overnight which allows time for the benefits to potentially be used. If the customer is unable to call them, you can send an email request to EBT mailbox to deactivate that contains the customer’s SS# or RID, the reason for the request and stating that the card will be ordered through ACCENT on AEEBT. The EBT vendor’s customer service center number is: 888-997-9444.

8. I have a card that was dropped off by the Authorized Representative of a person, but they are no longer in her care and have moved to a different facility—I need to know how would I log this onto the log?

Answer: You complete the log with the card holder's information.

9. Customer called and couldn’t remember her PIN and now is unable to use her card.

Answer: After a customer has 3 unsuccessful PIN attempts the customer will have to wait until the next day in order to be able to use their card again. Have them call EBT Customer service.

10. Customer is requesting that we give her the card number for her current EBT Card. What is it?

Answer: We are not allowed to provide a customer with their full EBT Card number. If she needs to know which card is active, only provide her the last 4 digits.

11. When EBT comes to the county office and is picked up by the customer, we enter in CLRC to document the pick-up. Should we be putting the actual EBT card number in the CLRC?

Answer: You can state the card was picked up in CLRC, but it isn’t mandated. The log will track who picked up their cards. Never place the EBT card number in CLRC.

12. If a customer comes into the office and we verify the identity and they request their EBT card number, is it ok to give it to them?

Answer: We don’t need to provide their whole card number. If they need some of the number to check if their card is valid, we can provide the last 4 digits.

13. For residents of Alcohol and Drug Centers, can both the authorized representative and the customer receive an EBT card?

Answer: Yes, the reason being is if the customer is released/discharged/leaves the treatment center they would then have access to their benefits, however while at the Alcohol and Drug Center, the authorized representative would have access as well. The authorized representative is receiving the card and the customer is issued a card, but the treatment center has the customer’s card in their possession until the customer leaves and once the customer leaves the customer is given their card back.

14. When a card an EBT card is destroyed and documented on the D&D log, does this information need to be documented in the CLRC?

Answer: Anytime a card is received, destroyed, or provided to the customer, CLRC should be documented.

15. We just closed a case for the customer being incarcerated. Is there anything we should do to deactivate the EBT card?

Answer: If you are closing a case due to death or incarceration and there are no other HH members, it would be beneficial to contact the EBT mailbox : [EBT\\_Mailbox.DHS@tn.gov](mailto:EBT_Mailbox.DHS@tn.gov) . Ask for the card to be deactivated. Please provide the customer's SSN or RID and the reason for the request. Deactivating the card will protect the benefits and help reduce someone using the benefits that are not authorized.

16. Can you use an EBT outside of the US?

Answer: No, you cannot use your Electronic Benefit Transfer (EBT) card outside of the United States of America. However, you can use the Supplemental Nutrition Assistance Program (SNAP) benefits on your EBT card at every authorized retail food store in the United States of America, including in the U.S. Virgin Islands and Guam.

Food assistance programs in Puerto Rico (PR), American Samoa (AS), and the Commonwealth of Northern Mariana Islands (CNMI) are different, however. SNAP benefits issued in PR may only be used in PR; likewise for AS and CNMI.

17. Is there a way of to check the history of EBT cards ordered through ACCENT?

Answer: Yes. In the Next Tran field in ACCENT type AEEBT then in the PARMS field type the customer's ss# or RID#/today's date. Once the first screen is retrieved, the user will be able to use the F8 key to navigate through historical data. If a Y or a B is next to new card, the date showing would be date an EBT card was ordered.

18. How often do counties have to submit their employee list for the monthly D&D logs?

Answer: Effective October 2019, the employee log for the monthly D&D logs must be submitted quarterly with the D&D logs by the 15<sup>th</sup> of the month during March, June, September, and December, and also when a change occurs, the employee log would need to be submitted in the month the change occurred with that months D&D log.

Please refer to [EBT Destruction & Disbursement Log PUN](#) for further information.

## EXPEDITES

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1. We have an expedited SNAP case that has one person apply and they are convicted drug felon. The customer did state they have completed drug rehab program but does not have the verification. Do we take their statement and process the SNAP for one month pending the verification? Then file a claim if we find out they did not complete the rehab? Does the expedite services time limits override the pending drug felony conviction/rehab completion verification? I have researched policy and basically for expedite we only need to verify id to process SNAP. However, based on the drug felon policy we need to determine the class of the felon and they have to provide documentation of the rehab.

Answer: Individuals that meet expedited criteria only have to provide verification of ID. If they state that they are eligible and just need to provide verification then we approve them pending the

verification. If they make statements that indicate they are not eligible, verification will need to be requested before a denial for ineligibility can be made.

2. Are all expedited households considered “destitute”? Does “destitute policy” apply to individuals that don’t meet expedited criteria?

Answer: No. See federal regulations below.

i) Expedited service — (1) Entitlement to expedited service. The following households are entitled to expedited service:

(i) Households with less than \$150 in monthly gross income, as computed in §273.10 provided their liquid resources (i.e., cash on hand, checking or savings accounts, savings certificates, and lump sum payments as specified in §273.9(c)(8)) do not exceed \$100;

(ii) Migrant or seasonal farmworker households who are destitute as defined in §273.10(e)(3) provided their liquid resources (i.e., cash on hand, checking or savings accounts, savings certificates, and lump sum payments as specified in §273.9(c)(8)) do not exceed \$100;

(iii) Households whose combined monthly gross income and liquid resources are less than the household's monthly rent or mortgage, and utilities (including entitlement to a SUA, as appropriate, in accordance with §273.9(d)).

273.10(e)(3) Destitute households. Migrant or seasonal farmworker households may have little or no income at the time of application and may be in need of immediate food assistance, even though they receive income at some other time during the month of application. The following procedures shall be used to determine when migrant or seasonal farmworker households in these circumstances may be considered destitute and, therefore, entitled to expedited service and special income calculation procedures. Households other than migrant or seasonal farmworker households shall not be classified as destitute.

(i) Households whose only income for the month of application was received prior to the date of application, and was from a terminated source, shall be considered destitute households and shall be provided expedited service.

(A) If income is received on a monthly or more frequent basis, it shall be considered as coming from a terminated source if it will not be received again from the same source during the balance of the month of application or during the following month.

(B) If income is normally received less often than monthly, the nonreceipt of income from the same source in the balance of the month of application or in the following month is inappropriate to determine whether or not the income is terminated. For example, if income is received on a quarterly basis (e.g., on January 1, April 1, July 1, and October 1), and the household applies in mid-January, the income should not be considered as coming from a terminated source merely because no further payments will be received in the balance of January or in February. The test for whether or not this household's income is terminated is whether the income is anticipated to be received in April.

Therefore, for households that normally receive income less often than monthly, the income shall be considered as coming from a terminated source if it will not be received in the month in which the next payment would normally be received.

(ii) Households whose only income for the month of application is from a new source shall be considered destitute and shall be provided expedited service if income of more than \$25 from the new source will not be received by the 10th calendar day after the date of application.

Important: Households other than migrant or seasonal farmworker households shall not be classified as destitute.

3. We have an application that was approved Expedite with postponed verifications and once the verifications were provided they changed the household's level of benefits, do we correct the benefits that were already released to the customer by issuing a claim or restoration?

Answer: According to FNS we do not alter previous benefits as long as the eligibility worker acted correctly on the information provided at the point of expedited approval, the customer provides the verification timely, and the eligibility worker acts on the change in a timely manner, you would only need to adjust the future benefits and ongoing eligibility.

4. We have an applicant that has applied as expedited. He stated at the interview he was a convicted drug felon in 2008. He's uncertain of his ability to provide verification of the rehab he states he completed. Are we to approve him as expedited, based on having ID verification, then prepare a claim if he doesn't provide proof; or, hold the application and deny at the 11th day if verification isn't provided?

Answer: For cases that are expedite you approve them with postponed verification based on the customer's statement of eligibility as long as we have an ID. If we have ID there is no need to hold expedited cases and deny at the 11<sup>th</sup> day, and no need to file a claim if verifications aren't provided and ongoing benefits aren't issued. If verification is provided ongoing benefits would be based on verification provided

Follow-up Q: If we approve him based solely on ID verification, what timeframe do we use to go back and close the case if proof of the rehab hasn't been provided?

Answer: Typically, you place a "?" in the case when verifications are pending, and ACCENT will auto close expedited cases if verifications are not provided. However, since this customer stated they will have trouble getting the verifications, it is appropriate to have the county assist the customer in obtaining them. If the customer and the worker are still unable to obtain documentary evidence, a CC can be used or as last resort customer statement. Once the verification policy has been followed, if eligibility continues, remove the "?" and allow for ongoing benefits.

5. The customer was approved for expedited pending postponed verification. The 30th day was Saturday. The customer provided the verifications on Monday, which would have been the 32nd day. Would we approve effective that Monday since it was in the 2nd 30 days or since the 30th day fell over the weekend if we would restore benefits based on the 30th day falling over the weekend and it was provided on the next business day, do we consider it received in the first 30 days?

Answer: If the 30th day falls on a weekend or Holiday we would give the customer till the next working day to provide. In this situation the customer should have their application date honored.

6. We have a case where they were approved Expedite with postponed verifications. They did not provide the verifications and their case was closed. They came in later (day 31-60) and provided the required verifications. Do they have to re-apply?

Answer: There is nothing in our manual, State rules, or federal regulations that would suggest that this would be treated differently than a regular application that closed for not providing verifications. We still honor the application date, and the application is still good for 60 days. The date the verifications are provided is the new sign date.

7. If someone applies after 15th and has no income and is expedite for that month but is starting work and will have income in the second month, would we anticipate that income for the second month?

Answer: If it is verified that this customer is already employed and you have verified what this customer's income is anticipated to be and they just won't receive it until next month, then you can add it to the case with the future start date.

From Our Policy: At the time of application/recertification a household may expect changes in circumstances to occur in the future; in particular, changes relating to the receipt of income. However, only currently available income will be used to project the amount of ongoing available income unless the amount and date of receipt of expected income is known with reasonable certainty or unless some change has occurred. If the exact amount/month of receipt of the income is not known, only that portion of it which can be reasonably anticipated shall be considered as income.

8. In reference to customers that have been approved as Expedited, with pending verifications...the customer is approved the first month and has to bring in paystubs.

If the customer does not provide until the 2nd 30 days, should the customer reapply? Or should the worker just enter the paystubs into the case, and move on?

ANSWER: SNAP cases get a second 30 days. The customer does not need to reapply. AEFPY may need to be updated and AEFSD will need to be updated to keep from showing as an overdue expedite, if 041 or 047 is on AEWAA.

9. I think we have misunderstood the 7-day processing for Expedites. We have been found in error on expedite cases that are approved on the 7<sup>th</sup> day, why?

ANSWER: Our policy and federal policy both state that customers should receive their card/benefits by the 7<sup>th</sup> day from date of application. If the application is not approved until the 7<sup>th</sup> day this would be late processing if the customer does not receive their benefits on that day.

Federal Regulations:

§273.2 Office operations and application processing.

(i) *Expedited service*

(3) *Processing standards*

(i) *General*. For households entitled to expedited service, the State agency shall make available to the recipient coupons or an ATP card not later than the seventh calendar day following the date an application was filed

Our Policy states:

Page 160 in the SNAP Manual:

For households entitled to expedited service, the county office will determine eligibility timely enough for the household to receive the benefits on or before the seventh (7th) calendar day following the application date. Expedited service timeliness standards do not begin until the household files an application.

Note: If they do not have an EBT card, then the application would need to be completed on or before the 4th calendar day to ensure that the card and benefits would be received by the 7th calendar day.

10. May review, a notice is sent requesting income verification and verification was not provided and case closed 5/31/15. Customer comes back on June 3rd, support staff prescreened as expedited. How is this application treated?

ANSWER: Federal Regs state: (f) *Expedited service*. A State agency is not required to apply the expedited service provisions of §273.2(i) at recertification if the household applies for recertification **before** the end of its current certification period.

Since they are applying after the end of their certification period, you should process the new application including following expedite policy.

11. Customer stated at interview that she had already received her June SNAP benefits from Illinois. For that reason I did not expedite her, and the 041 was generated by ACCENT but I did not approve the expedite benefits. Her case was denied. It has been explained to me that the expedited policy is that if a customer comes in and tells us that they currently receive SNAP from another state and their stamps are issued for the current month, we are to approve in Tennessee also, as expedited pending proof of cessation in their current state?

ANSWER: Regardless of what type of application, we can take customer's statement of ineligibility. Based on her statement of receipt of benefits in another state we could have denied her at that time. SNAP Manual **CHAPTER 38: Verification Procedures**: This section describes the factors that must be verified and the procedures, which the worker must use to confirm or substantiate information provided by the applicant/recipient in determining eligibility/ineligibility for SNAP.

#### **A. Introduction**

1. Verification is the process of confirming or substantiating information provided by the applicant/recipient. Any decision made before the end of the standard of promptness period must be based on a clear-cut determination of eligibility or ineligibility. For a finding of ineligibility, the caseworker may generally render a decision based on the household's unverified statement. However, to render a decision of eligibility, the worker must be able to make a firm determination of eligibility based on certain verified points of eligibility. Therefore, the verification process is central to the caseworker's ability to certify a household for benefits. If there is any doubt of eligibility, the caseworker must resolve it using the best available evidence including documentary evidence, collateral contacts, and home visits.

12. I know prescreening is mandatory but is completing the screening sheet and keeping it filed mandatory?

Answer: The form is not required. We don't require them to use, keep, file, or scan it. We only have to prove that we pre-screened and that is done in CLRC.

13. If a customer is potentially expedited based on the information on the application and keeps their initial appointment, is their discovery date the application date or the date the caseworker determines them to be expedited?

Answer: If the case is expedited based on application and prescreening information, keeps their initial appointment, is interviewed, and determined to be expedited and ID is verified within expedited time frame the application date would be used as the date of discovery.

## **FEDERAL TAX INFORMATION**

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1. Can we scan tax information provided by customers into FARAS?

Answer from Assistant General Counsel:

“Per IRS Publication 1075, information received from a customer, including federal income tax returns, does not fall within the meaning of FTI (federal tax information).

In my opinion, it would be permissible for DHS eligibility workers to scan tax returns received from customers into FARAS. Since tax returns received from our customers are considered confidential customer information, the returns are subject to state and federal confidentiality statutes and regulations applicable to the SNAP, TANF, and/or TennCare/Medicaid programs. It is my understanding is FARAS is a secure system and accessible only by DHS employees for the purposes of determining customer eligibility or otherwise administering the aforementioned programs.”

#### 1.4.1 Federal Tax Information

Safeguarding FTI is critically important to continuously protect taxpayer confidentiality as required by the IRC 6103. FTI may consist of returns or return information and may contain personally identifiable information (PII). FTI is any return or return information received from the IRS or secondary source, such as SSA, Federal Office of Child Support Enforcement or Bureau of Fiscal Service. FTI includes any information created by the recipient that is derived from return or return information.

#### 1.4.4 Information Received from Taxpayers or Third Parties

FTI does not include information provided directly by the taxpayer or third parties (third parties do not include the secondary sources identified in

Section 1.4.1, Federal Tax Information). If the taxpayer or third party subsequently provides returns, return information, or other PII independently, the information is not FTI as long as the IRS source information is replaced with the newly provided information.

## GROUP HOMES

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1. The rent that they state is above the amount of their SSI checks. One lady states that donations and discounts are given to take care of the portion that is not covered by the customer. The 2nd lady states that some of them are on Section 8 and donations for the remainder of the rent.

Q: When calculating the rent minus the thrifty plan do I need to include the section 8 in the calculations?

A: Yes you subtract the section 8 payment.

Example- If Room and board is 800. And section 8 pays 260.  $800 - 260 - \text{thrifty food plan } (194) = 346$  Shelter on AEFSC

Q: Should I request new lease agreements/contracts for each customer even though this is a renewal?

A: Yes. Before certifying residents the contract needs to be verified.

2. Customer is a member of a group home. Should the rent deduction be calculated as monthly rent amt- TFP= shelter expenses?

ANSWER: You subtract the Thrifty Food Plan (TFP) if the amount they pay is for room & board. If the amount they pay is actual RENT... then there is no need to subtract the TFP.

3. In making our visits to the group homes, we were advised to collect a “letter of agreement” from each home. Neither them nor us have any idea what this document looks like. Can you advise as to what this document is and/or send a copy of it?

Answer: It is located in the forms library

<https://www.teamtn.gov/content/teamtn/humanservices/guidelines-and-forms/forms.html>) Under Supplemental Nutrition Assistance Program; it is form number HS-3042.



4. How does an agency apply to the Department of Mental Health and Substance Abuse to become a group home, is there a website where they can find the application or is there a phone number of someone they can contact to start the process?

Answer: Become a Licensed Provider is the website for the Department of Mental Health and Substance Abuse Services on the steps to become a licensed group home. The link provides the paperwork and information the group home would need to start the process.

5. We have a question regarding the departure of a resident from a group home. When the resident leaves the group home and the home informs DHS of this change, is the department required to send a CNCC as a RFC to the customer (even if it would go to the group home) prior to terminating the benefits for loss of contact?

Answer: Per Group Home policy the customer is required to report their change in address upon leaving the group home, if the customer did not report the change in address to the office a RFC would have to be sent to the group home for the customer. If the customer has a phone number listed, please try to attempt to contact the customer via phone to verify the change. The change should be treated in accordance with the [FS-15-01](#) Simplified Reporting and Acting on All Changes memo with the segment that goes over Non-Recipient Reported Changes.

6. Can the name of a group home be added to the Authorized Representative screen (AEFAR) if the application(s) is for someone who is residing in the group home?

Answer: Anytime a new Authorized Representative is added to a case it must be an ***individual*** not a company. Residents at these facilities are to be certified through an authorized representative who is employed at the facility.

Follow-up: If the name on the Authorized Representative screen (AEFAR) is currently the name of a group home, should the worker change the name?

Answer: Yes, please ensure that the authorized representative who is employed at the treatment center is listed on the Authorized Representative screen (AEFAR) and not the name of the group home. If AEFAR has the name of the group home, correct it to the individual employed by the group home.

7. For Group Homes do I need to go out to see the customers?

Answer: The semi-annual documentation does require an in-person visit to complete the requirement.

Follow-up: Do I make a copy of the license at each visit?

Answer: Yes, each of the two visits requires a copy of the current license.

8. Does the Letter of Agreement need to be resigned each year?

Answer: Yes, but only one time.

9. Am I supposed to get monthly checklists from the approved group homes regarding the customers living there?

Answer: Each group home should be monthly lists reporting the new residents that have applied and the residents that left.

10. When a new group home is opened and wants to apply to be an approved group home for the purpose of receiving SNAP benefits for the residents what must be submitted to SNAP Policy?

Answer:

1. A copy of the current license from The Department of Mental Health Services (TDHMSAS) and Substance Abuse or a letter of Certification from TMHDSAS.
  - a. A copy of the license through the Department of Health will also be acceptable.
2. A copy of the Letter of Agreement signed by the responsible staff at the group home and the supervisory staff with the county DHS office.
3. A copy of the letter stating that the group home is a non-profit entity.
4. A checklist of the residents in the home

**The Group Home Guidelines can be found on the Toolbox at [Group Home Guidelines](#)**

11. Does an interview need to be completed with the group homes or does the group home renewal application suffice without an interview?

Answer: An interview needs to be completed. Each and every application (intake and renewal) requires an interview with either the applicant or their authorized representative. Applications for renewals should not be processed without an interview. Alcohol and Substance Abuse approved facilities require an authorized representative to complete the process. Please also see [SNAP Policy 24.06 Special Living Arrangements](#).

12. How often does a Letter of Agreement need to be updated with the approved SNAP group homes?

Answer: The Letter of Agreement (LOA) should be updated yearly with the appropriate signatures. The LOA explains all the requirements that the group home must complete to maintain the status of an approved SNAP group home.

## HOUSEHOLD COMPOSITION

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1. Head of Household is deceased. Can his wife become the head of the household in the active case? Does she have to reapply?

Answer: Section 1240-01-02-.02

(2)... The selection of the head of household shall be made at each certification of the household's eligibility for the SNAP Program but may not change between certifications unless there is a change in household composition.

We do not believe a new application is necessary for the wife to become the new head of household during the certification period since the husband is now deceased.

2. Can a pregnant woman and the alleged father of her unborn child be required to be considered one household if living together?

Answer: Being pregnant doesn't pull people together. Unless they are spouses or purchasing and preparing together then there is no requirement for them to be in the same group, if they do not have a child in the case that he is the father of.

(e) Parent-Child Relationships

Parent child relationships are kinship connections between mothers and/or fathers and their children resulting from the child(ren's) birth or adoption or from the marriage of the child(ren's) mother or father.

1. Persons Not Eligible for Separate Household Status

( i ) A spouse of a member of the household ;( ii ) Children under 22 who are living with their parents; or( iii ) Children under 18 who are living with someone acting as a parent (parental control).

3. Can individuals in an Alcohol and Drug Treatment Center receive be approved for benefits while in the center if an authorized representative doesn't apply for them?

Answer: No. State Rules state 1240-1-31-.01 DRUG ADDICT AND ALCOHOLIC TREATMENT CENTERS – SNAP ONLY.

(3) Residents of treatment centers shall apply and be certified through the use of an authorized representative who is an employee of and designated by the private non-profit organization or institution or a publicly operated community health center that is administering the treatment and rehabilitation program.

(7) Residents of drug addict and alcoholic treatment centers that lose their FNS authorization to accept and redeem coupons or lose their certification through the Department of Mental Health shall not be eligible to participate. The residents are not entitled to a Notice of Adverse Action (Form HS-0751, Notice of Disposition), but shall receive a written notice explaining the termination and when it will become effective.

4. In a case of an adoption where the legal relationship to a parent is severed, separate HH status can be granted, correct?

Answer: Once adopted the individual can be separated as long as there is not care and control and they aren't purchasing and preparing together.

5. Can foster children be added in on SNAP cases?

Answer: 2.6 Household Concept- INDIVIDUALS RECEIVING FOSTER CARE BOARD PAYMENTS-The SNAP household has the option to include or exclude individuals and their income for whom foster care board payments are made for SNAP purposes. The foster care individuals may be included (as household members) or excluded from consideration (as boarders) but cannot participate as separate SNAP households. (Refer to Section 1240-1-4-.14 regarding treatment of foster care board payments as income).

6. We received a question from an FS1 regarding the wording on the back of our current application. Under the section labeled **Federal and/or State Convections:**

Do you or anyone in your household have parole or probation violations? Yes \_\_\_\_\_ No \_\_\_\_\_

The FS1's question is; does this have to be a violation of parole/probation for a felony charge?

2.10 1240-1-2-.02(4)(a) (Our Policy Manual)

9. individual who is a fleeing felon or a probation/parole violator (eff. 11/1/96);

273.11 (Federal Regulations)

(n) Fleeing felons and probation or parole violators. Individuals who are fleeing to avoid prosecution or custody for a crime, or an attempt to commit a crime, that would be classified as a felony (or in the State of New Jersey, a high misdemeanor) or who are violating a condition of probation or parole under a Federal or State law shall not be considered eligible household members.

My understanding is that if they are in violation of ANY parole/probation, regardless of the felony or misdemeanor charge, they would not be eligible household members. Is this correct?

Answer: That's correct – don't have to check what type of charge the individual originally had that led to the parole or probation violation – just if that person is violating any condition of parole or probation.

7. We have a question regarding household concept.

Ex. Household consists of an elderly and disabled person unable to purchase and prepare separately living with spouse and their 20-year-old child.

Does the fact that they are living with their child override their potential to be separate due to the elderly and disabled status?

Answer: If an individual is too disabled to purchase & prepare their food separately themselves, they could be separated from other individuals in the household. In the case of elderly and disabled they could also include their spouse in their separate household.

So, section (b) could allow the elderly and disabled parent & the spouse to be a separate household if the only reason they are purchasing & preparing with the 20-year-old is because they cannot perform that function for themselves.

If on the other hand, all three purchase and prepared meals together because they are a family, section (a) would be appropriate.

8. We have an application dated June 3, 2014. Mother of newborn (DOB 05-28-14) who was in another case, applied for benefits for herself and her newborn (specifically SNAP). Since mother in another case for June 2014 and could not be removed until July 2014. Would the child be entitled to benefits in June 2014 even though the mother received benefits in a different case? Or is this like a reported change in household composition (even though an application was filed) and the child would not be entitled to benefits until July 2014?

Answer: We received the following clearance from FNS regional office. "Based upon the information you have provided & because this is a new household, the child is entitled to June benefits since they were not included as a member of any other household."

9. Absent wage earner policy is being considered on a case and the spouse that resides in Tennessee is applying for our services and they have a joint bank account with the spouse that still lives in another state and the account issued as a direct deposit for his/her income. How much of that income must be attributed to the spouse who is applying for SNAP? How do we account for this income? Do we update AERLA or AEFMI or both?

We are looking at references and are unsure about how to respond. The income and resources of the absent wage earner wouldn't be counted but what about what is available to the spouse, would it be countable?

Would it be unearned income in month of receipt and a resource after?

Answer: If each household has access to the joint account without any restrictions, the entire amount will count toward the SNAP household. Since the income is for a non-household member, only the portion made available to the household in TN would be counted as income. It would be unearned income in the month of receipt and a resource if still available the following month.

10. Potential customer is under 22 and lives with an ex-stepparent. Are they eligible to apply on their own?

Answer: No, the relationship of the stepparent and stepchild continues even if the natural parent leaves, dies, or gets a divorce. You would treat them like you would a natural parent/child relationship in determining eligibility.

11. We have a husband and wife who are applying for SNAP. The wife is off work due to giving birth. The baby is still in the hospital. Based on a clearance provided in 2011, we should wait until the baby is in the HH. Just to clarify can they include the baby in the SNAP case, even though the child is in the hospital.

Answer: We sent clarification to FNS and you do NOT have to wait until the newborn is in the HH to add them to your case. We also presented the situation of a newborn requiring extended stay in the hospital and FSN furthered clarified that you do not have to wait until the newborn is in the HH, you would base it on the expected circumstances of the household.

12. We have a 19-yr. old student who has always lived with her grandmother and had legal custody of her until age 18. She is now in college, however, still lives with her grandmother. Can she be separate since she is now over 18 and the grandmother has always acted as a parent?

Answer: Since the customer is 19 and not living with her parents she can have her own case if she is otherwise eligible

13. Do you know if we recognize same sex marriage for SNAP? Would we code them both as wives and would they have to be counted together?

Answer: Yes same-sex spouses must be considered to be married and a part of the same household for SNAP eligibility purposes. To avoid impact on other programs the specified same sex couples should be coded as friends on AEIHH that purchase and prepare meals together.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-14-08.pdf>

14. We have a married couple who the husband stays in the camper on the property and is claiming separate HH status. Does he have to be included in his wife's SNAP case?

Answer: The clearance I have from FNS states:

If the worker believes he really lives separately from his wife in the trailer, has the ability to store & prepare food, then the worker could certify him as a separate HH. On the other hand, if that discussion resulted in the husband reporting that he really just sleeps in the trailer, but cooks & stores his food in the house, uses the facilities in the house, etc. The worker could justify NOT allowing separate HH status, based on mandatory filing unit criteria.

15. Trying to determine which parent the child resides with the majority of the time by speaking with the mother and the father. Mom stated the child lives with her Monday – Friday and stays with her father on weekends she states the child eats the majority of her meals with her. The child is not listed on her lease but that she did include her when she filed taxes and she was to provide the verification by 12/8/14. She states that she is not willing to allow the father to apply for their child. The father stated the child has been in his custody for 3.5 years and that he is the custodial parent. The child lives with him 7 days a week and only stayed with Brenda for two months over the summer. The child is registered for school and the doctor at his address. He was to provide proof from the school and doctor's office by 12/8/14. Both parents state that neither was given full custody by the court. Spoke with a collateral contact for mom; she stated that child lives with mom fulltime. Spoke with collateral contact for dad; he stated that the child lives with dad fulltime. Mom failed to provide her tax returns. Dad provided the school record stating that the child resides at his home. Mom applied for benefits first.

At this time we are unable to determine where the child lives the majority of the time, please advise.

Answer: According to the Memo FS-07-07

To determine who has care and control you need to follow this sequence of steps.

1. The caseworker needs to talk with both parents to make the correct decision.
2. If one parent will agree to let the other household apply for the child, accept the parents' decision. If the two households cannot resolve the issue, the caseworker will need to go to the next step.
3. The caseworker must make a determination based on the child's circumstances in an average month. Some factors that should be considered are where the child spends the most time, takes the majority of the meals or where the child is attending school. Only if a decision cannot be reached at this stage should the caseworker go to the next step.
4. Determine who applied first for the child. This is the last resort and should not automatically be used in the determination.

The caseworker did speak with both parents.

Neither parent would agree to let the other parent apply

So moving to the following step you would look at where the child takes the majority of the meals or where the child is attending school

Being that the only documentary verification we have is the child's school records and they show she is attending school at the father's address and since we have no other concrete information to go on, she should be included in his case.

16. A man was included in his mother's SNAP case for 12/2014.

He got married, moved out, started a new job and they applied for their own benefits all in December. He was removed from his mother's case effective 12/31/14. The husband is not eligible for December in the case with his wife because he already received benefits. The wife may be entitled to benefits for December since she did not receive in any other case (this is a new household and not just a change to an active HH). How would the husband's income be handled in the new case for the month of December?

Answer from FNS: Based upon the information you provided, I researched 7 CFR 273.11. Since the only reason he is ineligible in his new household is because he already participated for December, (d)(1) of this section would have you exclude his income and calculate her benefits for December based upon a household of one, with any income and expenses she may have.

17. Major Mom and Dad live in house. 20-year-old daughter, her husband and child live in the basement of the house. It has a separate entrance, separate kitchen, separate bathroom, and they say they are not currently paying rent but will when they have income. Can they be a separate HH or do all have to be included in SNAP because "under one roof?"

Answer from FNS: The creation of a "separate residence" may be solely to facilitate the daughter's SNAP application and you would apply the under 22 policy and they would not be eligible. If the basement is truly a rental unit, intended to produce additional income for the major parents, that is separate from their living area, i.e. limited or no access to the rest of the home, you might consider it a separate residence and waive the under 22 policy.

Based on the information provided you may need to ask additional questions to see what the intentions are for this space and see if it truly functions as a "separate residence".

18. Customer is living with husband—they haven't divorced; doing so as she has nowhere else to go. She states she is only there at night so children can have bed and not be piled into one room. Also, so they have a place to catch the bus and get off in the evening. She leaves after kids get on bus and only returns in evening

when they get off the bus. Husband leaves at 3:30 to go to work. One of children she has belongs to husband, but they have not resided together for several years. She states she stays with friend during day, but friend only has a 2-bedroom home and she and children would be sleeping on couch etc. Can she be considered separate HH from husband? She states he doesn't pay child support but does buy child clothes, etc.

Answer: It does not seem that this situation will grant them separate HH status at this time. Her and her children are still living in the house with him and due to SNAP HH policy must be included in the same case.

19. Does HH comp have to be verified before approval?

Answer: Yes.

**Follow up:** Since staff are required to verify household composition, is the CLRC template going to be updated or will staff need to enter additional comments under "HH MEMBERS/RELATIONSHIP/P&P STATUS:"?

Answer: As time permits, the CLRC Template will be updated. In the meantime, staff should be entering as much details as possible regarding how HH composition was verified under the above question.

20. I was wondering if a 17-year-old can be approved as head of household for their own SNAP case. The customer is 17 years of age and has a minor child, her grandmother is her legal guardian, but she is not living with her. She is living with her older sister. Is the appellant able to have her own SNAP case or would she need to be emancipated?

ANSWER: If the other sibling is acting with parental control then the siblings should be in a case together. If the older sister is not acting with parental control, then the 17-year-old and her child can have their own case.

Policy states:

(1) Persons Not Eligible for Separate Household Status

- (i) A spouse of a member of the household;
- (ii) Children under 22 who are living with their parents; or
- (iii) **Children under 18 who are living with someone acting as a parent (parental control).**

(2) Persons Eligible for Separate Household Status

- (i) **Siblings (not under parental control) who live together and who purchase and prepare separately;**
- (ii) Children (over 21) who live with their parents and purchase and prepare separately;
- (iii) Individuals other than parents and siblings who share living quarters with a SNAP household, but who do not purchase and prepare meals with that household;
- (iv) A person who is too disabled to purchase his or her own food but who has arranged to have his or her food purchased and prepared separately from those with whom he or she lives. Even if the person who shops for food or prepares meals for the disabled person lives with the disabled person, the disabled person may claim separate household status; or
- (v) An elderly and disabled individual (and spouse of that individual) living with others when:

21. Dad is receiving benefits on child. Mom has completed an application for SNAP benefits. If mom presents a court order saying that she is to get SNAP and other assistance rather than the father, but the father has majority physical custody, do we still follow our policy on that, or do we have to follow what the court order says even though that goes against SNAP rules?

ANSWER: Whenever you come across a court order that actually states who can have benefits on the child and you are unsure how to correctly apply the policy you will need to get a copy of the order and

provide that and the details of the situation to Lisa Francis so she can contact Catrina Hewlett in legal to determine how to handle it. This will need to be done on a case-by-case basis.

22. We have a mother that has lost custody of her children to DCS. The children are currently back in the home on trial visit. The mom wants to add them back to the case; can she have SNAP for her and the children?

ANSWER: Yes. As long as the child in state custody is in the parent's home in a trial placement and the child is not a member of another SNAP household, the child is eligible to be included in the parent's SNAP case.

23. We have 2 customers that have the same mailing address which is a homeless shelter. They have a child together and are not married but say they don't live together. They're stating although they're staying in a homeless shelter, they are housed separately in the shelter. They have separate SNAP cases as of now; however, they showed up together regarding a letter the mother received asking if the father lived in the HH. Can they remain as separate households based on the information we have?

Answer: The way homeless shelters are set up would allow them to have separate SNAP cases.

24. We have a 17-year-old who has applied for emancipation and has now moved back into the household with his parents. Can he be eligible as a separate household?

ANSWER: When emancipation was granted did they also request termination of parental rights? If it was just emancipation that just granted them the right to have legal independence, it does not remove the parent child relationship. If parental rights are still intact, they need to be included in the same HH.

25. Scenario: Parents have 50/50 custody of the child. Neither parent will allow the other to apply for benefits. The child is spending equal time with both parents and his/her school records list both addresses. The mother applied for benefits first for the child but has not received any benefits since Jan 2013. The father applied for benefits for the child in May 2015 and was approved. The mother reapplied for benefits for the child in Aug 2015 and was denied due to the child being in the father's case. She files an appeal.

Question: In following the FS-07-07 memo, it states determine who applied first for the child. Does the 2yr plus gap in receiving benefits for the mother make any difference in who applied first?

ANSWER: The break in benefits received does make a difference. The father is the one receiving benefit he applied first in this scenario. It is correct that the father continue to receive benefits on the child.

Follow-Up: With regard to this issue, the mother is listed as the Primary Residential Parent on the parenting plan provided by the Appellant although they have true 50/50 joint custody. Based on your response regarding the gap in coverage, I can see why the father would be considered as applying first. However, does the fact that the mother is listed as the Primary Residential Parent make a difference?

ANSWER: SNAP does not solely look at which parent has the primary custody of the child in determining in which household to place the child as a member. The determining factor is where the child resides and where the child has the majority of his/her meals. When it is 50/50 custody it can be certain steps must be followed in determining household composition.

Follow out the steps in Memo FS-07-07 and the only deciding factor was that the father technically applied first. The policy was followed correctly, and the father should continue to receive benefits on the child.



26. I have a mother claiming her child in her SNAP case based on the fact that he only visits “3-4 times a month during the daytime and eats with them while there”. The child lives with his father at a different address. I verified with the board of education that the father is listed as the caretaker who the child lives with. Does this daytime visit, 3-4 times a month, allow the mother to claim the child in her SNAP case?

Answer: Since the child only has periodic day visits with the mother, thus could not be said to be in the mother’s household for a portion of the month. The mother would not be eligible to receive benefits for the child.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/memos/fs-07-07.pdf>

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/memos/fs-07-01a1.pdf>

In the FS-07-07a1 Q&A there is this scenario and clearance. (replace father with grandmother to better fit your scenario)

2. A household originally consisted of grandmother, mother, and child. The grandmother has custody of the child. The mother and child had been receiving SNAP benefits on their own while living with the grandmother. The mother moved out of the home, but the child continues to live with the grandmother. The child has occasional afternoon visits with his mother. The mother wants to continue to receive benefits for the child in her SNAP case. The grandmother has not applied for SNAP. Would the mother be eligible to continue to receive benefits for the child?

Response: No. This is not a joint custody issue and the caseworker would look at the situation as to where the child lived the majority of the time. The child lives with the grandmother and only has periodic day visits with the mother, thus could not be said to be in the mother’s household for a portion of the month. The mother would not be eligible to receive benefits for the child.

27. Customer has two children who had been foster children at past renewals. The kids are siblings. The girl is still shown as a foster child, but the other is in permanent subsidized guardianship. Customer says the child has not been adopted because they can’t afford the money to file and complete. Can I still look at this kid as a foster child and exempt his board?

Answer: I have reached out to a couple of people at DCS to try to figure out the legal relationship between an adult and child that has subsidized permanent guardianship (SPG) relationship. And I have researched online what SPG is.

SPG is not adoption. He is not really a “foster child” either, but he has not been adopted. It’s like they agreed to take custody of him without him being legally “their” child. Guardianship Assistance payments are made for children under age 18, when a person has agreed to be the guardian of the child. These payments are authorized under a foster care waiver.

These are treated like foster children. Guardianship assistance payments depend on whether or not the child for whom payments are received is included in the SNAP household. If a child is included in the SNAP household, then the kinship assistance payments for that child are included as income when determining the eligibility for that household. If a child is not included in the SNAP household, kinship guardianship assistance payments are excluded.

28. Are residents that receive meals from Domestic Violence Shelters considered residents of institutions?

Answer: Yes, however they are residents of institutions that are potentially eligible to participate in SNAP even though they are residents. Customers may receive SNAP if it is verified that the customer is a resident of the domestic violence shelter. Residents of Domestic Violence Shelters for Battered Persons can receive SNAP and not be considered residents of institutions if the shelter meets the specific program definition. The program definition for shelters for battered individuals: These shelters are public or private nonprofit residential facilities providing temporary housing for battered

individuals and if the location is defined as this it needs to be documented in the case notes. Residents can participate with an authorized representative or on their own behalf, or the facility can also act as a point of sale through a waiver with USDA. Please see Policy 24.06: SNAP Special Living Arrangements Section G further details the Domestic Violence Shelter policy.

29. With the March 2021 update to the verifications policy and household composition, do staff need to verify purchase and prepare separately for non-household members and if so, what are the valid verification methods?

Answer: Staff can continue to take customer's statement for purchase and prepare or intent to purchase and prepare separately from non-household members.

## INCOME

[\(Back to Page 1\)](#)

1. We have a customer that is receiving income from an agency in Germany. I have attached the letter the customer provided us. The letter words the income as a scholarship. The customer signs a contract every three years. The worker and FS1 emails are below in regard to the information the customer has shared with worker. The social security office counts the income as self-employment. According to the manual, we are to exclude educational scholarship income. However, we want to make sure we are applying the correct policy for this customer.

Answer: We found the information below:

<http://mouthandfootpaintersrsa.org/aboutnew.php>

The AMFPA represents 800 mouth and foot painting artists in 74 countries around the world. **They receive grants or are taken on as members and receive a regular income for their artistic proficiency.** The letter stating that the customer is receiving a scholarship is over a year old. Please ask for updated verification to confirm whether she is still receiving a scholarship or has now become a member that is receiving income. If she needs help getting verification there is a mailing address on the website. 1240-1-4-.15(12)

All educational income is excluded. The excluded income may be from Title IV, non-Title IV, BIA, or Federal grants, as well as private sources. Also excluded will be college work-study programs.

2. We were discussing Bulletin #20 [FA-12-12](#) October 12, 2012 SNAP Clarification regarding SSA and SSI Repayments. When SSA is taking funds out of SSA due to an overpayment, the net income is used for the SNAP budget, not the gross. The same is said for SSI overpayment, the net is counted. If the garnishment comes from some other agency other than the one providing the check, then the gross is used.

Would this be the same for a VA garnishment for an overpayment, would we use the net?

Answer: **RECOUPMENTS** 1240-1-4-.15(23)

Do not count the portion of the household's income which is either withheld by the provider or returned to the provider by the recipient to repay a prior overpayment.

Exceptions:

1. monies withheld from assistance payments (Families First) to repay an overpayment caused by intentionally failing to comply with the other Program's requirements
2. monies withheld for bankruptcy;
3. monies withheld for wage earner plan purposes; or
4. monies withheld either voluntarily or involuntarily, for any purposes, except to repay a prior overpayment.

Follow up: For other garnishments would we use the gross amount and then deduct from the appropriate places in ACCENT such as garnishment for child support under AEFDE or the customer liability for medical services being garnished due to the customer neglecting to pay and the amount being deducted from VA benefits in order to pay the customer co-payment?

Answer: For the exceptions we would count the gross and give credit for allowable deductions.

3. Is workman's compensation earned or unearned? Is gross or net counted?

Answer: We found that it is unearned income. We have found nothing allowing for any deductions, in absence of any policy otherwise we would count gross.

20.5 UNEMPLOYMENT COMPENSATION AND WORKMEN'S COMPENSATION SNAP

1240-1-4-.14(2)(a)

Count Unemployment and workmen's compensation as unearned income.

4. Does the income of ineligible students count? Should I fiat accent to include income?

Answer: No. See Accent figures ineligible student income correctly.

5. The HH received the unemployment dependent care allowance, and it was budgeted. Is that correct?

Answer: If received the income it would be countable income according to [FA-10-13](#).

6. Customer is self-employed; she claims a loss on her income taxes. She states that she has income that is available to her but its zero's out because of her deductions. Her expenses exceed her income for SNAP. We sent her a letter requesting her to provide verifications of how her expenses are being paid, and she states from the money she receives as self-employment. She has \$935.00 in Social Security income. She has rent of \$600.00, utilities that average \$120.00 and a car note that is \$381.00. How do we count her income and loss on her tax return as she states that the money is available to her??

Answer: The income is available but is in the end not countable if an allowable deduction zero's it out. You would show the gross and the deductions that are allowed on the AEISE screen.

7. Is per diem pay counted in the gross income or is it counted as a type of reimbursement?

Answer: It could be a reimbursement.

(24) Reimbursements

(a) Definition of Excluded Reimbursements

Reimbursements for past or future expenses other than normal living costs are excluded to the extent they do not exceed actual expenses and do not represent a gain or benefit to the household. When a reimbursement, including a flat allowance, covers multiple expenses, each expense does not have to be separately identified as long as none of the reimbursements cover normal living expenses.

Reimbursements for normal living expenses of the household, such as rent or mortgage, personal clothing, or food eaten at home, are a gain or benefit and therefore are not excluded. To be excluded, these payments must be provided specifically for an identified expense, other than normal living expenses, and used for the purpose intended.

8. If we consider property income producing because the individuals living in them pay the mortgage, do we have to do any calculation for the income?

Answer: 20.8 Certain Rental Income 1240-1-4-.14(2)(d)

If an owner of rental property is actively engaged in the rental, maintenance, or management of property at least 20 hours per week, the income from the property is earned. If he/she is actively

engaged less than 20 hours per week, the income is unearned. **In either case, costs of doing business are deducted from gross income and the remainder is counted.**

9. To FNS Regional Office: Can you advise us on whether SSI income for a child that is paid to a payee (ex. Custodial parent) that is not in the home of the SNAP applicant is countable to the SNAP case of the parent that is applying for the child? In joint/split custody cases the parent that applies for benefits may not be the one receiving the SSI payment etc.

**A. The language that governs is in 273.9(b) and 273.9(c)(6) in terms of a “third party” payment. Since the money is legally obligated and payable to the child who is the SSI recipient, it is the income of the household where the child resides not the income of the household in which the payee resides.**

Follow up: Would this apply to SSA income as well?

Answer: The FNS response is stating that the governing language is in terms of “third party payment” and that who the money is legally obligated for is the determining factor.

The policy below is a part of the section FNS refers to above.

(B)(ii) Annuities; pensions; retirement, veteran's, or disability benefits; worker's or unemployment compensation including any amounts deducted to repay claims for intentional program violations as provided in §272.12; old-age, survivors, or social security benefits; strike benefits; foster care payments for children or adults who are considered members of the household; gross income minus the cost of doing business derived from rental property in which a household member is not actively engaged in the management of the property at least 20 hours a week.

(C) A household receives court-ordered monthly support payments in the amount of \$400. Later, \$200 is diverted by the provider and paid directly to a creditor for a household expense. The payment is counted as income. Money deducted or diverted from a court-ordered support or alimony payment (or other binding written support or alimony agreement) to a third party for a household's expense shall be included as income because the payment is taken from money that is owed to the household. However, payments specified by a court order or other legally binding agreement to go directly to a third party rather than the household are excluded from income because they are not otherwise payable to the household. For example, a court awards child support in the amount of \$400 a month and in addition orders \$200 to be paid directly to a bank for repayment of a loan. The \$400 payment is counted as income and the \$200 payment is excluded from income. Support payments not required by a court order or other legally binding agreement (including payments in excess of the amount specified in a court order or written agreement) which are paid to a third party on the household's behalf shall be excluded from income.

10. If the customer provides a child support order showing one amount, however it is verified in TCSES that they have consistently paid less than the amount ordered, does policy state what amount may be used as a deduction?

Answer: We allow deductions based on court ordered child support payments that are being paid. The Amount that is being paid is all that can be allowed. A new order could indicate a new payment amount. We would make determination of what is representative of ongoing based on information available. 1240-1-4-.17(8)(f)(6) Court ordered child support payments paid by a SNAP household member to or for an individual living outside the household are allowed as a deduction.

11. Customer is paid by Cherokee Nation twice each year and states it is Per Capita income. Does this income count? Source # 1 which is from the combined clearance document says.....*“A Cherokee Indian receives a*

payment through the Eastern Band of Cherokee Indians twice a year. These payments are the individual's share of casino profits. How is the money treated? (4/04 - 6/04)

Response: If the money is paid directly to the SNAP household (and not placed in a trust) it must be considered income. The payment would be averaged over the months it is intended to cover."

Source # 2 is from the manual and reads..... "Exclude any funds distributed per capita to or held in trust for members of any Indian tribe under P.L. 92-254, P.L. 93-134, or P.L. 94-540." This is from the Payments/Benefits Excluded section of the manual.

Answer: Whether it is countable or not depends on: Whether it is income paid directly to the customer with no trust involved or whether it is paid per capita to the customer. Per capita means it has been placed in a trust and then passed to the customer.

The unit did some research and found the information below.

Per federal Law:

Sec. 6. [25 U.S.C. 459e] All property conveyed to tribes pursuant to this Act and all the receipts therefrom referred to in section 5 of this Act, shall be exempt from Federal, State, and local taxation so long as such property is held in trust by the United States. Any distribution of such receipts to tribal members shall neither be considered as income or resources of such members for purposes of any such taxation nor as income, resources, or otherwise utilized as the basis for denying or reducing the financial assistance or other benefits to which such member or his household would otherwise be entitled to under the Social Security Act or any other Federal or federally assisted program.

This income mentioned in this case would be excluded. This income was placed in an Trust and is now being paid from the Trust account to the customer. (Per Capita). Had this income went straight to the customer and bypassed the Trust then we would treat this income differently. But if it is verified "per capita" then this income is excluded. As cited: Any funds distributed per capita to or held in trust for members of any Indian tribe under PL 92-254, PL 93-134 or PL 94-540. **To further explain "per capita"**

<http://www.irs.gov/pub/irs-drop/n-14-17.pdf>

12. A customer provides pay stubs showing overtime pay. Which would be the best way to calculate income: (1) subtract the portion of the check that is overtime pay and use remaining balance in income determination or (2) disregard the entire check as it is not representative of ongoing income?

Answer: The worker should come to a determination of what is most representative of ongoing.

Considering the overtime to be representative, if it is a part of normal fluctuation of hours, is another possible option.

13. Does child support income count to the parent or the child?

Answer: For budgeting purposes income counts as legally obligated. Child support income is generally legally obligated to the parent. For accent purposes SNAP has been flexible to allow it to be coded as required for FF as long as the required income is in the budget. If both individuals are not in the budget it is important that it is coded per legal obligation.

14. Do we count gas reimbursement as income?

Answer: No, Gas/mileage reimbursements are excluded from income.

15. A customer gets VA benefits (\$540/mo.), for aid and attendance. I'm curious how to count this income. She pays \$200 of it to her daughter, who lives with her and cares for her; the rest goes to gas and food.

Answer: The \$200 may be excluded since it is paid to the daughter for an allowable cost. If the daughter is included in the SNAP HH, it would be her earned income since she performs work (care for her mother) in order to receive the money.

16. Customer was laid off August, however. Customer submitted a bank statement showing that her 9/4/14 check was received 8/29/14. Should we count this check receipt date or actual date on the check (per The Work Number)?

Answer: We would go by the month income was actually received.

17. Couple who are still married but separated; he is on terminal leave from the military (will terminate 110114), living and attending school in another state. He will be in school for at least another year. He gives the wife monetary assistance. Would the absent wage earner procedure apply?

Answer: We define an absent wage earner: An absent wage earner is an employed individual who temporarily resides away from the home because work related travel, or distance from the employment site prevents the individual's living in the home. If he is living somewhere else, he is a separate HH not an absent wage earner.

18. We have a lady who is applying for herself and her adopted children. She has just separated from her husband and he moved out. The adoption assistance payments are made out to him and she reports he is keeping all of it. Would we count the adoption assistance in mom's case?

Answer: The income needs to follow who they are legally obligated to. If they are legally obligated to the children and the parent is just the payee, then the income needs to be in the case with the child. The mother of the adopted children needs to contact the paying agency and discuss this situation if they payee needs to change.

19. We have a gentleman who is getting VA and the amount is \$2100 per month but his notice shows that his former spouse is getting \$1050 of this amount. The notice says it is a former spouse deduction. I have looked this up and it appears to be a settlement due to a divorce. Do we count the gross amount of \$2100 per month or the \$1050 he gets after the spousal deductions are removed?

Answer from FNS: unless this is for Aid and Attendance, you would need to verify the 50% payment is per a court ordered (possibly dissolution of marriage) and that the customer did not voluntarily give her the 50% to facilitate the divorce. If the 50% must go directly to the ex-spouse from VA, so he has no access to the money, then you would count only the 50% he receives.

20. I think the policy is that the short-term disability is earned unless the person is terminated. Is this correct?

Answer: Your understanding is correct. FNS states to count it as earned income as long as customer is still considered an employee. Once employment has ended, the income would be considered unearned income.

Follow-up Question: Short term disability vs. Workmen's compensation- In our current policy manual Short-term is not listed under Earned income, and the only listing of Workmen's compensation is listed under unearned income. These are two different forms of insurance that you can receive while still employed should an injury occur. Therefore, why would we consider workmen's compensation as unearned, but consider short/long term disability as earned? Or should workmen's compensation be considered earned if you are still employed?

Answer: They are treated differently because they are paid differently. Short-term disability the employee pays into with money they earned and if the time ever comes that they need it, the income is directed back to the employee. Once the employee/employer relationship ends, there may still be funds owed to the customer but because they are unemployed, the income would be considered unearned at that time. Workmen's compensation Insurance is paid by the employer and if the employee ever needs it they can draw from it. But it was not paid by money that they earned.

Additional Follow up: If customer is paid short term disability through a private company, is still employed with intent to return but is not being paid through the employer, would this be earned or unearned income?

Answer: In order for short term disability to be considered earned income, it would need to be 1) paid by the employer and 2) the employee/customer is still employed. If customer is being paid a short-term disability benefit through a private agency such as Aflac, the payment would be considered unearned income.

21. The customer is questioning why they fail for FS. "Gross Monthly Income Eligibility Standards for Households Where Elderly, Disabled, are a Separate Household (165 Percent of Poverty Level)." The husband is 100% disabled through VA. Do we use the 165% chart for this family? Or does it mean that if a person in the HH is elderly/disabled and they are applying as separate HH, that person would fall under this chart? They receive his VA and CS. Their gross is \$3843 for HH of 5.

Answer: The 165% is just to see if elderly/disabled individuals that can't purchase and prepare on their own can apply as a separate HH group from other HH/resident members. Total income of all normally required residence members must be under 165% for the elderly/disabled to be potentially eligible separate from other members. Actual benefits are determined based on the 130% of the poverty level. SNAP Households containing elderly/disabled members are subject to the net income test only; other households are subject to the normal gross limit.

22. I have an appeal involving the PASS program and cannot find clear or instructive information on how this income is to be treated. Case includes a customer who has shown verification that she participates in the PASS program and receives SSDI and SSI. What are the instructions for counting this income?

Answer: Money that is diverted from the customer's income to a "PASS" account is excluded as income.

Follow-up Question: I'm assuming that this involves net income rather than gross which is what the county office did based on the online policy manual. I have not been able to find instructions on how to treat the income or how to verify it.

Answer: We treat the income by excluding it. Yes, we would count net because it is excluded. If they receive \$700 in SSI and \$100 is considered PASS we will count \$600 as income on AEFMI. You would verify the same way we verify all other eligibility information. Staff should request documentary evidence, use a CC, or take customer statement if the customer and the worker are unable to get verification.

23. We have received clarification in the past regarding SSI payments and how to apply the income based on who is legally obligated to receive the income. The situation we have is: Father has applied for SNAP for himself and his 5 children. We show that 4 of his children are receiving SSI. Customer has provided a court order that states under Child Support: "if the SSI check is received by the father, the father shall within 2 days

of receipt tender the mother's portion of \$1,348 to the mother". Our question is since the court has stated that \$1,348 is the "mother's portion" does this change who the income is legally obligated to?

Or is the income still considered legally obligated to the children and we still should count the full amount in the case with the children and allow the appropriate child support payment deduction in the case?

Answer from FNS: Unless SSA makes a change in the benefits, the money remains legally obligated to the children. Based upon the information you have provided; the court has determined an amount each parent should have to care for the children. The court order for child support would allow you to include that deduction in the SNAP budget if the father is actually paying it.

24. Customer has self-employment from a rental business that they engage in less than 20 hours a week. I know this is considered unearned income, but do we count the gross or the net on AEFMI?

Answer: On AEFMI, you would show gross income minus the cost of doing business.

Follow-up Question: This customer showed they purchased a stove and power cord but made the payment with a Lowes Gift card. Is this an allowable cost of doing business?

Answer from FNS: if the gift card was a gift from someone and then she used that to purchase the stove and power cord then it would not be an allowable expense. However, there are few circumstances which the customer may have purchased gift cards with their own money (example from Kroger to gain reward points). If this is the case, then the purchase made with that gift card for the stove and power cord would be allowable.

25. I have FF case being reduced due to Bankruptcy. For SNAP, would we count the budget in FF before the decrease or would we count the decreased amount as income?

Answer: Bankruptcy would be considered a third-party payment so we should be counting the gross non-reduced FF grant amount in the SNAP budget. We are told to treat third party payments: Money legally obligated and otherwise payable to the household (the non-reduced FF grant) which are diverted by the provider (DHS) of the payment to a third party for a household expense (Bankruptcy) shall be counted as income and not excluded.

26. I have someone that is receiving SSI but is also working at Voc-Rehab. She states that she receives \$4.00 per day just to show up and then gets paid for her piece work. Does this income count for SNAP?

ANSWER: Training and Rehabilitation Allowances count as earned income.

Training and Rehabilitation Allowances count as earned income any training allowances from vocational and rehabilitative programs sponsored by federal, state, or local governments (such as the Employment & Training Program) unless the allowances are excluded as reimbursements. (Except for WIA training allowances which are excluded.)

27. I had a case review that stated the customer's income should be placed on AEIEI because they did not have proper tax documents. Customer is a cosmetologist working from home. Customer produced a receipt book as verification of income and expenses. What is the correct procedure for adding this income to the case?

ANSWER: Here is a memo that is a good guide for determining self-employment:

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/memos/fa-12-04.pdf>



Money derived from an individual's work efforts is considered earned income. However, there are two classifications of earned income: employment and self-employment. The absence of withholdings is not an indicator of employment or self-employment income. The purpose of this memorandum is to address how to identify and classify earned income types. Based on the information provided, this customer's income is more than likely self-employment.

28. This person no longer gets SSI but only SSA. She still owes SSI \$300 +. They are now going to take \$30 a month out of her SSA check to repay the SSI. Should we still count Gross or since it is to recoup a SSI payment the net?

ANSWER: We would count the net in this case.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-12-12.pdf>

RECOUPMENTS 1240-1-4-.15(23)

Do not count the portion of the household's income which is either withheld by the provider or returned to the provider by the recipient to repay a prior overpayment.

29. Customer reporting income at a job has decreased: This job is already on AEIEI, but customer says hours have gone down. VR is requested but not received. Do you close case or just leave in the prior higher amount?

ANSWER: We are acting on ALL changes. If we request verification of income and verification of income is not received, you should close the case.

30. Customer is getting child support arrearage for 20-year-old daughter who is no longer in the household. She states that she gives the money to her daughter so it is not part of her income to take care of her household expenses so doesn't feel it should be included. Should the child support be counted in the budget?

ANSWER: For SNAP it matters more about who the income is legally obligated to. If the income is legally obligated to the 20-yr. old and the mom is just a payee, then it does not have to go in the case. If it is legally obligated to the parent (most child support is) and she is just giving it to her daughter, then it is HH income and still needs to go in the case.

31. If a person has set up a fund-raising account (such as "Go Fund Me" or "Kickstarter") for a sick spouse, how is that account viewed?

ANSWER: From FNS: Normal guidance on income and resources would apply to these accounts. For example, if the customer has unlimited access to the funds, money received in the month would be a contribution (income). Any funds left the next month would be a resource. Even if the money is intended for something specific, medical treatment, the unlimited access would make us consider it available. Since household income is meant to cover living expenses like shelter, medical care, food, clothing, etc., we would consider these donations just like any other type of income for the household

32. Is income from the Post 9/11 GI Bill that is being received for a housing allowance counted as income in the SNAP budget?

ANSWER: Income from the GI Bill that is for living expenses (Example: housing allowances) is countable income. If the income from the GI Bill is intended for school expenses (example: tuition and books), then it would be excluded as educational income.

33. Am I correct in thinking that VA Housing Allowance which is identified as such can be excluded for the amount of actual costs and any that exceeds would be counted as income?

ANSWER: Some military pay is not counted. Many other payments, however, are treated as income.

Example of payments treated as income are; the Family Self-Sufficiency Allowance (FSSA) and the basic housing allowance (BHA).

34. We have a 17-year-old that is not in high school. They dropped out but they are going to GED classes. Do we count their earned income in the SNAP household?

ANSWER: We do not count it if the GED program is state accredited, and they are still under parental control. Income earned by youth is excluded as long as they are under 18, in elementary or high school, and live with someone w/ parental control.

Federal Regs definition of an elementary or secondary school student is someone who attends elementary or secondary school, or who attends classes to obtain a **General Equivalency Diploma** that are recognized, operated, or supervised by the student's state or local school district, or who attends elementary or secondary classes through a home-school program recognized or supervised by the student's state or local school district.

35. Applicant sells their blood plasma as a source of income. Are we correct in: counting it as income? AND if so, is it shown as earned or is it shown as unearned income?

ANSWER: It is counted in the SNAP budget as earned income.

36. Is VA Aid and Attendant Payments counted as income for SNAP? We have a customer who is providing aid and attendant care for another and is receiving VA benefits for the service?

ANSWER: The person eligible for and receiving the VA benefits would not have the income counted in their case. If you have a customer that is providing the service and is being paid by the person who receives the VA benefits, that is earned income and would count.

Example: Tim-Eligible for and Receiving VA benefits (\$500)

Sam- Takes care of Tim and is paid (\$500)

Tim's case would show no income because this income is excluded.

Sam's case would show earned income because he is working for the money that Tim pays him.

Follow-Up: With your example, what if "TIM" and "SAM" live in the same HH?

ANSWER: You would show Sam's income in the case.

37. I found a Q&A from back in 2008 about the CWT program that said to count as earned income but what had me second guess was we received a letter attached that said this was by a physician's RX and was considered compensation from the program as a VA health care benefit.

ANSWER: The previous clearance is correct.

CWT is received by certain veterans to do work as part of a vocational rehabilitation program. These payments are countable as earned income.

They may receive Vocational Rehabilitation Subsistence Allowance which is a subsistence allowance while they are in training programs. These payments are countable as unearned income.

38. SSI recipients who have a rep payee and/or SSI/SS-DI who are disabled due to drug addictions or alcoholism have rep payees. My question is the manual says the fee is not counted as income to the household. Does this mean there is no longer a limit of \$25? Do we allow the full fee?

ANSWER: This amount is reviewed annually, and this is the most recent info from SSA.

<http://www.ssa.gov/pubs/EN-05-11015.pdf>

The allowed monthly fee is 10% of the monthly benefit or \$41, whichever is less. For individuals with a drug or alcohol addiction, the maximum fee amount is 10% of the monthly benefit or \$78, whichever is less.

39. We have a customer who applied for SNAP. She is 55 years old and working under the Title V program. Before all of our customers who worked under the Title V program were at least 60 and above and receiving SS benefits. I know the income under the Title V program is exempt but is there policy as to the age the person has to be to receive the exemption?

ANSWER: Title V pay received under Older Americans Act of 1965 is excluded as income. Their eligibility requirements are:

“(2) ELIGIBLE INDIVIDUALS.—The term ‘eligible individuals’ means an individual **who is 55 years old or older**, who has a low income (including any such individual whose income is not more than 125 percent of the poverty guidelines established by the Office of Management and Budget), except that, pursuant to regulations prescribed by the Secretary, any such individual who is 60 years old or older shall have priority for the work opportunities provided for under this title.

40. We have a lady who is receiving SSA, and SSI and she is going thru a training program at Goodwill, and they are saying that all the reimbursement is excluded because it is under Title XX. Is this income excluded or counted?

ANSWER: It is possibly excluded.:

Count as earned income any training allowances from vocational and rehabilitative programs sponsored by federal, state, or local governments (such as the Employment & Training Program) unless the allowances are excluded as reimbursements. (Except for WIA training allowances which are excluded.) Reimbursements received by assistance units to pay for services provided by Title XX of the Social Security Act are excluded.

Title XX reimbursements for normal living expenses are not excluded under this provision. So, if this is truly a Title XX assistance allowance, it can be excluded unless it is for normal living expenses.

41. What is the 165% income standard for determining separate Household Status for the Elderly and Disabled?

Answer: These amounts as of can be found here: [FA Standards Desk Guide](#)

42. Customer provided a NR4 form from Canada Revenue Agency which shows the customer is receiving a pension from Canada which will be ongoing. The question is do we count the pension in the value of the Canadian dollar, or do we have to convert it to the US Dollar?

Answer: Income in the form of foreign currency, such as Canadian dollars, must be converted to U.S. dollars for SNAP purposes.

43. Customer has funds in an Achieving a Better Life Experience (ABLE) account. What is this and how would we treat these funds?

Answer: ABLE accounts are tax-favored savings accounts established to provide secure funding for disability related expenses on behalf of designated beneficiaries deemed disabled before age 26. They are excluded as income and resources.

44. The lady in question receives \$5600 a year in March as a lump sum to be used for medical bills resulting from the injury. I looked it up on the Internet and this income can only be used for certain medical bills and the customer has to provide detailed information concerning how the amount was spent each year. Is this income excluded?

Answer: **Yes.** Reimbursements for past or future medical or dependent care expenses are excluded.

45. If a customer is in High School and has turned 18, do we count their earned income?

Answer: This income is countable for SNAP. As a SNAP household member who is 18 years of age or older, their earned income is no longer excluded. Our policy and federal regulations both specify that the child must be under 18, in school, and under parental control for the earned income to be excluded.

44. An appeal is made due to a customer disputing the gross income calculations due to the per diem income being included. Her husband is a truck driver and is reimbursed by his company for expenses paid to operate the truck. Should this be counted in with his income?

Answer: The per diem income should be excluded as income based on Federal Regulations 273.9, examples of excludable reimbursements which are not considered to be a gain or benefit to the household are: (A) Reimbursements or flat allowances, including reimbursements made to the household under §273.7(d)(3), for job- or training-related expenses such as travel, per diem, uniforms, and transportation to and from the job or training site. Reimbursements which are provided over and above the basic wages for these expenses are excluded; however, these expenses, if not reimbursed, are not otherwise deductible.

Also, please refer to [Treatment of Income Policy Desk Guide](#)

45. Is income received from Youth Build programs excluded income?

Answer: Income from Youth Build programs is excluded under certain criteria. Please view the statement from the SNAP Policy Manual Chapter 21: Payments/Benefits Excluded in Eligibility Determination.

46. We have an appeal regarding income. In filing the appeal, the Appellant, contested whether his wife's income should be counted in the case. The wife is in the SNAP assistance group, which consists only of the two of them. The wife receives SSDI of \$928 and teacher's retirement of \$1094. The Appellant states that his wife is a ward of the state and that her income is under a conservatorship. He further states that legally his wife's money is separated from him due to the conservatorship and all of her money must be used on her. Would her income be countable?

Answer: Depending on who has ownership and access to the unearned income will determine if it can be counted in the case. For example, if the wife has access to the funds, the unearned income has to be counted. If the spouse is the conservator, the unearned has to be counted in the case. If the state on the other hand has access and ownership to the funds, the unearned income can be excluded. Verification will be needed for that determination to be made.

47. Military Pay: What is military combat pay and how is it treated?

Answer: Military combat pay is additional pay received by military personnel as a result of deployment to a combat zone to be excluded from income based on the Food and Conservation Energy Act of 2008. FNS recently sent out a memo clarifying how to treat military combat pay. The memo states the State agency should compare the two provided leave and earnings statements to determine whether the service member is receiving Imminent Danger Pay (IDP) and Hazardous Duty Pay Location (HDP-L) as a result of deployment to or service in the designated combat zone. Special pay received immediately prior to the service or deployment in the combat zone may not be excluded. The State agency should exclude the amount of the IDP, and HDP-L identified as being received as a result of deployment to or service in the designated combat zone.

Follow-up: How is military combat pay verified?

Answer: The FNS memo states that military combat pay can be verified by the following:

- A copy of the service member's deployment order
- A copy of the leave and earnings statement (LES) of the service member immediately before deployment; and
- A copy of the LES after deployment.

48. Is income received from the National Council on Aging excludable?

Answer: Yes, income from the National Council on Aging is excluded income because it is part of the Senior Community Service Employment Programs (SCSEP) grant which is Title V. A 2010 clearance specifically on the National Council of Aging stated that the program falls under the Older Americans Act of 1965 in which congress has exempted wages from SCSEP from income eligibility determinations for SNAP.

49. Does the Work Number have to be checked on applicants who do not report any income at time of application?

Answer: It is not mandatory however it is preferred that it is checked, even if they state no income. This is because if the case in question is chosen for a QA or QC review and income is found on the Work Number and not addressed it could be considered an error.

50. Is it mandatory for the case worker to provide self-employment calendars and document that they have done so?

Answer: No it is not mandatory.

51. Could you please clarify if the formulas such as 2.15 for (biweekly) or 4.3 (weekly) is used in determining the unearned income total of Child Support in the SNAP budget and can you clarify how Child Support income should be determined?

Answer: You would calculate child support income by determining what is representative and/or anticipated in projecting income for the customer, like you would with earned income. The 2.15 for bi-weekly and 4.3 for weekly conversion factor calculations would still apply depending on the frequency of how often the child support is received.

This is on a case-by-case basis. For example, if the child support is being received once per month you would count the child support average monthly amount based on 1 payment per month with no conversion factor needed, it all depends on the frequency of how often the child support is being received.

Child support may often fluctuate and include some zero weeks that could be considered representative when determining the average monthly anticipated amount.

Documentation of what has been received, what is representative, what is anticipated, and how average monthly amounts were derived is key based on the best information available.

52. Is all WIOA income excluded?

Answer: No, not all WIOA income is excluded. Income received from on-the-job training programs under Title 1 of the Workforce Investment Act of 1998 for individuals 19 and older is included income, all other forms of WIOA income is excluded.

I. Workforce Investment Act (WIA) Income

1. WIA On-the-Job-Training Programs

Earnings for WIA on-the-job training programs are excluded only for individuals under age 19 who are under the parental control of an adult household member.

Note: On-the-job training payments received under the Summer Youth Employment and Training Program are excluded.

2. Other WIA Programs

All income (earned or unearned) from other WIA programs is excluded.

53. How is the income counted for Uber and Lyft drivers?

Answer: [Bulletin FA-12-04 Identification and Classification of Income](#) states that “Newspaper carriers, independent contractors and owners of a franchise can also be classified as self-employed.” The income received by Uber and Lyft drivers could be considered self-employment income because they are independent contractors.

If Uber and/ or Lyft is issuing the customer a 1099 as self-employment, the income would be treated as self-employment income and deductions would be calculated in accordance with that. Additionally, even if the customers working for Uber and/or Lyft do not file taxes, they can still receive deductions on self-employment income. Filing taxes is not listed in our Policy or Federal Regulations as a requirement.

54. Are FEMA payments included as income in the SNAP budget?

Answer: FEMA payments are to be excluded. The memorandum below clarifies that FEMA payments are to be excluded as income and resources in the determination of eligibility for SNAP. See also: [FA-10-19 Treatment of FEMA payments](#)

55. Are payments from ETHRA through the Housing Choice Voucher Program for a customer to pay their mortgage considered income?

Answer: No, the Housing Choice Voucher (HCV) or “Voucher” program is a federal rental assistance program funded through the Department of Housing and Urban Development (HUD).

Department of Housing and Urban Development (HUD) vendor payments are excluded as income.

56. When there is a married couple and the spouse is in a nursing home and the community spouse receives his spousal allocation, does the spousal allocation count in the SNAP budget?

Answer: The spousal allocation would count in the SNAP case if it is legally obligated to the in-home spouse.

57. A customer reports that he is receiving a residential stipend of \$200.00 monthly from the public housing office for up-keep of the grounds. He also lives in the public housing rent free. Is the \$200.00 considered income or exempt as income?

Answer: The residential service stipend would be considered as earned income, because the \$200.00 is being paid to the customer directly and not to a third party for the customer.

58. How do you treat the income of school employees?

Answer: Section §273.10 (c)(3)(ii) Households which, by contract or self-employment, derive their annual income in a period of time shorter than one year shall have that income averaged over a 12-month period, provided the income from the contract is not received on an hourly or piecework basis. These households may include school employees, sharecroppers, farmers, and other self-employed households.

Also refer to Chapter 27 Section C in Policy Manual: Treatment of Income

[SNAP Policy Manual](#)

59. Is reimbursement for mileage/transportation on a customer's paycheck stub included or excluded in the budget?

Answer: Mileage/travel reimbursements are excluded from the income calculations for SNAP for job- or training-related expenses. Federal regulations state that:

"Reimbursements or flat allowances, including reimbursements made to the household for job- or training-related expenses such as travel, per diem, uniforms, and transportation to and from the job or training site are excluded as income. Reimbursements which are provided over and above the basic wages for these expenses are excluded; however, these expenses, if not reimbursed, are not otherwise deductible." Please see Chapter 21 Section X. Reimbursements [SNAP Policy Manual](#)

60. For Families First (FF) intake applications that are pending CR Approval do we count the FF grant in the SNAP budget since the FF is pending and may not be approved for various reasons?

Answer: At the point the Eligibility Counselor is approving the SNAP, they cannot assume that the FF will be approved by the Customer Rep even if they meet all eligibility criteria (customer still has to show for orientation and agree to sign the PRP). Thus, at SNAP approval, the FF grant should not be counted in the SNAP budget if FF is not already approved or will not be approved at the same time as SNAP.

First, run the case to test for eligibility and see if the FF would pass, then run AEABC and pend FF in a way as to not include the FF in the SNAP budget (ex: saying N to R/R on AEFPPY is a good practice but can also be done by leaving the FF pending by putting '?' on TANF screens such as AEIWP). Approve SNAP and refer to CR. The FF approval later would be a change to the active SNAP case and would affect benefits accordingly.

61. The customer has a special need **adopted** son who is receiving adoption assistance. Can the child and income be excluded from the case.

Answer: Adoption assistance, after the adoption has become finalized, is included and the adopted child is a mandatory member and cannot be excluded thus including the income. Prior to the adoption being finalized, consider mandatory members and whether the child is a foster child to decide if the child and his/her income can or cannot be excluded. Households that include foster children have the

option to exclude the child and thus the income. Adopted children are mandatory members of a household.

62. We have a seventeen (17) year old that is in school living with his mother who was just approved for unemployment. Would the income be counted in the SNAP budget?

Answer: Yes. Since this is unearned income and federal regulations state “**earned income** is excluded for any HH member who is under age 18, a student, and who lives with a natural, adoptive, stepparent or under the parental control of a HH member other than a parent...” this income would be counted in the SNAP budget.

63. Will the temporary \$300 unemployment benefit under the Lost Wages Assistance (LWA) program be included or excluded from SNAP budget?

Answer: Per FNS clearance:

“Funds provided to households under the Assistance Program for Lost Wages, including both the Federal and State share under the program, must be excluded from income for purpose of determining SNAP eligibility. The President’s memorandum establishing the Assistance Program for Lost Wages states that it is being established pursuant to Section 408(e)(2) of the Stafford Act (42 U.S.C. 5174(e)(2)). Section 312(d) of the Stafford Act (42 USC 5155(d)) states, “Federal major disaster and emergency assistance provided to individuals and families under this chapter, and comparable disaster assistance provided by States, local governments, and disaster assistance organizations, shall not be considered as income or a resource when determining eligibility for or benefit levels under federally funded income assistance or resource-tested benefit programs.” As such, payments made under the Assistance Program for Lost Wages must be excluded from income for SNAP purposes.

This differs from the pandemic unemployment assistance payments, pandemic unemployment compensation, and pandemic emergency unemployment compensation because those are authorized under the CARES Act, not the Stafford Act. Because there is no statutory or regulatory requirement that those authorized under the CARES Act be excluded from income for SNAP purposes, they are considered unearned income for the purposes of determining a household’s SNAP eligibility.”

64. If a customer is receiving SSI and employed part time through the Ticket to Work Program, is the earned income exempt or countable?

Answer: Income from the Ticket to Work Program would be countable as earned income.

65. Is the current round of Pandemic Unemployment for \$300 per week from the new Stimulus Package included or excluded as income?

Answer: Federal pandemic unemployment compensation payments are excluded as consideration as income from SNAP.

66. Is Tennessee Child Support Enforcement System (TCSES) verified upon receipt for SNAP?

Answer: No, TCSES is not verified upon receipt and the customer must confirm the information TCSES reports. TCSES is the database for child support payments that can be used as a tool to verify the customer’s statements.

**MOTOR VOTER**

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1. I am trying to find any material that tells us that we are responsible to designate on a declination form if the customer was interviewed by phone, or application received by fax or mail when the Intake Official's signature is used to complete a declination form. We just had an audit, and this is news to me.

Answer: Yes, it is our current procedure to note on the form that it was completed over the phone.

2. Are we to place any Motor Voter information in CLRC?

Answer: According the Bulletin No. 16 in 2012 we are **not** to place this information in CLRC anymore.

The tracking of this information will be done in VRTS only.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-12-08.pdf>

**VRTS needs to be updated every time a person enters the building for application, renewal, at each DRS annual review of the Individualized Plan of Employment (IPE), change of address, and for those persons seeking to register who are not applicant/recipients. Customers who say they are already registered to vote should sign a declination form and the information updated on VRTS EACH TIME. We will no longer track this information other CLRC. We will only use VRTS to track any information needed.**

3. For the new Family Assistance Reliability Reviews, we have added a question concerning motor voter. Is this necessary for VRTS to be completed during reported changes (that are not change of address) or SR?

Answer: Bulletin No.16 ([FA-12-08](#)) only requires VRTS when reporting changes if it's a change of address. See below:

VRTS needs to be updated every time a person enters the building for application, renewal, at each DRS annual review of the Individualized Plan of Employment (IPE), change of address, and for those persons seeking to register who are not applicant/recipients. Customers who say they are already registered to vote should sign a declination form and the information- updated on VRTS **EACH TIME**. We will no longer track this information on the CLRC. We will only use VRTS to track any information needed. Section IV. A. 1. (a)

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-12-08.pdf>

4. Two Adults in the house, but VRTS updated only for one adult. Is this correct?

Answer: We only have to do VRTS for the person that is applying. We do not have to offer this for every adult in the HH.

5. Are there certain instances where all No's can be listed on VRTS?

Answer: There are certain instances where VRTS can be filled out with all No's.

Example: If a caseworker is conducting a phone interview with a customer that is not registered to vote, does not wish to register to vote, and a declination form is not physically given to a customer- an N could be placed in the DECL GIVN and other fields. Please note that the declination form needs to be filled out in its entirety and scanned into FARAS indicating the customer was offered the right to vote.

6. Does VRTS need to be filled out for illegal aliens? Looking at VRTS it looks like we are to enter 999-99-9999. Is this right?

Answer: We have received an answer from legal and the Secretary of State said that everyone that has a declination form completed needs to be captured in VRTS. If they are an undocumented alien and have no SS#, then all 9's (999-99-9999) would be entered into the system.

7. For a recertification in which an application is filed, but an interview is not completed, does VRTS need to be done?

Answer: No, if an application is filed and a renewal interview is not completed VRTS does not need to be filled out.

8. If a customer comes into the office or calls the office and reports a change of mailing address, do we have to offer the customer the right to vote?

Answer: Yes, the customer should be asked if he or she would like to register to vote when reporting any change of address, regardless of whether it is a change of physical or mailing address.

Follow-up: Does that mean anytime there is a change of address the customer has to be offered the right to vote?

Answer: Per legal, the right to vote only applies when the request for address change is made by telephone or face to face contact.

## NDNH

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1. The Bulletin 15 says that we can't update CLRC, but the training says we can.

I think clarification on what should be entered in CLRC is needed if we could get some?

Answer: The bulletin and the training are both correct. This will be along the same lines as a DERS.

**Bulletin states:** no information should be entered into CLRC/Running Record concerning this report or information provided in this report. (This is correct)

### **The training states:**

#### **Verification process:**

Send CNCC-

Update CLRC

#### **Returned Verification:**

Add to AEIEI

Update CLRC

#### **No Verification returned:**

Close

Update CLRC

You are updating CLRC with the information talked about on that slide.

In other words- update CLRC with all the actions you took. Requested verf, received verf & took action, or did not receive verf & took action. You just don't mention the report or the info in the report.

2. With working this report, will we still get the new hire data matches as alerts and if we do, what is the action to take?

Answer: <https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-14-11.pdf>

Bulletin states: This is a new federal requirement separate and different from the current new hire in Clearinghouse. Nothing has currently changed about the new hire state matches/alerts

3. The last clarification we got was that we had to send a CNCC requesting proof of income for people on the NDNH report even if that information was on The Work Number. If we send the CNCC and the customer does not respond, can we update the information from The Work Number, or would we just close the case?

Answer: If there is a match on NDNH you send a CNCC requesting the customer to contact you. If the customer does not respond, you close the case. We have to allow the customer a chance to confirm or deny the information we have received. The Work Number information is 3rd party information and is not considered verified upon receipt/retrieval. It can be used to confirm customer statement if the customer contacts.

- If you have The Work Number information before you speak with the customer; ask them where they are working, how much they get paid an hour, and how many hours they average a week. If their statement matches the information, you have from The Work Number update the case with that information. If they state something different, allow them a chance to provide verification.
- You speak to the customer first; ask them where they are working, how much they get paid an hour, and how many hours they average a week. If the Work Number verifies their statement, you can use the information and update the case. If it does not, you will need to allow the customer a chance to provide verification.

\*\*If customer states hours or average hours vary, The Work Number can be used to confirm that.

4. I can't pull the NDNH report. Why?

Answer: We are still working on getting everyone access to the report. In the meantime, your district NDNH contact should be pulling the report and getting it to you. Here is a list of the District contacts:

District 1: Shaun Perkins

District 2: Lisa H Cool

District 3: William York

District 4: Pam Richardson

District 5: Julie England

District 6: Timica Hancock

District 7: Linda Harville

District 8: Kimberlee Becton

5. Customer has filed renewal application and we complete it. We then find customer on the NDNH list. We send CNCC and give 10 days—customer does not return info, so we close the case. If the customer returns the info within 60 days of the renewal date, does the customer have to fill out another application or can we use the renewal app?

ANSWER: This application was completed, and an eligibility determination was made. Then the NDNH match occurred. Because the application was completed they will need to reapply with a new application.

6. If we have a case that has incorrectly mentioned the NDNH report can this be removed from CLRC?

ANSWER: If cases have the NDNH report mentioned in CLRC that information should be removed. This can be done by having your **FMD** send an email to Lisa Dennis-Harwell ( [Lisa.Dennis-Harwell@tn.gov](mailto:Lisa.Dennis-Harwell@tn.gov)) and Rodney Pickel ([Rodney.pickel@tn.gov](mailto:Rodney.pickel@tn.gov)). Please provide case number and date of CLRC entry that speaks about NDNH.

Follow-up: Do we follow the same procedure if it is something other than NDNH info that needs to be removed?

ANSWER: Yes.

## NOTICES

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1. In working the deceased/incarceration report the verification section of the memo says between recertification we “must” send a CNCC to the household. In many of our counties, the workers have been closing based on newspaper or funeral home obituaries well before the person is even on the deceased report. If there is enough identifying information to know that it is our customer, are the workers allowed to close a case based on this or do they have to still send a CNCC allowing 10 days for the household to respond?

Answer: The wording in the memorandums is based on the Federal Regulations below. If working from the report the instructions in the memorandums should be followed to ensure compliance.

§ 272.14 Deceased matching system.

(a) General. Each State agency shall establish a system to verify and ensure that benefits are not issued to individuals who are deceased.

(b) Data source. States shall use the SSA's Death Master File, obtained through the State Verification and Exchange System (SVES) and enter into a computer matching agreement with SSA pursuant to authority to share data contained in 42 U.S.C. 405(r)(3).

(c) Use of match data. States shall provide a system for:

(1) Comparing identifiable information about each household member against information from databases on deceased individuals. States shall make the comparison of matched data at the time of application and no less frequently than once a year.

(2) The reporting of instances where there is a match;

(3) The independent verification of match hits to determine their accuracy;

(4) Notice to the household of match results;

(5) An opportunity for the household to respond to the match prior to an adverse action to deny, reduce, or terminate benefits; and

(6) The establishment and collection of claims as appropriate.

2. When sending a CNCC notice to the HH for NDNH we were told to use a specific language on the CNCC. It was too long to fit on one screen, and we were advised that hitting F16 would allow us to continue typing in the same CNCC. The workers used PF16 on the New Hire report CNCCs to get a new page to be able to fit in all the required comments. One worker opened a returned mail one today and there is only the first page in the envelope. No 2<sup>nd</sup> page for what was entered with PF16 was included in the envelope. What do we do now? How do we handle this?

Answer: We confirmed with Systems that when PF16 is utilized on CNCC, it will bring up a fresh screen, but it creates a new notice instead of being a continuation of the original. So we have changed the wording of the CNCC:

**It has come to our attention that you may have experienced some changes.**

**Please contact our Department no later than (10-day date) about:**

**(PLACE NEW INFORMATION HERE )**

**In order to determine if this change affects your eligibility, please provide:**

**(LIST VERIFICATIONS HERE)**

**to the address on this letter or fax to : (FAX NUMBER) by (10-day date).**

**If we do not hear from you, your benefits could be stopped.**

3. We would like to request clarification regarding booking out appointments 8 calendar days vs. 8 business days. I believe that currently we are to use calendar days. When our clerical booked 8 calendar days out, no appointment letters were issued, however when they booked 8 business days out, appointment letters were issued. Please advise.

Answer: If you are depending on ACCENT to generate a notice, then it must be scheduled 8 business days out. However, please do not rely on ACCENT to send notices. There was guidance sent out in the past on how to schedule appointments and send customer's their notice. This guidance is due to an audit finding.

1. Schedule all intake appointments on CSAS in ACCENT as usual.
2. After scheduling the appointment on CSAS, print two (2) copies of CSAS
3. Give one (1) copy of the CSAS appointment to the customer. If the customer is not there in person, mail one to the customer.
4. The second copy of CSAS will be scanned into FARAS as verification to that intake appointment.

## **PENALTY**

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1. We were trying to determine what the "means test penalty" is for SNAP.

Answer: When a Federal, state, or local needs-based payment (such as SSI, AFDC/FF, or SNAP) is reduced because of a household member's failure to comply with the requirements of that program, the household may not receive an increase in SNAs because of this decrease in income.

NOTE: SSI will not be considered a means tested program as it relates to the penalty. The gross SSI amount less the recovery amount would be shown in ACCENT on the AEFMI screen.

1. The SNAP allotment of the household shall be reduced by 10% (percent) so long as the needs-based program's reduction is in effect. If the penalty in Cash Assistance is due to a work requirement and the SNAP has the same component and the individual is mandatory, then the appropriate penalty would be applied and not the 10% penalty (See Section 1240-1-3-.45 for more information on this.).
2. If the needs-based payment case is closed due to the recipient's failure to comply, the SNAP allotment shall be reduced by 10% for a three-month period.
3. Regardless of the number of violations in other needs-based programs, only one 10% reduction is applied to the SNAP allotment at one time.

2. A grandma in a child only FF case that is non-cooperative with CS and gets her FF case closed, BUT SHE IS DISQUALIFIED IN SNAP due to an IPV. Do you sanction the kids in the SNAP 10%? The FF child-only children are the only other persons in the SNAP case other than grandma.

Answer: Based on the policy below the 10% sanction applies to the household.

"The SNAP allotment of the household shall be reduced by 10% (percent) so long as the needs-based program's reduction is in effect. "

3. I have a question about the Sanction/Penalty for failure to provide verification of Immunizations, Health Checks, and School Attendance for FF recipients. I am aware that if a sanction is entered on the "AEOIE" screen for failure to comply with the Families First work component, a 20% penalty will be deducted from the FF grant and also a 10% deduction will be deducted from the SNAP grant. My question is if an "N" is entered on the "AEIHS" screen due to no verification provided for Immunizations, Health Checks, and School Attendance (with no good cause), will a 10% penalty be reduced from the SNAP grant also? If a 10% reduction is applied to the SNAP grant as well, could you point me to the direction where it is discussed in policy discussing the 10% penalty being applied due to failure to comply with School Attendance and Immunizations/Health Checks requirements for FF. I see in SNAP policy where it discusses that a 10%

penalty would be applied for failure to comply with FF work requirement. I haven't found anything in regard to the School Attendance and Immunizations/Health Checks requirements.

Answer:

See section 20.10 of the online manual titled Assistance Payments.

When a Federal, state, or local needs-based payment (such as SSI, AFDC/FF, or SNAP) is reduced because of a household member's failure to comply with the requirements of that program, the household may not receive an increase in SNAP because of this decrease in income.

Note: SSI will not be considered a means tested program as it relates to the penalty. The gross SSI amount less the recovery amount would be shown in ACCENT on the AEFMI screen.

1. The SNAP allotment of the household shall be reduced by 10% (percent) so long as the needs-based program's reduction is in effect. If the penalty in Cash Assistance is due to a work requirement and the SNAP has the same component and the individual is mandatory, then the appropriate penalty would be applied and not the 10% penalty (Refer to Section 1240-1-3-.45 for more information on this.).
2. If the needs-based payment case is closed due to the recipient's failure to comply, the SNAP allotment shall be reduced by 10% for a three-month period.
3. Regardless of the number of violations in other needs-based programs, only one 10% reduction is applied to the SNAP allotment at one time.

4. If we have a case where the caretaker has been removed from the Families First Grant and and/or a protective payee was assigned for not meeting the requirements of the FF drug testing program. Is there a penalty applied to the SNAP case?

Answer: SNAP Policy 20.10 states: "The SNAP allotment of the household shall be reduced by 10% (percent) so long as the needs-based programs reduction is in effect." These cases will need a fiat completed to apply the 10% penalty to the SNAP case.

## REFRESHING SCREENS

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1. When should Accent Screens be refreshed?

Answer: Currently Quality Assurance is calling cases in error if screens aren't refreshed and verifications aren't updated at intake, and if there is a change.

Quality Assurance has not, to my knowledge, called cases in error if not refreshed at review, unless there is a change.

## REPLACEMENTS

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1. A customer's refrigerator went out and was out for over 24 hours. We have verified with the landlord that they have received a new one. Can we replace the April stamps, since she reported the next day and use code 129?

Answer: A replacement may be issued, and code 129 would be appropriate.

FNS has stated that "while power loss and natural disasters are the most frequent "misfortune" replacement is not limited to such incidents alone. It is the unintentional destruction of the food that is the relevant issue."

1240-1-19-.21

Only food destroyed or spoiled in a household misfortune may be replaced. This can include power outages (12 hours or more), fire, wind, flood, or other misfortune. This would not include power turned off due to non-payment. These replacements would not require State Office approval prior to issuing these benefits.

(3) Replacement of Food Destroyed in a Disaster/Household Misfortune

When food purchased with SNAP is destroyed in a disaster/household misfortune affecting a participating household, the household may be eligible for replacement of the actual value of loss, as follows:

- (a) The value replaced shall not exceed one month's SNAP allotment.
- (b) The loss must be reported within 10 calendar days of the incident.
- (c) The worker shall verify the disaster/household misfortune through:
  1. a collateral contact,
  2. a community organization such as the Fire Department or the Red Cross, or
  3. a home visit.
- (d) If the household meets the above criteria, the household shall be provided a replacement allotment within 10 calendar days of the reported loss.
- (e) Replacement of food destroyed in a disaster/household misfortune shall be made, subject to the above criteria, in cases of an individual household misfortune, such as fire or power outages of 12 hours or more, as well as in natural disasters which could affect more than one household.

Bulletin [FA-12-03](#)

Food that was purchased with SNAP benefits does not have to be food purchased with the current month's allotment. The food could have been purchased with benefits from the current or past months. We are issuing the replacement to cover the food lost, not the current month's benefits. The replacement should be for the value of the loss and must not exceed the value of the current month's allotment. The caseworker must verify that the household was affected by a disaster or household misfortune through a collateral contact, a community organization, or a contact with an agency or business in a position to know. If the county office has firsthand knowledge of the disaster or household misfortune no further verification is required.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-12-03.pdf>

2. Is a HH eligible for replacement due to the compressor going out on the refrigerator and all the food was spoiled?

Answer: Yes. FNS has stated that "while power loss and natural disasters are the most frequent "misfortune" replacement is not limited to such incidents alone. It is the unintentional destruction of the food that is the relevant issue.

3. I have a customer who states that her power was out for 9 hrs. Per policy it says the outage has to be for 12 hours or more. Is there a more recent update/clearance that allows the customer to receive a replacement?

ANSWER: No, there is no new clearance that would allow a power outage for less than 12 hours to receive a replacement.

4. For power outages how many hours must it be out before they are eligible for a replacement? I thought it was 24 hours but in the Q&A's it says 12 hours.

ANSWER:

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/memos/fs-10-05.pdf>

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/memos/fs-10-07.pdf>

The policy changed from 24 hours to 12 hours in May 2010. The decreased time period is permanent and applicable to all severe weather occurrences or other household misfortunes.

5. Customer requested replacement benefits due to a power outage of 12 hours or more. They requested \$400 but their allotment is only \$252. Their request was denied because the customer requested more than the current month's allotment. **Bulletin No. 09 [FA-12-03](#)** was used to support the decision for denial. Is this correct?

ANSWER: The bulletin that is being referenced is to ensure we don't issue more than the allotment. It does not require them to report a certain amount. This is the language in the bulletin referenced. It states the replacement...not the request. We are issuing the replacement to cover the food lost, not the current month's benefits. The replacement should be for the value of the loss and must not exceed the value of one month's allotment.

Follow-Up: If the policy doesn't require customer to report a certain amount is it correct to automatically replace current month's allotment?

ANSWER: No, they still need to tell us the amount of food lost; there just isn't a restriction on the amount they can request. There is only a restriction on the amount we can replace. We have to know how much food was lost so we know how much of a replacement they are eligible for.

6. The customer states she was told if she had a police report that her SNAP benefits could be replaced. She cited the policy. I know we used to do that when it was coupons, but we've never been able to do it since the benefits are placed on an EBT card. Has something changed?

ANSWER: We are only responsible for benefits that are used on the lost or stolen card **AFTER** the card is reported to us as lost or stolen. If the customer called and reported her card stolen on 9/18 and we did not order her a new card (cancel her stolen card) and benefits were used off her stolen card after the 18th, then and only then are we are responsible for replacing them.

7. If a customer request a SNAP replacement due to a power outage a few days before their regular SNAP issuance ( ex. Request was made 05/03/16 and the regular issuance date is 05/07/16) for the full 194.00 monthly allotment should we grant that request?

Answer: We are replacing the amount of food purchased with SNAP benefits that is spoiled (not to surpass their monthly allotment amount) So, if the customer is claiming that she lost \$194 worth of food, that was purchased with her SNAP benefits, due to a HH misfortune we can replace that amount. It doesn't matter at what point in the month this takes place.

8. We received a request for a replacement due to a HH misfortune. However the misfortune happened almost 3 weeks ago. I don't think we honor this request, correct?

Answer: This is in the manual:

AA. Replacement of Food Destroyed in a Household Misfortune or Disaster

C. Replacement of Food Destroyed in a Household Misfortune

When food purchased with SNAP is destroyed in a disaster affecting a participating household, the household may be eligible for replacement of the actual value of loss, as follows:

1. The value replaced shall not exceed one month's SNAP allotment.
2. The loss must be reported within 10 calendar days of the incident.
3. The worker shall verify the disaster/household misfortune through:
  - a. a collateral contact,
  - b. a community organization such as the Fire Department or the Red Cross, or



c. a home visit.

9. Customer has reported that she was burglarized, and they took her food. Would this qualify as an “or other misfortune” and allow the customer to have a replacement?

Answer: Yes, this would be other HH misfortune and potentially allow her the replacement in benefits.

Follow-up: What verification would be required to verify this misfortune and what would be the time period for reporting this misfortune? Would collateral contacts be used as verification?

Answer: Time frame is the same as any HH misfortune see number 2 below. And verification could be Police report or any of the other options listed below under number 3.

This is in the manual:

AA. Replacement of Food Destroyed in a Household Misfortune or Disaster

C. Replacement of Food Destroyed in a Household Misfortune

When food purchased with SNAP is destroyed in a disaster affecting a participating household, the household may be eligible for replacement of the actual value of loss, as follows:

1. The value replaced shall not exceed one month’s SNAP allotment.
2. The loss must be reported within 10 calendar days of the incident.
3. The worker shall verify the disaster/household misfortune through:
  - a) a collateral contact,
  - b) a community organization such as the Fire Department or the Red Cross, or
  - c) a home visit

10. In Bulletin [FA-12-03](#) it states that “The SNAP recipient must sign a request for replacement unless the county has firsthand knowledge of the disaster or household misfortune, then no signed statement by the recipient is necessary. The signed affidavit must be kept for a three-year period.” Is that correct? I was just told that we need an affidavit, regardless if we have firsthand knowledge or not.

Answer: We received clarification from USDA-FNS. The bulletin from 2012 is incorrect. If you have first-hand knowledge of the disaster you won’t need further VERIFICATION, but the affidavit is ALWAYS needed for replacement of food lost in a household misfortune or Disaster.

11. During the most recent power outage, we had several customers who lost power over multiple days. For example, 05/27/17 to 05/30/17: I know policy states they must report within 10 days of the incident. Does the 10-day count start on the first day of the incident or do they have until the 10th day of the time the incident ended?

Answer: Federal regulations states the time starts the date the food purchased with Program benefits is destroyed. So it depends on when the customer states their food was destroyed.

274.6 (a) (3) Replacement restrictions. (i) Replacement issuances shall be provided only if a household timely reports a loss orally or in writing. The report will be considered timely if it is made to the State agency within 10 days of the date food purchased with Program benefits is destroyed in a household misfortune. (ii) No limit on the number of replacements shall be placed on the replacement of food purchased with Program benefits which was destroyed in a household misfortune.

12. Customer reported loss of benefits on June 28, 2019 with an address that was different than the address the Department has on file. If a customer suffers a food loss, does the reported address have to be the address on file in order to receive the replacement benefits?

Answer: No, the reported address on the Affidavit does not have to be the address on file. The HH misfortune and the actual food loss needs to be verified

13. Can we replace P-EBT benefits when food purchased with P-EBT is destroyed in a household misfortune?  
Answer: Per FNS: Replacement of P-EBT benefits may not be issued due to household misfortune. SNAP requirements cannot be used to enforce P-EBT, as P-EBT and SNAP are distinct benefits.

## RESIDENCY

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1. One of our counties has a situation where an individual from out of state has been living with and caring for her mother in TN for some time. She has a home in another state. She receives Social Security and Medicaid in the other state but hasn't received SNAP there since last September. She is applying for SNAP in TN and states she plans to stay with her mother indefinitely while her mother needs her to care for her, but then plans to return to her home in another state. 1<sup>st</sup>—is she potentially eligible while living in TN with/caring for her mother and 2<sup>nd</sup> can she claim shelter cost she is paying for her home out of state. Thanks for your time and clarification.

RESIDENCE 1240-1-3-.02

### (3) Definition of Resident

A resident is an individual who **lives** in the state of Tennessee and in the county where they receive benefits. A permanent dwelling or fixed mailing address is not required. In addition, **residence does not mean intent to reside permanently** in the county and a durational requirement cannot be imposed on the household. However, persons in the county solely for vacations are not considered residents of that county.

### 1240-1-4-.17

(IV) The above shelter ( I - III ) costs for the home if not actually occupied by the household because of employment away from home, **illness**, or abandonment of the home due to natural disaster or casualty loss. For the costs of a vacated home to be included in shelter costs, the household must intend to return to the home; the current occupants of the home, if any, cannot be claiming the shelter costs during the absence of the household; and the home must not be leased or rented in the household's absence. Households claiming utility costs for unoccupied homes must verify the actual expenses and the standard utility allowance cannot be substituted.

Answer: You asked if an individual temporarily in the State to care for a relative can apply for SNAP in TN; and, if the shelter costs in the out of state residence can be considered. We consulted here in Atlanta.

The manual citations in your State handbook are pretty much straight out of the regulations. Clearly, there is no durational residence requirement, and the individual can apply in TN.

The treatment of the shelter costs in the TN handbook follows 273.9(d)(6)(ii)(D):

(D) The shelter costs for the home if temporarily not occupied by the household because of employment or training away from home, illness, or abandonment caused by a natural disaster or casualty loss. For costs of a home vacated by the household to be included in the household's shelter costs, the household must intend to return to the home; the current occupants of the home, if any, must not be claiming the shelter costs for SNAP purposes; and the home must not be leased or rented during the absence of the household.

We are not sure we have addressed this question before. We interpret (D) above to also apply for temporary residence to care for a family member. The intent is to allow consideration when the household intends to return, no other household is claiming that expense, or the house is not rented out. We particularly consider that some shelter costs, such as a mortgage, are a long-range household commitment that leads to ownership of the shelter.

2. Are their guidelines as to what constitutes "homeless"?

I ask because sometimes people who live with a family member call themselves homeless, but really they live with the family member all the time until they can get a place of their own. So, to me, that is not "homeless." Can you clarify?

ANSWER: FNS defines Homeless as

"Homeless individual" means-

(1) an individual who lacks a fixed and regular nighttime residence; or

(2) an individual who has a primary nighttime residence that is-

(A) a supervised publicly or privately operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations;

(B) an institution that provides a temporary residence for individuals intended to be institutionalized;

(C) a temporary accommodation for not more than 90 days in the residence of another individual; or

(D) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings

3. Customer is a resident in the Freewill Shelter. They provide 1 meal per day, Monday –They are non-profit. In the past, we were told that Freewill Shelter customers are not eligible for SNAP assistance due to them providing meals, but we want to make sure that is still correct.

Answer: In order for the meals to be an issue it has to be a majority of meals provided. Over 50% of their meals would have to be provided as a part of the institution's normal services for that to cause them to be ineligible. 1 meal a day is not a majority.

4. Can you get SNAP if you are in a Nursing home? No, not if you are a resident of the Nursing home institution that is providing the majority of your meals as a regular part of their services.

Follow up question: Can you get SNAP if you are in assisted living?

Answer: It depends on several factors. You MAY be able to get SNAP if you are in assisted living if the majority of your meals aren't provided as a part of normal service.

Chapter 33:

## 2. Special Uses

Although benefits were originally intended for use by eligible households to purchase food for home consumption, certain households have been authorized to use their benefits to obtain prepared meals or to facilitate their obtaining food. These authorized special uses are:

### a. Communal Dining

Eligible household members, 60 years of age or over, or SSI recipients, homeless, and their spouses, may use benefits issued to them to purchase meals prepared especially for them at communal dining facilities authorized by FNS for that purpose.

Communal dining facilities include senior citizen centers, apartment buildings occupied primarily by elderly people or SSI households, public or private non-profit establishments (eating or otherwise) that feed elderly persons or SSI recipients, and federally subsidized housing for the elderly at which meals are prepared for and served to the residents. It shall also include private establishment that contract with an appropriate State or local agency to offer meals at concessional prices to elderly persons, homeless, or SSI recipients.

#### d. Group Living Arrangement

A public or private non-profit residential setting that serves no more than sixteen (16) residents and that is certified by the Department of Mental Health and Substance Abuse Services. To be eligible for SNAP benefits, a resident of such a group living arrangement must be blind or disabled and receiving benefit under Title II or Title XVI of the Social Security Act.

They are **not** eligible if they are considered residents of an institution. An individual is considered a resident of an institution when the institution provides the majority (**over 50%**) of his or her meals as a part of the institution's normal services, and the institution is not authorized to accept SNAP benefits.

## RESOURCES

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### 1. How would Bitcoins be viewed for SNAP purposes?

Here is some information I found regarding Bitcoins from Wikipedia: Bitcoin is a [peer-to-peer payment system](#) and money-like informational [commodity](#). The system was introduced as [open-source software](#) in 2009. The money-like informational [commodity](#) is called a [crypto currency](#) because [cryptography](#) is used to control its creation and transfer.<sup>[5]</sup> Because the Bitcoin system is not controlled by a single repository, like a [central bank](#), the [US Treasury](#) refers to bitcoin as a decentralized virtual currency. Conventionally, the capitalized word "Bitcoin" refers to the [technology](#) and [network](#), whereas lowercase "bitcoin" refers to the currency itself. In 2014 the US IRS ruled that the bitcoin should be treated as property rather than currency.

Answer: From FNS Regional Office:

Bitcoins are property rather than currency according to the IRS. We do not always follow the IRS in classifying resources, but the type of resource is not key.

Under 273.8, both property (non-liquid resources) and liquid resources are countable toward SNAP resource limits unless specifically excluded. Our FNS national office has not issued any guidance on Bitcoin but applying our general guidance-- Bitcoins do seem to be a resource with a value and they have not been specifically excluded. The value would be the market value less cost of disposing of them.

2. Homestead property Customer owns a home in one county. Customer lives with daughter in another county. Customer pays mortgage and utilities for the home she is NOT living in. Customer refuses to sell the home. Customer's daughter states that customer is not able to live alone and that she does not want to sell the home. Also, customer has no intentions on returning to that home. Customer failed to report this property at initial interview and subsequent renewal interview.

Question: Do we count this home as a countable resource since customer does not live there, has not lived there for over 2 years, and has no intention of selling the home?

Answer: There is no stated exemption.

Exempt Resources

The home, outbuildings, and surrounding property (regardless of location) will remain exempt when temporarily unoccupied for reasons of employment, training for future employment, illness or uninhabitably caused by casualty or natural disaster **if the household intends to return home.**

3. Do we need to verify debit cards, check cards (such as Direct Express from Social Security, a child support debit card or an employer that provided check card) and cash apps such as, but not limited to: Venmo, Paypal or Apple Pay? If we are required to verify, can you provide guidance for our workers on how to verify the balance of these accounts?

Answer: All countable assets need to be verified. Assets include both income and resources. Income is the monthly cash flow considered available. Resources include assets, such as cash in bank accounts, stocks, bonds, vehicles, and real property. An asset cannot be counted as both income and a resource in the same month. An asset counted as income in one month but remains left over the following month becomes a resource.

Available funds on a direct express card or check card shall be considered income the month received and verified as income. If the household retains funds the month after receipt, the available funds need to be verified as a countable resource.

It is up to staff to discuss ways to verify all assets. Such as a screen shot of available funds, an ATM receipt, or an account statement. Example for Direct Express cards is a website that confirms the customer's balance that the customer can provide a printout, or a screen shot to verify account balance. These receipts and screens shots are not required to having identifying features, if a customer provides an ATM receipt showing their available balance, unless it is questionable, it can be used as verification.

These resource determinations and verification procedures also apply to all other prepaid cards and any cash apps which are not linked to a bank account.

4. Do we consider the property under a land contract inaccessible to the "seller"?

Answer: Federal regulations state to exempt from resources Installment contracts for the sale of land or buildings if the contract or agreement is producing income consistent with its fair market value. The exclusion shall also apply to the value of property sold under the installment contract or held as security in exchange for a purchase price consistent with the fair market value of that property.

Ref: 273.8(e)6

5. SNAP was closed due to a \$14K joint savings account in the parent's and their 7-year-old daughter's name. It's currently a normal savings account. I advised her that it can be set up as a trust account, inaccessible until the daughter turns say 18. She says the grandparents contributed the majority of this money and wants to know if the money can be transferred to them and let them set up and control the account?

Answer: **Please review [SNAP Resource Policy: 24.12](#) and [Disqualifying a Household from SNAP Due to Improper Resource Transfer](#)**

6. I have looked thru the manual and all the training handouts and they all say all family vehicles used for transportation are exempt. I have it in the back of my mind it is one car per person who can drive. The situation we have is we have 1 man who has 3 cars, and they want to exempt all the cars. They are all licensed, they are a 2007 Honda, 2009 Chevy and a 2011 Honda, he says he drives the one he feels like that day. Can we exempt all of them? Oh, and they are all paid for.

Answer: All licensed and unlicensed vehicles used for family transportation are exempt as a resource in the SNAP Program. The caseworker must continue to record all vehicles for the household for informational purposes in SNAP and eligibility determination for other Family Assistance programs. Exempt vehicles will be coded as FW on the AERVH screen in ACCENT. Vehicles used for recreational purposes rather than everyday transportation, such as RVs, snowmobiles, boats, trailers, ATVs, and personal watercraft must be considered as a resource. Additional information can be found in the supporting document [Treatment of Vehicles](#)

7. Can you please clear something up for us about land? We have a two person HH that they are co-owners of land that is across the road from their homestead. Is this a resource or is it exempt? From the way the policy states it looks like it could be exempt.

The home, its outbuildings, and surrounding property which is not separated from the home by intervening property owned by others is exempt. Public rights of way, such as roads which run through the surrounding property and separate it from the home, will not affect the exemption of the property. Outbuildings are structures such as barns, garages, sheds, etc., that are considered a part of the household's residence. Other structures on the property, such as stores, houses, and trailers, that are clearly not a part of the residence are resources unless exempt for some other reason.

Answer: The policy is correct. The fact that the property is across the road doesn't affect its potential exemption status.

Follow Up: What constitutes a home and lot when two houses are located on contiguous property? For example, a household may own two townhouses side-by-side or have two houses on contiguous farmland.

Answer: Only one home is excluded, but all surrounding **property** which is not separated from the home by intervening property owned by others is excluded.

Follow up: Well I was just thinking that if it is not homestead that we use it as a resource, and it counts as it is land by itself. So, if someone has 20 acres that is across the road from their home, it can be exempt? What if the land is not near the home?

Answer: e) Exclusions from resources. In determining the resources of a household, only the following shall be excluded:

(1) The home and surrounding property which is not separated from the home by intervening property owned by others...

The home and surrounding property that is not separated from the home by intervening property is exempt. The number of acres does not matter

8. Is there a time frame to exclude an uninhabitable shelter as a resource? The customer has not lived there for over 2 years but still claims they plan to return.

Answer: FNS stated "As long as the household expresses intent to return, an unqualified exclusion is granted"

9. Are Certificates of Deposit an excluded resource?

Answer: No, they are not exempt. Please see the supporting document [SNAP Excluded Resources](#)

10. Do resources have to be verified?

Answer: Yes, resources must be verified at intake and at renewals.

11. We have a lady who has called us as she is anticipating a settlement due to a lawsuit. She wants to keep her stamps by setting up a Trust fund with the settlement. At present she is getting RSDI and SSI. Manual says we can exempt these trust funds, but they have to be inaccessible. We just want to make sure if we tell her she can do this that she knows that she has to set it up as inaccessible and that the fact that she is receiving it as a lump sum while she is still getting stamps does not also affect what she does with the money.

ANSWER: Resources of an individual receiving SSI are exempt for SNAP purposes. So, however this resource is received has no burden on her SNAP eligibility at this time.

If not receiving SSI would need to look at Transfer of resources policy:

Households which have transferred resources knowingly for the purpose of qualifying or attempting to qualify for SNAP benefits are disqualified from participation in the program for up to one year from the date of discovery of the transfer. This disqualification period shall be applied if the resources are transferred knowingly in the three-month period prior to application or if they are transferred knowingly after the household is determined eligible for benefits. We need to consider things not resulting in disqualification that are listed. She may have another reason not addressed below. Just remember, we do not need to be providing advice to our customers on how to treat their resources to help them obtain or keep eligibility.

12. Are income tax returns exempt from SNAP?

ANSWER: They are exempt for 12 months. See memo

[Exclusion of Federal Tax Refunds](#)

13. If a person has set up a fund-raising account (such as “Go Fund Me”) for a sick spouse, how is that account viewed?

ANSWER: From FNS: Normal guidance on income and resources would apply to these accounts. For example, if the customer has unlimited access to the funds, money received in the month would be a contribution (income). Any funds left the next month would be a resource. Even if the money is intended for something specific, medical treatment, the unlimited access would make us consider it available. Since household income is meant to cover living expenses like shelter, medical care, food, clothing, etc., we would consider these donations just like any other type of income for the household.

14. Is money held in Christmas Club considered a resource?

Answer: Yes, the money in the Christmas Club is considered a resource.

15. For SNAP, do we count Money Market Accounts?

Answer: They are similar to Savings accounts and are considered a resource.

16. Customer has funds in an Achieving a Better Life Experience (ABLE) account. What is this and how would we treat these funds?

Answer: ABLE accounts are tax-favored savings accounts established to provide secure funding for disability related expenses on behalf of designated beneficiaries deemed disabled before age 26. They are excluded as income and resources.

17. Is a Mutual fund considered like a 401k, retirement account, IRA, or stocks/bonds? We are trying to determine how to treat a mutual fund in the SNAP case. The manual nor any clearances we can find address mutual funds specifically.

Answer: Mutual Funds, more times than not, are a resource. If it is set up as inaccessible to the customer, then it could be excluded as a resource.

18. We have a case where the customer is at a safe house and is saying that she shares her bank account with her husband. She is turning in the account to verify the income that he is giving her. However, the account shows deposits of additional income. I know that we got called in error as we denied a case for being over

resources because we were counting the income and resource. The situation is that the customer is on this account and we are being asked to only count \$200.00. I see where the money is being deposited and withdrew but would this be counted as income, resource, or only the \$200.00?

Answer: His Navy check seems to be going into their joint account but then it looks like he zeroed it out and put \$200.00 back in for her. If she is on the account, the balance could be considered available to her if she has access that is **not** dependent upon him as far as a resource total. If the balance isn't listed on what we have been provided, further verification may be requested. If she is in a shelter, his and her income would be considered separately as she would become a separate household from him, if he is giving her \$200.00 that would count as her income.

A case denied over resource will be counted in error if money that was counted as income during that month was included in the resource total.

19. When the customer has a vehicle and is a SNAP customer only, does the vehicle still need to be listed in the CLRC?

Answer: Yes, although the vehicle is an excludible resource, for informational purposes and for other Family Assistance Programs, the vehicle should be documented.

20. If a customer and her spouse are separated, but the customer and spouse share a joint bank account that the spouse's income is deposited into for the customer to pay her bills because the customer has no income, would this count as a resource to the customer?

Answer: If the customer has access to the bank account and access to the money within the bank account, we should count this account as a resource to the customer because the jointly owned resource is accessible. Please refer to supporting document [Jointly Owned Resources](#).

21. Should caseworkers be asking about resources for Categorically Eligible households?

Answer: It is not necessary to ask about resources if the household is Categorically Eligible. Once a household is determined categorically eligible, we do not need to pend a case for requesting verification because they federally do not have to meet the resource limits or definitions.

22. How would money from a 401K that has been cashed out early be treated?

Answer: Money in a 401K is excluded as a resource for SNAP while it is in the 401k. Once it is withdrawn, it is considered income during month of receipt; however, if it is received as a non-recurring lump sum rather than monthly income, then the lump sum policy would apply, and it would not count as income but would count as a resource. If the cash value of an excluded type of plan is rolled over into a countable resource, the cash value loses its exclusion and becomes an included resource.

23. Does the resources of an ineligible alien count as an available resource to the household?

Answer: Yes, count the entire amount of the excluded individual's resources as available to the remaining household members.

#### L. Treatment of Excluded Household Members in Determining Financial Eligibility

##### 1. Ineligible Alien, Questionable Citizenship and Enumeration Disqualification

a. Resources - Count the entire amount of the excluded individual's resources as available to the remaining household members.



24. If a customer transfers resources with a quit claim deed, does this automatically make the transfer a proper transfer of resources?

Answer: No, if the household transferred resources knowingly for the purpose of qualifying or attempting to qualify for SNAP, the household is disqualified from participation in the program. Although a quit claim deed may have been provided, it does not automatically make the transfer proper.

25. Are antique/classic cars countable resources, or do we consider them household transportation and exempt them?

Answer: Vehicles used as household transportation are exempt for SNAP. Vehicles used for recreational purposes, rather than everyday transportation are countable. It needs to be determined if the vehicle is used for family/everyday transportation or recreational purposes.

26. How is 401k treated when the 401K is accessible by the customer at age 60, but the customer does not and has not withdrew any of the money because they are waiting until their retirement?

Answer: The 401K is exempt until the customer actually begins accessing this account. 401K's are excluded as a resource for SNAP, however, if the cash value of an excluded type of plan is rolled over into a countable resource, the cash value loses its exclusion and becomes an included resource.

## RESTORATIONS

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1. When are restorations issued?

Answer: Restoration of Lost Benefits 1240-1-20-.09 Entitlements.

The county office shall restore to the household benefits which were lost whenever the loss was caused by an administrative error; or whenever an administrative disqualification decision for intentional program violation is subsequently reversed; or whenever federal regulations specifically state that a household is entitled to restoration of lost benefits. Benefits shall be restored for not more than twelve months prior to whichever of the following occurred first:

- (a) The date the State Agency receives a request for restoration from a household; or
- (b) The date the State Agency is notified or otherwise discovers that a loss to a household has occurred.

2. How are restorations issued?

Answer: BIFS

THE BIFS HELP SCREEN STATES: Request correction of SNAP under issuance, replacement, restoration, or retroactive benefits and benefits never received. One line must be used for each month. If we fail to act or act incorrectly an Auxiliary or restoration may be needed.

Follow-up: We use BIFS for auxiliaries too, right?

ANSWER: Yes. Unless the customer has a recoupment, then you would use BISF.

3. If we find an error less than \$10 do we issue the restoration?

Answer: Yes. The 10.00 minimum is in regard to an initial proration under 10.00.

4. We have a customer who has provided a letter from the landlord that says her power was off for over 12 hours due to electrical issues. She says she cannot get anything from the electric company to say it was off as this is a duplex and the other duplex's power was not off. Can we issue the restoration based on this letter from a landlord?

Answer: Yes you can use the letter from the landlord as verification.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/fa-12-03.pdf>

The caseworker must verify that the household was affected by a disaster or household misfortune through a collateral contact, a community organization, or a contact with an agency or business in a position to know. If the county office has firsthand knowledge of the disaster or household misfortune no further verification is required.

5. There was an error that we discovered. The customer is due benefits back to 2014. Are we supposed to issue these? What if the error is due to application/certification processing do we issue those benefits back to the customer?

Answer: This is in the SNAP Manual: **Errors Discovered by the County Office**

If the county office determines that a loss of benefits has occurred, and the household is entitled to restoration of those benefits, the county office shall automatically take action to restore any benefits that were lost. No action by the household is necessary. However, benefits shall **not** be restored:

- a. If the benefits were lost more than 12 months prior to the month the loss was discovered by the county office in the normal course of business; or
- b. Benefits were lost more than 12 months prior to the month the county office was notified in writing or orally of a possible loss to a specific household.

**Follow-up:** What if the error is due to application/certification processing do we issue those benefits back to the customer?

Answer: **No**, FNS provided a policy memo clarifying “that in cases of severely delayed application processing or recertification due to State agency fault (i.e., certifications delayed for more than 1 year), the restoration of benefits is limited to a period of not more than 12 months prior to the date on which the State agency is notified, or otherwise discovers that a loss to a household has occurred, in accordance with the general restoration of benefits regulations at 273 .17.” Additionally, the memo goes on to state that by setting this time frame it still holds the state accountable but sets a time limitation for compensating households.

## **SIMPLIFIED REPORTING**

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1. We have “Simplified Reporting” household of one person. Her husband moves in with her during her second month of her certification period. His income places the household over gross for the one-person household for which the AG was approved. The wife comes in during her renewal and asks to add her husband to the case. Even though the SR requirements do not require the reporting of members moving in or out, should she have reported him as a change due to his income placing the assistance unit over gross for SNAP benefits?

Answer: The requirement would have been to report if the household income went over the income limit for the household size at time of most recent review.

Follow up: Would a claim be filed for the over-issuance of benefits at renewal as his income would have placed his wife over gross for a one-person household and would have decreased or eliminated the benefits for a 2-person household?

Answer: A claim may be needed if she failed to report going over income as required. (Dependent on over issuance amount)

See [Bulletin 27 FA-11-16](#). "The household is required to report if the monthly gross income exceeds the SNAP gross income standard for the household size. There are no other reporting requirements."

2. Customer is in SR cycle. DHS receives information that would cause questions regarding continued eligibility of benefits. SR/renewal is due in September 2019.

Question: Can we pull the review forward and complete a review on the case now based on this new information?

Answer: There is nothing that indicates that it would be ok to pull a review forward as you have indicated.

#### Special Circumstances

If an active SNAP SR household applies for another program (like FF) during the certification period, we can recertify (if all information necessary is provided) the SNAP case at that time and will continue to meet SR requirements. The worker would give the household a twelve-month certification period at renewal. The household will continue to be SR and subject to those requirements. The case is actively certified when the household applies for the other program and we cannot require the household to be recertified at that time if the household chooses not to do so, nor can we penalize the household by closing the case.

3. Is there a penalty period for not returning a SR form?

Answer: There is no "penalty period".

Customers are not penalized for not returning a SR form. A customer can reapply for SNAP and if the customer reapplies in month 7 benefits are prorated based on application date

4. I am looking for some clarification for a SR procedure involving an elderly/disabled individual. Per policy (bulletin No. 27) the applicant is still considered SR and will be certified for 12 months, but they are not required to submit an interim report form. The case was approved with a 5-month SR date on IQCP. The SR form was sent but not returned. The case closed at the end of February. 1) Since they were not required to return the SR form, should the case have been closed? 2) Should the SR date have been removed using AEFSA at the time of approval so that they would not be mailed the SR form?

Answer: If the customer was not required to complete an SR form then the closure would have been in error. There are multiple AEIEI screens still active for the individual. Even though the income has been "ended" for budgeting purposes the system still sees the job itself as "active". To prevent accent from incorrectly thinking the customer needs to complete an SR form an **END date** needs to be placed on the job screens at the top of the page.

5. SNAP case includes mother, father, and teenager. SR requirements apply.

Child turns 18 and we receive the alert that he is turning 18. Do we wait until SR interim or renewal (whichever comes first) to explore whether then 18-year-old is working because of SR? Or is the age 18 alert considered now known DHS information and we need to send a CNCC to request contact to discuss any income and act if not provided?

Answer: If the household hasn't reported income we will not explore income until recertification.

6. When processing SR forms if a case has a recoupment being taken out, will accent correctly budget the recoupment even though AEFSA is showing the full allotment amount?

Answer: Accent will correctly recoup the benefits.

7. If an SR date should have been added using AEFSR but wasn't (for example, when customer has reapplied in the 7th month because the SR form was not turned in during the 6th month and the worker had to manually set up the correct new 12-month cert and should have manually added the interim report form date on AEFSR but forgot) and the new 6th month is approaching, it would be correct to go ahead and update AEFSR so it will mail out, right?

Answer: Yes, if the system will let you update AEFSR it is correct to do so and let the system mail the form out.

8. Customer turned in their SR form in the 6th month, but it was after cut-off. The changes on the form were worked but benefits weren't released on AEFSR. A supplement for month 7 was issued instead (an error, of course). In the 8th month, customer still won't get any SNAP benefits because they were never released on AEFSR. If they get released, there will be a double issuance for the 7th month (since the supplement was issued in error). What would be the best procedure in this scenario?

Answer: Run AEORE and reset certification. This would allow continuance of month 8-12 without a duplicate issuance since the 7th was issued via auxiliary in error, just need good strong CLRC documentation.

9. If someone reports a decrease in income on a SR case should we be asking them how they are paying their shelter cost?

Answer: you would work the income change reported and not ask about shelter costs when a change in income is reported.

10. We have a case with a 70-year-old working, but the earnings are exempt as they fall under title v. The worker has the job on AEIEI, so ACCENT is assigning them an interim SR date. I know that if elderly/disabled work they should get the interim form, just wanted to make sure that they should still get the form if the earnings fall under this exemption?

Answer: According to FNS:

The HH must have "countable earned income". Since the only income this HH has is excluded, there should be no S/R form requirement.

11. We have a case that contains an elderly disabled customer with no earned income and her 12-year-old grandson. Is this case considered SR? Are they required to complete an SR form?

Answer: Yes they are SR in terms of what must be reported. However, no SR form is required. Federal Regulations state: Households in which all adults are elderly or disabled with no earned income must not be required to submit periodic reports

12. When working a SR form and the reported change placed the HH over income and the case was closed I wasn't able to go back to AEFSR and update the screen. Is this an error?

Answer: This is not an error. Since the change caused the case to go over income it won't allow the screen to be updated. **Bulletin No. 27 [FA-11-16](#) June 30, 2011 page 3 and 4** actually states when the form and verifications are received at the same time to work the change, authorize on AEWAA and then update AEFSR. We realized early on that if the change causes them to close it will not allow update. CLRC is documented explaining the form was received. In these situations it doesn't affect the outcome of the case, eligibility, benefits or notice to customer in any way

13. We have some confusion when it comes to who is SR and who isn't. The memo states that the only household's certified less than 4 months or whose income is only self-employment are not SR. What about elderly and disabled households?

Answer: The act on all change memo is correct. There are 3 types of households when it comes to S/R policy.

1- Non-SR.

A) Households certified less than 4 months

B) Household's whose income is from self-employment only.

2- SR but no SR form.

A) Household's that are certified for 4-6 months

B) Households in which all ADULTS are elderly or disabled and they have no earned income.

3- SR and have an SR form requirement.

—everyone else.

14. When an SR form is received by mail in the month following when it was due is it the 3rd BUSINESS day, that we use to determine if we consider it timely or is it the 3rd calendar day of the month? (For example we received an SR form on 3/4/15 which was due by 2/28/15 which is within 3 business days, but if you count calendar days a new application would be required).

Answer: Policy is SR forms received by mail with no post mark after the last business day of the month that are considered timely if received by the 3rd business day. Items received in person/fax must be by the last business day. Items with a post mark must be marked by the last business day.

<https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/memos/fs-12-01.pdf>

15. Are customers allowed 10 days when they fail to provide verification of reported change on an SR form?

Answer: SR items are due by the 10th of the month; benefits are suspended if they aren't received by cut off. We will release if everything is received by last day of the month. If the case was suspended on cut off of the month the form/verifications were due, the customer was notified via automated accent notice and the case will continue to close if verifications/completed form aren't received by last day of month.

16. We received an unsigned SR form on the last day of the month. Do we send them a notice and allow them 10 days to complete?

Answer: No, the form is deemed incomplete, and the auto-closure will stand. Just make sure that CLRC was documented.

17. We have been told in the past that if a case is closed for not returning an SR form and they re-apply in the 7<sup>th</sup> month that we are to get a completed SR form when they re-apply for appeals purposes. Is this correct?

Answer: No, this is not correct. We should not be requiring a signed S/R form for customers re-applying in the 7th month. Appeals will let the EC know if they have a specific case that we need to act on in a certain way based on an appeal order.

18. If we run into cases where the HH is a disabled SS recipient and a child, and there was an SR date set and an SR interim form sent to them that they failed to return are we correct to let the case close?

Answer: They should not have their case closed for not returning a form that they were not required to complete.

19. HH had an SR form that is due 4/10. An application was filed in March (3/30/15). Since the application was filed prior to the SR being due (4/10/15) and the SNAP being suspended (4/17/15) effective 4/30/15; should the Appellant receive SNAP benefits for 5/2015? ACCENT is not starting benefits until June.

Answer: We owe her benefits based on the new application filed 3/30.

20. HH is one adult who has filed for disability but has not been approved. She has HCBS in one case and SNAP in the other case. Since she is not elderly or SSA, she is SR interim. However, no SR date populates and AEFSA is not an option.

I am assuming it is because of the AEIDP for the HCBS case. What should we do to get the SR date for the SNAP for this case?

Answer: The work around for these cases: Complete the case and approve benefits. Go to AEIDP and change the "D" from Limiting Physical/Mental Factor: to an "I". Remove the "P" from Disb/Incap Decision. Hit enter.

Go to AEFSA and complete the screen with the correct SR date. Hit enter. Go back to AEIDP and change the "I" back to a "D" and Place the "P" back. Hit Enter. Check IQCP and document CLRC.

21. We received a SR form with a reported change. We sent a notice asking for the required verifications. Do we close after 10 days?

Answer: Typically, we don't need to close cases during the SR month. We should let ACCENT auto close. If case was closed and customer has provided everything by the end of the month the case will need to be re-opened. Run AEORE, update case with changed information, place today's date on AEFPY, and re-set the correct re-app date on AEWAA and document everything in CLRC.

22. We were told to create an AEISE screen as a work around to keep ACCENT from setting an SR date for Households that all "adult" members are elderly/disabled. However, we created the AEISE screen, and it still would not let us go to AEFSA and we are not sure why.

Answer: In reviewing the case; the case still has 2 active AEIEI segments. Even though they aren't counting income in the monthly budget, they need to place an end date in the top right-hand corner on AEIEI for ACCENT to not treat this case like it should be SR. You must make sure that all jobs that have ended are ended properly by placing the end date in the upper right-hand corner.

23. A customer did not return her SR form and her benefits closed as of 8/31/15. The customer reapplied on 9/30/15 and was prescreened as expedite, but application was not processed as expedite because the SR form was not returned. Is this correct? Are they penalized for not returning their S/R form?

Answer: They are not penalized for not returning their SR form. A case could potentially be expedited even if the customer did not return the SR form the month prior.

24. We have heard that the EAs would not be able to key the 'no change' SRs after cut-off, because the driver will have to be run. What month will this be effective?

Answer: Immediately

25. If someone is receiving SSI but also working a part time job, ACCENT is giving them a 'SR' date. Should I leave them coded 'SR?' I was thinking if you receive disability you are not 'SR.'

Answer from the manual:

CHAPTER 41: Continuing Responsibilities

I. Households Subject to Simplified Reporting

Simplified reporting households, other than those where all adult members are elderly and/or disabled individuals **with no earned income**, that are certified longer than 6 months are required to complete a simplified reporting form in order to receive benefits beyond their 6th month.

26. Household contains an elderly/disabled member and is over the GIS at time of application. However, they pass the net and are approved for SNAP. Since they are already over the GIS at the time of approval, do they still have to report a change in income that places them over the GIS?

Answer: Reporting requirements for SR households are:

1. They must report **when** they go over the GIS for their HH size that existed at the time of its most recent certification or recertification and
2. ABAWDs shall report whenever their work hours fall below 20 hours per week, averaged monthly.

Because they are already over the GIS at the time they apply, there is no need for them to report this again.

27. We have a house that had regular earned income and self-employment income at the time of certification and was placed in SR. However, mid cert they lost their regular income job and now only have self-employment. Do we keep them "SR"?

Answer: this is in the SNAP manual Chapter 31

If a household no longer qualifies as a SR case during the certification period, the household will retain the SR status through the certification period.

Follow-up: What if we have someone that is SR and has to complete the SR form at the time of certification but Mid cert they are approved for disability and they no longer have the requirement to complete the form? Do we still require them to complete it?

Answer: No, they are no longer required to complete the form. SR date should be removed using AEFSR.

28. An SR form comes in on Cut-off. It has changes on it and the verifications are included. Can we still update AEFSR and pend the screen and just complete it later? Some staff thought if they keyed AEFSR that the SR had been received and was pending they had till the end of the month to complete the case and no notice would go out till they completed.

Answer: If you have the form and the verification you shouldn't pend AEFSR. Pending it will still auto-suspend due to ACCENT thinking that something is missing. All SR forms/verifications received on or before cut-off need to have the AEFSR screen completed by COB on Cut-off.

29. If a customer provides the SR form in their 6th month with reported changes but does not provided their verifications until the 7th month, should we do anything in the case?

Answer: [Memorandum FA-11-18 December 8, 2011](#)

Verifications received after the last day of the 6th month

There will be circumstances in which a 6-month reporting form (with changes reported) is received before the end of the 6th month, but the verifications required to make the change are not received until after that month has ended. In these circumstances, the change cannot be completed, and the household must reapply. In this situation, the caseworker is under no obligation to notify the customer that the change cannot be completed.

30. A customer calls and reports they have moved out of state in their SR month, should we close the SNAP benefits with reason code 457 due to moving out of state or should we let the case close for failing to return a SR form?

**For example:** Customer's SR form is due to be returned 03/10/17 and no SR form is received. The customer calls on 03/21/17 and reports they have moved out of state.

Answer: The case could be denied for the customer reporting that they moved out of state based on their statement and due to the "Act on All Changes" procedure. The case could also auto close for Simplified Reporting purposes, so both ways are correct.

31. Can SNAP benefits be suspended for not returning verification of rent increase reported on a SR form?

Answer: Based on federal regulation Reporting Requirements 273.12(5)(D) if the household fails to provide sufficient information or verification regarding a deductible expense, the State agency will not terminate the household, but will instead determine the household's benefits without regard to the deduction.

Follow-up: How is this reported change handled in ACCENT?

Answer: In ACCENT you mark AEFSR with form received and no changes reported, and then in the notes document only change reported was rent increase and AEVTR sent. Send an AEVTR requesting ten days for the verification of the rent increase and if the verification is not received then remove the deduction from the case.

32. If a change is reported in the month of SR and verification of the change is received from the customer, but the customer has not submitted their SR form, what action should we take?

Answer: Typically, we hold the change and allow the SR process to take its course. The customer should receive a letter informing them if the SR form is not received the case will auto close. We should let ACCENT auto-suspend and auto-close, by allowing ACCENT to auto-suspend that will allow ACCENT to generate a notice to the customer. It would be beneficial to contact the customer and let them know their SR form is due; however we are not under any obligation to do so.

33. Is it acceptable to take an emailed screen shot of a Simplified Reporting (SR) form with pictures of both sides instead of the actual form?

Answer: Yes, we can accept a completed SR form as an electronic transmission because it is from an electronic device and households may supply documentary evidence in that way, per federal regulations.

34. Is a typed signature valid on a Simplified Reporting form?

Answer: Yes, we received clearance from legal that if a Simplified Reporting form is sent in with a typed signature that it is valid.



35. If a customer turns in a signed Simplified Reporting (SR) form and nothing else is completed on the SR form is the SR form complete?

Answer: If the customer signs the SR form and does not complete anything else, then it is considered a no change SR form.

36. Should there be a SR date listed on AEFSA/IQCP for households that are certified for 4-6 months or households in which all ADULTS are elderly or disabled and they have no earned income?

Answer: AEFSA and IQCP screens do not need a date for SR for those households that are certified for 4-6 months or households in which all ADULTS are elderly or disabled and they have no earned income. Putting a date on AEFSA triggers the SR form and could result in suspension of benefits or closure of the case incorrectly.

37. Do SR forms fall under the way we process undeliverable renewal packets or the way we do all other returned mail?

Answer: Returned SR forms are processed as returned mail. For returned SR forms, you would document the CLRC of the returned form and allow the SR process to take its course. Below is the Documenting Addresses in ACCENT and Returned Mail PUN for reference on how to treat returned mail. [Documenting Addresses in ACCENT and Returned Mail.pdf](#)

38. Is there such a thing as an SR being submitted too early?

Answer: Regulations state that a simplified reporting form may be submitted between the 4-6-month marks. Therefore, it is ok if it is early, as long as it is not before their 4th month.

39. When a SR form is sent in with changes reported on it and verification is not provided, are we required to send a notice?

Answer: No. With SR, we don't have to manually send ANY notice. ACCENT sends the customer a notice when the SR form is pending to provide verifications by end of the month. After the SR form is processed and completed, the eligibility counselor should send a request for verification of any deductions and this would be treated as a change.

Follow up: What if an S/R is received, and the customer is reporting change requiring a mandatory verification that will result in suspension of benefits if not received?

Answer:

- Document CLRC
- Update AEFSA with a 'P' and note what it is pending for
- ACCENT will send a notification of pending closure reminding them to provide proof by end of the month.
- The customer can make contact to determine what is needed to complete.
- If received we will update the case record and update AEFSA with a 'C' for completed.
- If not received case will suspend/close

What if an S/R is received, and the customer is reporting a change in deductions?

- Document CLRC
- Update AEFSA so that benefits do not suspend.

- Send a request for verification (AEVTR) for the verifications and document the request (AEVTR) in CLRC
- If verification is provided, update the deduction
- If no verification is provided in response to the AEVTR, remove the deduction and authorize the case without the optional deduction since not verified.

40. The new CLRC tool has the \$3500 lottery/gambling winnings wording in it under Simplified Reporting requirements. Are ECs required to discuss this as part of the Simplified Reporting process for SNAP customers?

Answer: Yes, the new SR requirements include notifying DHS of any lottery or gambling winnings over \$3500 and EC's need to be discussing this with all customers.

## STUDENTS

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1. We have an individual who is enrolled as a student in the DCS Independent Living Program that has applied for SNAP benefits. Would he be considered an eligible student while attending this program?

Answer: The DCS independent Living Program is not an institution of higher education. So the individual would not be considered a student unless the individual

- (a) is at least age 18, but under age 50;
- (b) is physically and mentally fit; and
- (c) is enrolled at least half-time in an institution of higher education.

If the individual is enrolled in an institution of higher education, then they would be considered an eligible student only if they met one of the student eligibility criteria.

### (A(9)) Student

A student is a person who meets all of the following criteria:

- (a) is at least age 18, but under age 50;
- (b) is physically and mentally fit; and
- (c) is enrolled at least half-time in an institution of higher education.

Although other individuals may be enrolled in school, they are not considered students if they do not meet all of the above criteria.

### (1) Student Eligibility Criteria

Individuals enrolled in school are considered "students" only if they meet the student definition in Section (A)9. To be eligible to participate in the SNAP Program, a student also must meet at least one of the following criteria.

- (a) Employment an average of 20 Hours per Week **or** 80 an Average of Hours Per Month

The student must actually work an average of 20 hours each week or an average of 80 hours per month and be paid for such employment.

If self-employed, he/she must work an average of 20 hours each week or an average of 80 hours per month or have weekly earnings at least equal to the federal minimum wage multiplied by 20 hours.

Students paid or subsidized by WIA for class hours are not considered employed during that time. Such class attendance does not meet the average of 20 hours a week or average of 80 hour per month work requirement.

### Bulletin 28 ([FA-10-16](#))

#### (b) Work-Study

Participation, during the school year, in a **state or** federally financed work-study program funded in full or in part by Title IV, Part C, of the Higher Education Act of 1965 (as amended). The student must actually be working at a job for which he/she receives earnings or tuition credit.

(c) Dependent Child Under Age 6

The student is responsible for the care of a child who is a dependent household member under age six. If more than one adult is in the home, only one adult may claim responsibility for a child. The household must determine who has this responsibility.

Note: The student does not have to provide care for the child personally at all times. The child may be in day care while the student is in class.

(d) Child Age 6 or Over, but under Age 12 and Child Care is Unavailable

The student is responsible for the care of a child who is a dependent household member age 6 or over, but under age 12, for whom adequate childcare is unavailable to enable the student to attend class or satisfy the 20-hour work requirement of the SNAP Act or participate in a State or Federally financed work study program during the regular school year. (Refer to the definition of “adequate childcare” in Section A.)

EXAMPLE

When a student and his/her child are the only members of the household, adequate childcare is not available.

Dora Copperfield is a student. She and her son David, age 7, live alone. Adequate childcare is not available for David.

EXAMPLE

Hester Prynne, a student, and her 8-year-old son, Max, live in the home of Hester’s parents. Hester’s mother takes care of Max before and after school, while Hester is in classes. In this situation, adequate childcare is available.

(e) Receipt of TANF Payments

The student is included in a TANF assistance unit and is receiving a money payment.

(f) WORKFORCE INVESTMENT ACT

The student is assigned to or placed in an institution of higher education through a program under WIA.

(g) Age 50

When an individual becomes 50, the person no longer has to meet the student eligibility criteria.

(h) Employment Career Services

Students enrolled in institutions of higher education as a result of participation in Employment Career Services Programs.

(i) Single Parents -- Child Under 12

Full-time students who are single parents responsible for the care of children under 12 regardless of the availability of adequate childcare.

(j) Employment and Training Program

Students assigned to institutions of higher education by E & T.

(k) Trade Act of 1974

Students assigned to institutions of higher education through a program under 236 of the Trade Act of 1974.

Follow up to Question: Is the DCS Independent Living Program WIOA funded?

Answer: I emailed the Director of the Independent Living Program, listed on the DCS independent Living web page, and he states they are not. They are funded through Chafee.

2. Can you tell us if having a meal plan as a college student affects SNAP eligibility?

Answer from FNS: You asked if students at an institution of higher learning, who have a meal plan, are eligible for SNAP. If a majority of the meals are furnished by the institution, the student is ineligible because they are a “resident of an institution.” If the individual has a meal plan, whether the plan is required or optional, the meals are considered part of the institution’s normal service.

3. If a program does not require a HS diploma to enroll, will this mean a person enrolled is not considered a student for SNAP purposes?

Answer: A student is a person who meets all of the following criteria:

- is at least age 18, but under age 50;
- is physically and mentally fit; and
- is enrolled at least half-time in an institution of higher education.

Although other individuals may be enrolled in school, they are not considered students if they do not meet all of the above criteria.

See below for Federal Regulations on what defines a school as an “institution of higher education”. §273.5 Students.

(a) Applicability. An individual who is enrolled at least half-time in an institution of higher education shall be ineligible to participate in the SNAP Program unless the individual qualifies for one of the exemptions contained in paragraph (b) of this section. An individual is considered to be enrolled in an institution of higher education if the individual is enrolled in a business, technical, trade, or vocational school that normally requires a high school diploma or equivalency certificate for enrollment in the curriculum or if the individual is enrolled in a regular curriculum at a college or university that offers degree programs regardless of whether a high school diploma is required.

4. Customer has a post 9/11 GI bill in which he receives \$1100.00 each month for shelter cost. Is he still held to the same rule of working twenty hours per week as other college students?

Answer: Based upon the information on students and available information I can locate about the Post 9/11 GI Bill, yes, he would have to meet one of the student exemptions to be eligible for SNAP benefits.

5. Customer provided statements that she sits with an elderly lady 4 times a week for an average of 20 to 25 hours per week. However she is only being paid \$200 per month for this service. Does it matter that she is not making minimum wage? At one time that was stated in the manual but as I got to looking this morning it no longer says anything about receiving at least min. wage except for a self-employed person who may not be working 20 hours per week but does make an average of 20 hours at min. wage.

Answer: Federal Regulations state: Be employed for a minimum of 20 hours per week and be paid for such employment or, if self-employed, be employed for a minimum of 20 hours per week and receiving weekly earnings at least equal to the Federal minimum wage multiplied by 20 hours;

\*The requirement that the wages equal the minimum wage rate would only apply to Students if they are self-employed. If your student is not self-employed (and it doesn’t seem that she is), she works 20 hours and is paid thus she could be an eligible student.

6. Customer received a stipend for school. It appears that because the customer turned 50 in the month of their application, they are not considered a student and the stipend was therefore treated as unearned

income. (The case record is not documented to explain why the stipend was counted.) Is this the correct action?

Answer: Policy states "All educational income is excluded." There is no requirement in policy that the person meet our definition of a student or our student eligibility criteria for the income to be exempt. If receipt of the stipend is dependent upon them being a student, it may be excluded as educational income. Regardless if they meet the criteria to be a student for SNAP, they are a student, and their educational income can still be excluded.

7. Does a student have to be receiving disability or be considered 100% disabled to be considered physically/mentally unfit?

ANSWER: To be an eligible student they do not have to be 100% VA disabled, or approved for/receiving SSA or SSI. Appropriate verification may consist of a statement from a physician or licensed or certified psychologist.

8. During a July renewal, we found a case that has been coded to make the mother an eligible student based on the fact that she is caring for a disabled child (receives SSI). The child is over the age of 12. We have checked policy, and this is not listed as one of the student eligibility criteria. Would this make her an eligible student?

ANSWER: This question was asked to FNS in 2007 and their response was that if the mother's situation does not fit into the approved exemption policies then she is not an eligible student

9. We have had a couple of students come into the office who are getting the tuition paid thru the Drive to 55 programs. They have to sign a contract that says they will do community service either outside the college or at the college. Is this work study? Does this make them an eligible student?

ANSWER: What Drive to 55 offers is not considered a "work study" program. Being a part of Drive to 55 does not meet the additional Student eligibility.

10. Customer works 5 hours a week and is paid \$32.00/hr.  $5 \times 4.3 = 21.5 \times 32.00 = \$688.00$ . Are they eligible for under student status although he does not work 20 hours a week?

Answer: Below are the federal regulations for student eligibility. To be eligible they need to be working 20 hours a week.

§273.5 Students. (b) Student Exemptions (5) Be employed for a minimum of 20 hours per week and be paid for such employment or, if self-employed, be employed for a minimum of 20 hours per week and receiving weekly earnings at least equal to the Federal minimum wage multiplied by 20 hours;

NOTE: we are operating under a waiver that allows us to average the student hours. As long as they **average** 20 hours a week or 80 hours a month, they are potentially eligible.

Follow-Up: Just so we're clear for future reference.....The amount of money earned (even if it is equivalent to minimum wage) does not matter. The student must be working 20 hours/per week or 80 hours/month for student eligibility for SNAP. Is this statement correct?

Answer: They must be working 20 hours and paid for the employment.

The minimum wage comes into play with self-employment. Regardless of the type of earned income (regular or self-employed) the stipulation is they must be working 20 hours a week.

\*Our Policy Manual matches policy that was incorrectly updated in a 2010 Bulletin.

Federal Regulations– Averaging Student Work Hours- both state:

Be employed for a minimum of 20 hours per week and be paid for such employment or, if self-employed, be employed for a minimum of 20 hours per week and receiving weekly earnings at least equal to the Federal minimum wage multiplied by 20 hours.

11. We have a student working with VR. Are they an eligible student?

Answer: To be working with VR, they are not mentally/physically fit. This means they are not a student and the student eligibility criteria does not need to be met.

Individuals enrolled in school are considered students only if they meet the student definition.

Is this individual

- Age 18 to under age 50
- Physically and mentally fit \*
- Enrolled at least ½ time in institution of higher learning

If responses are all yes, they are a student. If any responses are no, the customer is not defined as a student for SNAP purposes.

\*Physical or mental fitness is defined as ‘that an individual is fit for employment and does not suffer from any disability which would prevent his/her being gainfully employed.’

***Eligibility for VR is based on the following:***

1. The person has a physical, mental, or sensory impairment that results in a substantial impediment to employment;
2. VR services are required to prepare for, secure, retain or regain employment consistent with the person's strengths, abilities, capabilities, interests, and informed choice; and
3. The person can benefit from VR services in terms of an employment outcome.

Your VR counselor must make a determination of your eligibility for services within 60 days from the date that you sign the Application for VR Services. If there are delays in making a determination of your eligibility that are beyond the control of your VR Counselor, you will be notified of the reason for the delay and will be asked to extend the time period to determine your eligibility. Individuals who receive SSI (Supplemental Security Income) or SSDI (Social Security Disability Insurance) benefits based on their own disability or blindness are presumed to be eligible for VR services if they intend to go to work. If you receive SSI or SSDI, please inform you VR Counselor and provide documentation from Social Security if possible. If you are determined eligible, your VR Counselor will complete an assessment to determine your priority for services. Your priority for services is based on the functional limitations created by your disability and the nature and scope of services that you need to accomplish your employment goal. TN VR has four priority categories. Your VR counselor will inform you of your priority category and which priority categories are open for the provision of services.

12. Are individuals that are enrolled in Tennessee College of Applied Technology (TCAT) considered “students”? I know they have to be enrolled in an institution of higher education; we just don’t know if TCATs meet the definition.

Answer: TCAT should be considered an Institution of Higher education and individuals enrolled there should be considered students

Follow-up: These TCAT schools are considered high education and the person would have to meet the criteria for student eligibility status, is that correct?

Answer: TCAT should be considered an institution of higher education and should meet the criteria for student eligibility status. An Institution of higher education “normally” requires a high school diploma or equivalency certificate (GED) for enrollment including, but not limited to, colleges, universities, and vocational or technical schools at the post-high school level. An Amendment to the Higher Education Act of 1965; SEC. 101. GENERAL DEFINITION OF INSTITUTION OF HIGHER EDUCATION further explained that additional institutions of higher education included:

(1) any school that provides not less than a 1-year program of training to prepare students for gainful employment in a recognized occupation and that meets the provision of paragraphs (1), (2), (4), and (5) of subsection (a) of this section; and

(2) a public or nonprofit private educational institution in any State that, in lieu of the requirement in subsection (a)(1), admits as regular students’ individuals—

(A) who are beyond the age of compulsory school attendance in the State in which the institution is located; or

(B) who will be dually or concurrently enrolled in the institution and a secondary school

**In order to be enrolled in TCAT you have to:**

**Have a GED/ HS Diploma or;**

**Be 18 (beyond age of compulsory school attendance) or;**

**Be dually enrolled in there and a secondary school.**

13. Student is not working 20 hours a week, but they are working 80 hours a month. Are they eligible? And if they are, do we still have to show their hours on AEIEI as 86.

Answer: Yes they have meet student eligibility and yes you still need to code the hours as 86 on AEIEI.

From the SNAP Policy Manual:

Employment— an average of 20 hours per week or an average of 80 hours per month

The student must actually work an average of 20 hours each week or an average of 80 hours per month and be paid for such employment. If self-employed, he/she must work an average of 20 hours each week or an average of 80 hours per month and have weekly earnings at least equal to the federal minimum wage multiplied by 20 hours.

Students paid or subsidized by WIA for class hours are not considered employed during that time. Such class attendance does not meet the average of 20 hours a week or average of 80 hour per month work requirement.

[Memo FS-10-11 Documenting the Average of Work Hours for Students in ACCENT](#)

ACCENT will not allow the student to pass SNAP student eligibility if the caseworker enters fewer than 86 hours per month on ACCENT screen AEIEI, “Employment Information.” Although a student may work fluctuating weekly hours, but works an average of 80 hours per month, the caseworker must enter 86 hours in the “Monthly Hours” field on AEIEI in order for the individual to pass SNAP student criteria. You will continue to document CLRC addressing how the hours were determined.

14. I have a student that worked over 80 hours one month but under 80 hours the next month. I know policy says they have to work an average of 80 hours per month. It used to be 20 per week required but it was changed to flex hours during the month. When we average the income the amount we put on AEIEI as their

projected income shows they have 80 hours per month. Just wanted to confirm that it didn't have to be 80 hours every single month.

Answer: For students you figure the hours like you do when you are determining income for eligibility. Since the ongoing hours on AEIEI are 80/month, they have met the requirements for ongoing student eligibility. It does not have to be 20 hours every week or 80 hours every month. Just an average of 20 hours a week or an average of 80 hours a month

15. What is the use of the applicable codes on the AEISA (school attendance) screen in ACCENT?

Answer: The applicable codes are the following:

- CO: College, university, or community college not participating in WIOA.
- PS: Technical schools those institutes of higher learning not participating in WIOA.
- OT: Any institute of higher learning provided through WIOA; OT will be used in order to pass for SNAP.

16. If a student is caring for a disabled adult who is dependent upon the student's care, are they considered an eligible student?

Answer: No, the customer still needs to meet the eligibility criteria of employment-averaging 20 hours per week or 80 average hours per month, work-study participation, dependent child under age 6, or child age 6 or over, and under age 12 and childcare is unavailable.

17. Where are calls referred too that are calling to verify eligibility of students for free and reduced-price lunch?

Answer: Calls or inquiries regarding free and reduced priced lunch should be referred to the State Office email address: [School.Certification.DHS@tn.gov](mailto:School.Certification.DHS@tn.gov)

## SUPPLEMENTS

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1. Household reports loss of income on 041514. Request for verification sent 041614. Household does not provide verification until 043014. This is beyond the 10 days allowed but still before the end of the month. Do we supplement for May or not?

Answer: Yes. See Bulletin 19 ([FA-12-11](#))

2. We are going to go over SNAP supplements at our next staff meeting. Would you say that Bulletin 19, dated 10/17/12 is the best one to use?

Answer: I would add the word "For" to the paragraph below.

If the recipient is eligible for a supplement, it would be issued (**for**) the following month. A supplement is used when it is too late in the month to make changes to the following month's benefits and the recipient is eligible for this increase. I'd also use Bulletin No. 13 [FA-11-07](#)

3. When authorizing supplements (ex. reported change in April after cutoff and due supplement in May) would the supervisor wait until May 1<sup>st</sup> to authorize the supplement?

Answer: There is no need to wait, the system is already recognizing that month and will accept an issuance that is for that month. They just need to be sure to use the correct month when stating which month it is being issued for (on the supplement request screen, in CLRC and on the notice to the customer).

4. What is the correct policy regarding supplements?



Answer: 1240-1-19 Continuing Responsibility

(8) When a Change results in Increased Benefits

(a) There are several changes in circumstances which entitle a household to increased benefits. Although the household may be entitled to increased benefits, do not issue such increases until the change is verified.

(b) When the household reports a change which results in an increase in benefits, the following procedures must be used:

1. notify the household in writing immediately of the required verification it must provide and offer the household assistance in obtaining the required verification;
2. Document in running record of information requested
3. allow the household ten (10) days from the date the change was reported to provide the verification.

(c) When the household verifies the change, the worker must affect the increase within the following timeframes.

1. if the verification is provided within the 10-day period, make the change effective with the first month after the reported change; or
2. if the verification is not provided within the 10-day period, but the household does provide the verification at a later date, make the change effective the first month after the date the verification was provided.

Bulletin 19 ([FA-12-11](#))

(9) Changes Resulting in Increased Benefits through a Supplement

(a) A supplement does not go back to the day of the reported change or when verification provided. Use a supplementary allotment to increase benefits when the change cannot be processed the following month due to the system's cutoff.

(b) A supplementary allotment will be authorized only if the following criteria are met: the household had provided the required verification of the change; and it is too late in the month (after computer cut-off) to adjust the benefits received in the following month.

Bulletin 19 ([FA-12-11](#))

5. How are supplements issued?

Answer: BISF

THE BISF HELP SCREEN STATES: Use Supplemental Foods Stamp Benefits to cover time period until System-Generated increase takes effect. You can only Request SNAP supplement benefits for a one-month period. IF you need to authorize benefits for more than one month, USE BIFS to request an Auxiliary issuance.

6. If someone reports a change that results in an increase in benefits under \$10 can we issue a supplement?

Answer: Yes. The \$10 minimum is in regard to an initial proration of less than \$10.

7. Should the FS1 issue a supplement if income is now less than expenses if the caseworker didn't explore that when the change was reported, or verification received? (Case is SR).

Answer: Yes, the customer is protected by S/R. We work the change reported and we are not supposed to ask about shelter costs when an income change is reported.

8. Is it true that the first month's benefits cannot be recouped which is why BISF is used instead of BIFS if a customer has to reapply in the 7th month after failing to turn in the SR form in the 6th month and the 7th month's benefits have to be manually issued?

Answer: Yes, the first month's benefits cannot be recouped. BISF may be used for the cases where there is a recoupment to keep the initial month from being recouped.

9. If you have a timely filed recert, (example: Dec 2014 recert, filed 12/05/14, interviewed 12/10/14, verification of shelter requested, application processed 12/23/14 without the shelter expenses in the budget because they were not provided). The verifications were provided on 01/02/15. For a recert, do we issue a supplement for January 2015 since the verifications were provided w/in the first 30 days of the actual application (but not within the recertification month)?

Answer: There was a clearance provided in January 2014 that states we would supplement the benefits because they provided the requested verifications within 30 days of their application.

10. For a customer that is now receiving the \$19 min allotment and also the emergency SNAP supplement of \$215 reports loss of food in the amount of \$200, can we replace the amount reported?

Answer: Yes. For SNAP replacements, customers tell us how much food they lost via the Affidavit. The replacement should be for the value of the loss and must not exceed the value of the current month's allotment. If the customer reports food loss totaling \$200 and the household received \$234, we can replace the \$200.

## TECHNICAL ELIGIBILITY

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1. When is an individual considered a resident of an institution?

Answer: If a majority of the meals are furnished by the institution, they are a "resident of an institution." In 2005, FNS issued guidance to discuss what it means to receive meals as a part of the "normal services" of the institution as discussed in 273.1. FNS said that if the individual has a meal plan, whether the plan is required or optional, the meals are considered part of the institution's normal service and the individual is not eligible.

FNS Memo November 7, 2005 Provided to us in relation to Q & A, May 2014.

SUBJECT: SNAP Eligibility for Residents of Assisted Living Facilities with Meal Options

TO: Mary A. Ferris, Director SNAP Program

Northeast Region

This is in reply to your July 21, 2005, memorandum with the above subject in which you ask for clarifications relating to the provision of the regulations at 7 CFR 273.1(b)(7)(vi). This provision provides, in part, that individuals must be considered residents of an institution when the institution provides them with the majority of their meals (over 50 percent of three meals daily) as part of the institution's normal services.

To be a normal service of an institution, the service does not have to be mandatory. For a person who elects to receive the majority of his or her meals via an institution's optional meal plan, this is a normal service of the institution, and, unless the facility qualifies as one of the exceptions to institutional ineligibility listed under 7 CFR 273.1(b)(7)(vii), the individual is ineligible for SNAP. Those that do not elect to receive the majority of their meals from the facility would not be considered residents of any institution and would, therefore, be entitled to receive SNAP benefits if otherwise eligible.

The exceptions to institutional ineligibility listed under 7 CFR 273.1(b)(vii) are taken from the provision in the SNAP Act at Section 3(i). If the residents of an institution receive the majority of their meals from the institution these residents are by law ineligible to receive SNAP benefits. The only legal exceptions

to institutional ineligibility are (A) Individuals who are residents of federally subsidized housing for the elderly; (B) Individuals who are narcotic addicts or alcoholics and reside at a facility or treatment center for the purpose of regular participation in a drug or alcohol treatment and rehabilitation program. This includes the children but not the spouses of such persons who live with them at the treatment center or facility; (C) Individuals who are disabled or blind and are residents of group living arrangements; (D) Individual women or women with their children who are temporarily residing in a shelter for battered women and children; and (E) Individuals who are residents of public or private nonprofit shelters for homeless persons.

The SNAP Act is very restrictive on who can be exempted from institutional ineligibility. However, the SNAP Act at Section 3(g) allows a more expansive definition of what constitutes food that may be purchased with SNAP benefits. It is, therefore, possible for residents of a facility that does not satisfy one of the exceptions to institutional ineligibility who receive the majority of their meals from the facility to be ineligible to receive SNAP benefits while others in the same facility who do not receive the majority of their meal from the facility to receive SNAP benefits if there are otherwise determined eligible. Further, if the facility has been authorized by the Food and Nutrition Service to accept SNAP benefits for eligible food from eligible individuals, those individuals in the facility who do not get the majority of their meals from the facility and who have been determined eligible for SNAP benefits may use those benefits to purchase individual meals from the facility. If an individual in a facility that does not satisfy one of the legally required exceptions to institutional ineligibility receives the majority of his or her meals from the facility, that individual is by law ineligible for SNAP benefits. Therefore, in the same institution, some people may be eligible, and others may be ineligible.

A separate question was raised as to why meals from Meals on Wheels or congregate feeding sites are treated differently than meals purchased from an assisted living facility. The statutory definition of food creates this special treatment.

2. Do customers have to provide verification of a newborns Social Security number by the time the child is 6 months old? Should a claim be filed if they don't?

Answer:

Federal Regulations state:

(4) If the household is unable to provide proof of application for an SSN for a newborn, the household must provide the SSN or *proof of application (SS-5)* at its next recertification or within 6 months following the month the baby is born, whichever is later.

They get until the latter of the above. The online manual seems to be pretty detailed in regard to enumeration. It may be helpful to review it for

any negative action. I think it speaks to when claims are appropriate.

We would also have the \$200.00 claim rule to consider.

3. In the past Tennessee did not recognize same-sex marriages so therefore will any TN couple be treated as "individuals who purchase and prepare their meals together even if they do not do so"?

Answer: No. Tennessee still does not recognize same-sex marriages unless "their marriage is recognized in the jurisdiction where their marriage was celebrated."

4. If a customer has a social security number that is verified on several sources (SOLQ, DESW, Paystubs, and Clearinghouse) do they have to verify their citizenship status? Customer is claiming that they are "IA", but shouldn't the Social Security Number show invalid if they had no citizenship status?

Answer: Per SNAP policy, citizenship only needs to be verified if questionable, a social security number is not valid for verifying citizenship. Non-citizens who want to work in the United States can have a social security number based on the Social Security Administration and provided by the Social Security Administration.

## TRANSITIONAL SNAP

[\(Back to Page 1\)](#)

1. The customer saw the Customer Representative on March 25, 2014 and provided self-employment income, along with reporting that she was working at Staff-line and The Tax Man. The case notes also indicated on 3/25/14 by CR that the case is pending employment verification for Staff-line and The Tax Place. The Customer Representative ran the case on 3/25/14 with the previous income – the Families First grant, causing a change from \$604.00 to \$569.00. The following day, the Customer Representative ran the case again to include the self-employment income, causing the SNAP to decrease from \$569.00 to \$320.00 effective 5/1/14. The CR updated the customer's case on 4/10/14 with verification of income from The Tax Man, which caused the customer to be over the income limit for Families First. The CR set T-SNAP based on the case action taken on 3/26/14 with the self-employment income only – the Families First grant, causing the T-SNAP allotment to be for \$376.00 for 5 months.

I believe that the customer T-SNAP allotment should be \$632.00 for 5 months based on April's budget consisting of \$100.00 - \$185.00 Families First grant. The county office believes that T-SNAP should be set for \$376.00 for 5 months based on the action taken by the CR running the case with the self-employment income only on 3/25/14 and the benefits to be effective 5/1/14, however the appellant never received the changed amount.

Answer: The budget is frozen as it was the last month of FF eligibility, less the FF grant. In this case if FF ended in April, you would look at the passing April SNAP budget and remove the FF grant amount to calculate T-SNAP benefits.

As stated in the bulletin you attached. "If the household is eligible for transitional benefits the SNAP budget is frozen. The budget will remain the same less the Families First grant. All other income stays in the budget. No other income would be removed or added. This rule would also apply to income that should have already been included in the budget; however, due to agency or customer error, the income had not been budgeted. All individuals would remain the same."

Follow up question: Can you elaborate the meaning of **passing** April SNAP budget. As the appellant last noted SNAP budget for April showed \$100.00 earned income and \$185.00 Families First grant, but the tentative SNAP budget showed \$1270.00 with a reduction in the amount of \$320.00, which the appellant never received because the effective date would have been 5/1/14.

Answer: The budget that was effective for and benefits were issued based on for the month of April. Changes that would reduce benefits after cutoff in March would have no effect on April's budget. The customer became ineligible for FF and became T-SNAP eligible effective May 1<sup>st</sup>. The frozen budget is the budget that benefits were based on the last month of FF eligibility, less the FF grant.

2. Does COLA Mass changes affect T-SNAP?

Answer: Yes.

Exceptions to the frozen budget:

- If someone leaves the home and applies for SNAP benefits in another household or on their own, the individual with their income would be removed. The budget would be refigured with the remaining frozen income. (Do not remove the individual if no benefits are applied for.)

- If a household member is disqualified for an Intentional Program Violation during the transitional period, the disqualification will be imposed on the individual and the benefits will be adjusted accordingly.
- If a claim is established for the household, the appropriate reduction will be applied.
- **Mass change for COLA increase**

3. A mother caretaker is working. The deemed stepparent begins working and this deemed income will make them over income for FF assistance. Would the AG be eligible for T-SNAP in an instance where it was deemed income putting them over the income limits?

Would they still be T-SNAP eligible if mother caretaker had not been working and deemed income put them over the income limits?

Answer: State Rule: 1240-1-9-.01 ELIGIBILITY REQUIREMENTS

They are eligible for T-SNAP if:

The Families First case is being closed because the earnings increased, OR

Another circumstance occurred in the case which caused existing earnings to exceed the Families First income standard, resulting in termination of the FF grant. Since the mother has earned income and then another circumstance (adding the deemed income) caused the existing earned income to go over, then yes they are eligible for T-SNAP.

4. If a Families First participant has existing unearned income and becomes employed and that earned income causes the household to go over the income limit can we give that individual T-SNAP if earned income is less than the Families First Gross Income Standard?

ANSWER: They are eligible for T-SNAP. As long as earned income played a role in causing the HH to go over the GIS they are eligible for Transitional benefits.

5. If we receive a new hire match (or any change) on a T-SNAP case, do we act on it?

ANSWER: The T-SNAP budget is frozen and should not be acted on.

[Transitional SNAP Benefits \(T-SNAP\)](#)

Exceptions to the frozen budget:

- If someone leaves the home and applies for SNAP benefits in another household or on their own, the individual with their income would be removed. The budget would be refigured with the remaining frozen income. (Do not remove the individual if no benefits are applied for.)
- If a household member is disqualified for an Intentional Program Violation during the transitional period, the disqualification will be imposed on the individual and the benefits will be adjusted accordingly.
- If a claim is established for the household, the appropriate reduction will be applied.
- Mass change for COLA increase

6. Customer is eligible for 5 months of T-SNAP, but they only have 4 months left in their certification period. There has been no application submitted to allow us to extend the certification. This customer will have to reapply at which time we can give her the 5<sup>th</sup> month of T-SNAP and then figure her next year's eligibility, correct?

ANSWER: No. They are eligible for 5 months of T-SNAP regardless of when their certification is set to expire. Federal regulations: §273.27 General administrative guidelines. (a) When a household leaves TANF, the State agency may freeze for up to 5 months the household's benefit amount after making an adjustment for the loss of TANF. This is the household's transitional period. **To provide the full**

**transitional period, the State agency may extend the certification period for up to 5 months and may extend the household's certification period beyond the maximum periods...**

7. This is a SNAP/Families First case which had an SR form due June 10th. Household did return the SR form but did not provide required verifications and July SNAP benefits were not issued which now will require a new application for SNAP benefits. In July, the customer did return the income verification and the Families First case is being closed effective 7/31/15 due to income. Are they eligible for Transitional SNAP?

ANSWER: No, the household did not receive SNAP benefits during the Families First closure month due not returning the SR form.

8. We have a household that only received Families First for 2 months. Do they not have to receive Families First for 3 months before they could receive Transitional SNAP?

ANSWER: There is no 3-month minimum for Families First to be eligible for old Transitional SNAP. I think there may be confusion between the Transitional SNAP policy and Transitional Medicaid policy. <https://www.teamtn.gov/content/dam/teamtn/human-services/adfam/fa/bulletins/ma-07-10.pdf>  
Old **Transitional Medicaid (TM)** Policy: “the Aid Group (AG) must have received AFDC-MO or MA C during three (3) of the six (6) months immediately preceding ineligibility”

9. If the customer does not report the change timely, we do not adjust the Transitional SNAP months, but Transitional SNAP months would start the month after the Families First closes. And if they happened to have been over for Families First for other months, a claim would be needed. What if that new income would have made them over the gross for SNAP and should have been reported two months ago for SNAP. Would we still do Transitional SNAP and file a SNAP overpayment claim?

ANSWER: Transitional SNAP can be set based on the “frozen” budget that does not include the income that should have been reported, however, we can file a claim on any months prior to the Transitional SNAP.

[Transitional SNAP Benefits \(T-SNAP\)](#) “The budget will remain the same less the Families First grant. All other income stays in the budget. No other income would be removed or added. This rule would also apply to income that should have already been included in the budget; however, due to agency or customer error, the income had not been budgeted.”

10. We understand the income frozen in the SNAP budget for the last month Families First was received, what about shelter costs and household composition? If they report changes in rent, household composition along with the income change and the result is Families First closure as over income, would you consider the shelter costs that were in the month of Families First closure, or would you consider the new household composition and new shelter in the Transitional SNAP budget? Is it the income only that is “frozen” or is it the household composition and deductions as well?

Answer: [Transitional SNAP Benefits \(T-SNAP\)](#)

**The whole budget is truly *frozen* unless:**

- If someone leaves the home ***and*** applies for SNAP benefits in another household or on their own, the individual with their income would be removed. The budget would be refigured (without the individual) with the remaining frozen income. (Do not remove the individual if no benefits are applied for.)

- If a household member is disqualified for an Intentional Program Violation during the transitional period, the disqualification will be imposed on the individual and the benefits will be adjusted accordingly.
- If a claim is established for the household, the appropriate reduction will be applied.
- Mass change for COLA increase

11. We know that if there is an open Families First case remaining within the SNAP household, the SNAP household is not eligible for Transitional benefits. If they request their child only case be closed at the same time their Families First case is closing can they have Transitional SNAP?

ANSWER: Yes, if they had a Families First group that closed due to earnings or a change combined with earnings caused them to go over income. This would make them potentially eligible for Transitional SNAP. One of the things that would make someone ineligible for Transitional SNAP would be if there is an open Families First case remaining within the SNAP household. If they had requested the closure of the child only Families First case, there is no open Families First case remaining. The requesting of the child only case does not remove the fact that they still had a Families First case that closed due to earnings or a change in combined with earnings caused them to go over income.

12. The material that the HH is not eligible for T-SNAP if HH includes an individual who is ineligible, disqualified, or sanctioned for FF non-compliance. Does this mean any ineligible, disqualified or sanctioned individuals for any reason or strictly for FF non-compliance?

ANSWER: FF non-compliance issue could render the whole HH as ineligible for T-SNAP. If the HH contains an ineligible, disqualified or sanctioned SNAP individual the HH can still have T-SNAP just the individual would need to be excluded from the T-SNAP calculation. The state rule below says the individuals are excluded not the whole HH.

**1240-1-9-.01** Only eligible SNAP household members are eligible for Transitional SNAP; i.e., ineligible, or disqualified **individuals** are not eligible for T-SNAP.

13. We had a question about the “frozen” aspect of the budget when it comes to shelter expenses. Do you freeze the actual rent and utility amount, or do you freeze the excess shelter deduction amount?

ANSWER: You re-work the budget the way you normally would without the FF included. You keep the rent amount and the utility amount the same. The “excess shelter deduction” would change with the exclusion of the FF cash.

14. If a FF case closes for over income while there is a penalty applied to the FF for failure to do school, shots, health check, etc. and the 10% penalty is applied to SNAP, then the HH is not eligible for transitional SNAP at all?

ANSWER: Federal Regulations and State rules do not specifically state that individuals with non-compliance in FF are not eligible for T-SNAP. However the Bulletin and the T-SNAP PowerPoint training do. Federal regulations do state that we have the right to not provide transitional benefits if:

“The household is a member of a category of households designated by the State agency as ineligible for transitional benefits. “

Based on bulletin [FA-04-32](#) we took the option to not allow transitional benefits to households that contain: "...an individual who is ineligible, disqualified or sanctioned for Families First non-compliance, when a corresponding SNAP sanction is in place or must be imposed..."

15. If at recertification, the household is determined over the income for FF, is the HH entitled to T-SNAP?

Answer: They can still be eligible. However, it all depends on the case circumstances. If the last month they received FF they also received SNAP they are potentially eligible for T-SNAP. The PowerPoint below has some examples of when they may not be eligible. Examples for renewals begin at page 17.

[Transitional SNAP Refresher Training](#)

16. Do you always have to go to AEWIF and type "Pass", even if case is passing?

Answer: Complete AEWIF from fail to pass if the aid group is ***failing*** SNAP.

See desk guide:

[Transitional SNAP Desk Guide](#)

17. If a customer does not have a Families First check that is actually being issued because the customer's income only makes them eligible for \$1.00 in Families First benefits, is the customer still eligible for T-SNAP?

Answer: Yes, since the customer is "participating" in the Families First program and is now over income, he/she is eligible for T-SNAP. Federal Regulations section §273.26 General eligibility guidelines does not state they have to be receiving cash benefits, just that they must be participating in the program.

18. Can you use SNAP benefits in casinos, adult cabarets, or strip clubs for things like snacks and soda?

Answer: The casino, adult cabaret or strip clubs would have to be approved by the USDA in order to accept EBT cards for payment of food items. The new law relates to TANF cash assistance only.

19. Case is approved for T-SNAP through October. She lost the job that caused her FF case to close. She has reapplied but will still be over income in July. She is interested in the diversion payment. Can she get diversion and continue to get the T-SNAP? If she was reapplying and eligible for the families first, the T-SNAP would end. I think that if we are doing diversion it should be the same thing, but I just wanted to make sure.

Answer: You are correct. In order to receive a Diversion, the customer must be Families First eligible. The Diversion is a benefit within the FF program, especially now that the months are countable. Transitional SNAP cannot continue if the case is reopened for FF. Therefore, meeting the income eligibility of FF to obtain the Diversion would end the T-SNAP.

20. Since deprivation is no longer a technical eligibility requirement for FF, when the absent parent moves back in the home and his earned income puts the household over the income standard for FF, are they now eligible for T-SNAP?

Answer (November 2016): Yes this situation would be eligible for Transitional SNAP (T-SNAP) benefits. As long as the FF case closes for a combination of earned and unearned income and there are no other TANF/FF categories open, the assistance unit would be eligible for T-SNAP.



21. We are trying to properly set up T-SNAP with a pass/fail budget. If we are working with a December application and doing the CR orientation and T-SNAP set up after January adverse action with SNAP still in issuance, how do we proceed? HH passes for December (month of application) and fails for ongoing months. Do we do a dummy budget to allow for a grant under \$10 for January and ongoing months so that we can approve December TANF?

Answer: You will need to set a dummy January budget for a grant less than \$10 so it won't issue. Please make sure that the "fake" income entered on AEIEI is coded to FF only. On the following day, go back in and put the real income so it will fail financially again, close the case, and set TCC.

22. A customer has open Families First because she is in her 3rd trimester of her pregnancy. There are no children in the AU. The customer has received a job, which places her over income for Families First. Is the customer eligible for T-SNAP?

Answer: Yes, the customer will be eligible for T-SNAP.

23. What is the process to apply recoupments to Transitional SNAP?

Answer: In cases where a recoupment will need to be applied to the Transitional benefit amount where the Assistance group is "Failing", the case worker will need to determine the amount of the benefit reduction that should be deducted from the gross Transitional allotment. As many case managers cannot access COTS directly, an Investigation liaison will be put in place to research claim information on Transitional SNAP recipients with active recoupments and respond to case managers' inquiries. In order to determine the appropriate percentage that should be used in calculating the recoupment amount, the case manager will need to contact the Investigations liaison, Venita Freeman, at [venita.freeman@tn.gov](mailto:venita.freeman@tn.gov) with the Recipient's Name, SSN, identification number (RID), and case number. The Investigations liaison will respond back to the case manager within three (3) business days with the appropriate percentage that should be applied when calculating the recoupment. After receiving the Investigator's response, the case manager will calculate the appropriate recoupment amount by applying the appropriate recoupment percentage (either 10% or 20%) toward the gross transitional benefit amount. The case manager will then subtract the "gross allotment" from the "recoupment amount" to get the "net transitional allotment". On AEWFT, the case manager will set the benefit amount as the "net transitional allotment" to be issued to the customer. As ACCENT is not applying the benefit reduction, the system will not generate the appropriate notice advising the customer regarding the decrease in his/her allotment. The case manager will need to include this following information in "Worker Comments" (AENWC) for the FS notice that is created when they authorize the FS assistance group.

**"We gave you too much in SNAP in the past. We will keep part of your SNAP until this is paid back. If you did not have to pay us back, you would get \$\_\_\_\_\_."**

After the case manager has determined the recoupment amount deducted from the gross transitional amount, the case manager will send an email to the Investigations liaison, Venita Freeman, at [Venita.freeman@tn.gov](mailto:Venita.freeman@tn.gov) including: the recipient's name, SSN, identification number (RID), case number, Recoupment amount, and Transitional approval period. Within one (1) business day, the Investigations liaison will send an acknowledgement email informing the case manager that their information has been received.

## VERIFICATION

[\(Back to Page 1\)](#)

1. “Verified through *current or previous records within ACCENT*” does that equate to saying verified in previous CLRC?

Answer: It would need to be confirmed each time. Their statement of name, date of birth, social security number can be compared with current or previous accent records, but we need to confirm who we are talking to and document that we have done so.

2. Can a worker deny a case based on a customer’s statement of over income or must the worker pend the case for verification?

Answer: The worker must request verification of income and pend the case to allow ten days to verify before a denial based on ineligibility can be issued.

3. We have been told that The Work Number is not verified upon receipt. Is this correct?

Answer: The Work Number is a tool to use but it is NOT verified upon receipt. The Work Number is 3rd party information that can be used to confirm the customer’s statement of employment, end of employment, and income when it does not contradict the customer’s statement.

Example: The customer can state average hours and pay rate to be compared with The Work Number. If the customer states hours or average hours vary The Work Number can be used to confirm that. The customer does not have to confirm each individual check but if the customer disagrees with information on The Work Number they may provide paystubs or verification from their employer etc. as verification. The Work Number may also be an indicator of information that may need to be confirmed by the customer/employer or be verified to be untrue.

Example: The customer has stated that they are not employed but The Work Number currently shows that they are. Current status as in The Work Number would need to be confirmed by the customer or verified otherwise

**As always, update CLRC with all steps taken.**

4. Mother reported the birth of her newborn and states that the hospital did not provide her with an SS-5. Do we exclude the newborn until we have the SS-5?

ANSWER: You do not exclude the newborn. A newborn has until they are 6 months old or until their next certification (whichever is later) to provide child’s SSN or SS-5.

FOLLOW-UP: Our second question is how long do we repeat the process of completing an SS5 at the end of certification period without receiving the number? The regulations are clear that the un-enumerated person is allowed to participate in the SNAP program pending the receipt of the SSN and if it is not received by the end of the certification period, the worker shall complete another SS5 at redetermination but is there a limit to this?

ANSWER: Our Policy Manual states: *“If a household member who has applied for an SSN has not received it by the end of the certification period, the worker shall complete another Form SS-5 at recertification. The household member without the SSN will be recertified, and may continue to participate in the Program as long as all other eligibility requirements are satisfied”*

The Process is repeated until a SSN is received. As long as the customer is re-applying for a SSN, then the SSN eligibility requirement is met.

5. If a customer fails to submit SR form timely, the subsequent month customer is required to file an application. During this interview, we are now certifying HH for a new period. If identification has been documented previously and customer can confirm/verify ID, can we use “information known to ACCENT already”?

ANSWER: Yes, we can use information known to ACCENT to confirm ID. Please update CLRC with the information that was provided and used.

**From Bulletin No. 22 [FA-12-14](#)**

### **Identity Verification**

The identity of the head of household can be verified through current or previous records within ACCENT. Identity can also be verified with, but not limited to:

- Clearinghouse,
- Bendex and SDX data,
- An authorized representative, or
- Any readily available documentary evidence.

Contacting a collateral contact prior to approving a SNAP application is **not** a policy requirement. However, a collateral contact can be used to verify identity if no other source of verification can be obtained.

6. Why is SOLQ not considered VR upon receipt when DEBB and DESX alerts are verified upon receipt?

ANSWER: DEBB & DESX alerts for receipt/amount of SSI/Social Security benefits are directly entered from Social Security Administration and no other verification needed. SOLQ is not verified upon receipt because it is a 3rd party information hub.

7. What are the EC’s supposed to request for verification if the customer indicates the new hire or DESW alerts are for jobs that they do not and have never had?

ANSWER: If the customer is stating they can’t obtain the verification we can assist them by contacting that employer, send VNIE, send the income verification form, etc. If we and the customer have tried and are both unable to obtain verification we can accept customer statement as last resort. Just thoroughly document CLRC with all steps taken.

8. The new CLRC asks us to document that we checked the work number. Should we still check this as part of reviewing the case prior to interview? What do we do if we check the work number, but the customer insists they have never worked at the job listed on the work number site? Are we allowed to contact the employer to verify, or must we take customer’s statement that they are not working?

ANSWER: The work number can still be checked before the interview. It can be used as an indicator of employment, but it is not to be treated as verified upon receipt. If the customer states they are not working, ask for verification and offer assistance. The manual has good information regarding what can be used to verify lack of employment. If verification is not provided the case may be closed/denied for failure to verify. If assistance is requested you can contact the employer, send VNIE, send income verification form, etc. If they are unable to obtain verification and have asked for your assistance, once you have tried and are unable to obtain verification, take customer statement as a last report and document CLRC thoroughly with all steps taken.

9. I received a non-recipient reported change about a customer that has passed away. This information is verified on SOLQ. Do we need additional verification?

ANSWER: SOLQ is not verified upon receipt and additional verification would be needed.

10. Do we have to have 2 collateral contacts, and do we have to contact them?

ANSWER: Obtaining and contacting a collateral contact prior to approving a SNAP application is **not** a policy requirement. However, a collateral contact can be used as a form of verification. If a collateral contact is used, please document in CLRC the collateral's information and what they were used to verify.

11. When do we take action on a case if verifications are due on the weekend or Holiday? If we request verification on 10.21 and the 10th day is on Saturday 10.31? Do we deny on Monday?

Answer: If verifications are due on a weekend or holiday, the household must be allowed the next business day to provide the verification and action to deny can be taken on Tuesday. Also refer to [Policy 24.03 SNAP Timeliness Standards](#), it states under "I. **Time Limit for Providing Notice of Denial**" #5, it states: "If the tenth (10<sup>th</sup>) day is a non-business day, give the client until the next working day to provide verifications." Application denials are timely through day 30 (or until customer has had at least 10 days if properly pended by day 30). ALWAYS check CNHS to verify the date AEVTR gave the client prior to denying or closing a case.

12. We have a case where the customer is in one of our approved group homes. They submitted his review application and the customer and the group home's authorized representative both signed the application. The group home does not have access to the customer's bank accounts and has always asked us to call the conservator for the information. The customer gets both SSA and SSI so his bank accounts should be below the SSI limit of \$1000. What should we do to obtain verification of resources?

Answer: I'm assuming he is the only one in the case. Since he is receiving SSI he is categorically eligible. Verification Procedures for CE Households

A. Once a household is determined categorically eligible, it is not necessary to verify:

1. resources;
2. social security number;
3. sponsored alien information; and
4. residency

B. All other SNAP verification requirements must be met.

13. One of my customer's employers' reports that we must use the website [www.uconfirm.com](http://www.uconfirm.com) to verify the pay/employment for their employees.

I have checked the website and need to confirm with you whether this is a website that we are allowed to use or not?

Answer: If the income is not on Work Number and there is no other way we can obtain the information needed; we can use the other website.

14. Is there a cut off in the policy at which we do not take employer statements if the customer receives pay stubs?

Answer: There is no cut-off. We may prefer paychecks at times, but not everyone has access to them so an employer statement may be the only way to provide the required verification. As with all things,

if we request verification and the customer can't get it, assistance is requested-we assist, and we can't get it... we can take customer statement as last resort.

15. When requesting verification of a reported change, are we required to give the customer examples of acceptable verifications, or can we say I need verification of your income, rent, or address?

Answer: From Federal Regulations:

*(5) **Notice of Required Verification.** The State agency shall provide each household at the time of application for certification and recertification with a notice that informs the household of the verification requirements the household must meet as part of the application process. The notice shall also inform the household of the State agency's responsibility to assist the household in obtaining required verification provided the household is cooperating with the State agency as specified in (d)(1) of this section. The notice shall be written in clear and simple language and shall meet the bilingual requirements designated in §272.4(b) of this chapter. At a minimum, the notice shall contain examples of the types of documents the household should provide and explain the period of time the documents should cover.*

16. We are trying to verify unemployment compensation. Have you heard anything about a problem with Clearinghouse not showing current Unemployment Compensation data? I'm hearing from a couple of the case workers that no payments are showing on Clearinghouse since early May, but customers are still getting benefits. Here's an example: Shows on Clearinghouse with last payment issued on 5/4/16; customer stated at interview still receiving benefits and later provided verification of payments continuing to present.

Answer: Press F8. It pulls up the correct screen that shows her current amount. Clearinghouse logs these based on approval date. Seems she applied, was approved, then placed on hold, and approved again. So you have to F8 to get to her original approval screen to see her current data.

17. When a notice is mailed, are holidays considered as part of the 10-day waiting period or do we count 10 business days in awaiting the customer to provide verification?

Answer: Holidays are considered as part of the 10-day waiting period and we provide the customer 10 calendar days to provide verifications. If the notice mailed was an AEVTR notice, ALWAYS check CNHS to verify the date AEVTR gave the client prior to denying or closing a case.

18. A customer is claiming that the money that they received from the Tennessee Lottery Corporation is being claimed for a family member that is unable to claim the prize money due to not having proper ID. What type of verification do we need to request?

Answer: Examples of ways to verify this information are a letter from TELC showing who the money was in intended for, call to a collateral contact, a letter from the individual who the prize money was intended for, and/or a bank statement to show that the customer does not have access to these funds. If **ALL** options to verify that the customer does not have access to the funds are made, a customer statement can be taken as a last resort.

19. For verifications received by fax, email, etc. after normal business hours, is the receipt date considered the next business day or the date actually received?

Answer: The receipt date would be the date the verification is received. The outside normal business hours policy only applies to **applications** received outside of normal business hours.

20. Is information received from TOMIS considered verified upon receipt?

Answer: Yes, Information received from TOMIS is treated differently than the regular incarcerated report. Information that the field receives from TOMIS is considered verified upon receipt and does not require a notice because the information comes directly from the source, the Department of Corrections.

21. Is the website VINE Link verified upon receipt?

Answer: No, VINE Link is not verified upon receipt. Any information received from VINE Link would have to be verified with the customer.

22. Can the website INVERIFY be used to verify employment?

Answer: If the employee/employer specifically states to use that site, then we would need to.

23. Can an employer be contacted on behalf of the customer via phone to verify employment?

Answer: Yes. Contact with the employer would be considered a collateral contact. SNAP Policy [24.17 SNAP Mandatory Verifications](#) states "A collateral contact is a verbal confirmation of the household's circumstances by someone outside of the household who is knowledgeable regarding the eligibility factor being verified and may be anyone who can be expected to provide accurate third-party verification of the household's circumstances."

24. Is Power of Attorney sufficient to add someone as an authorized representative to an applicant's/recipient's SNAP case?

Answer: Yes. Since Power of Attorney is a legal document giving someone legal rights over that individual. Identity must still be verified for the individual. ID and POA would be enough verification to add an authorized representative to SNAP case. CLRC must also be documented with information verified.

25. We have a case where the customer contacted the department a week after being interviewed and requested assistance with the verifications we are needing, do we allow the household another ten days?

Answer: For instances when a customer needs assistance obtaining verifications after the interview and it can be determined that the customer benefits from receiving another 10 days due to the ability to obtain the verification we can provide an AEVTR and an additional 10 days to get in the information.

Staff should try to make an effort in verifying the circumstances by the use of collateral contacts or any other resources available to eligibility staff (such as The Work Number, SOLQ, Clearinghouse, etc.). As a last resort customer statement can be taken if the customer cannot obtain the information.

## **VOLUNTARY QUIT**

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1. When does voluntary quit apply?

Answer: The voluntary quit section lists the following exemptions to voluntary quit in Section B Chapter 12 of the SNAP Policy Manual and the individual is exempt from the work registration provisions at the time of the quit. However please note: [BULLETIN NO. 33 FA-04-31 WORK REQUIREMENT SECTION](#) Explains that Federal exemptions exempt from work registration, ABAWD, and voluntary quit. State Barriers only exempt someone from E and T components, they do not exempt someone from Voluntary quit. The USDA website information concurs with the bulletin.

2. For counties who have no E&T, and for customers whose only exemption from SNAP work program is the county is exempt from work requirement, we understand now that we still have to look at voluntary quit. Once they have served the minimum penalty (one month for first sanction), to regain eligibility, since there is no work program requirement in the county, do we just end the sanction, and they are eligible again even if not employed again?

Answer: Yes. The answer would also be yes even if there was an E&T component available in their county since their sanction is for voluntary quit—not E&T non-compliance. For voluntary quit it is minimum penalty period or until exempt-- whichever is sooner. Since the minimum penalty period has been met, they are eligible.

From [Bulletin No. 33 FA-04-31 August 12, 2004](#)

PUN: 24.01- 16.00 [Expansion of Employment & Training Services in Tennessee](#)

Voluntary Quit

1. The length of a disqualification has been redefined. The penalties are:

1st violation – one month

2nd violation – three months

3rd and subsequent violations – six months

The requirement that an individual must be disqualified until compliance no longer applies.

2. When an individual becomes exempt, the minimum penalty does not have to be served before he/she is eligible.

3. We have a case where the customer started a job and then two days later refused the drug test and was let go. The employer considered this voluntary quit on the separation notice. Will this be voluntary quit for SNAP?

Answer: Since the separation notice is marked Voluntary Quit, we need to apply Voluntary Quit policy.

## **WORK REGISTRATION and E&T**

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1. How are work hours determined for work registration exemption status?

Answer: 1240-1-3-.43(2) Exempt individuals from work registration as follows:

8. Employed and Self-Employed

Exempt the following employed/self-employed individuals:

(i) persons who are employed or self-employed and work a minimum of thirty (30) hours weekly;

(ii) persons who are employed/self-employed and receiving weekly earnings at least equal to the federal minimum wage multiplied by 30 hours;

**Note:** The training wage shall be substituted for the minimum wage for persons receiving the training wage mandated by the Fair Labor Standards Act of 1989. (Limited to 90-day period and under age 20.)

(iii) persons who have fluctuating work hours but work an average of thirty (30) hours per week or receive average weekly earnings at least equal to the federal minimum wage multiplied by 30 hours;

**Note:** The average should be based on the information used to compute the budget income.

2. What is the hierarchy of codes to be used on AEIWP?

Answer: 01 if Mandatory, 02 if voluntary, 04-20 Federal Exemptions (05= priority per ME findings), 24-31 State Barriers (31= last resort)

3. When should 07 vs. 20 vs. 24 be used?

Answer: A person that is physically and/or mentally unfit for employment may be exempt due to either a Federal Exemption or State Barrier depending on their situation. 07 may only be used when someone is disabled or incapacitated and AEIDP is completed. 20 may be used when someone has applied for SSI or when someone has a Dr.'s note or some type of verification stating that they are unable to work/participate in work requirements. 24 is a state barrier and may be used when the worker, based on their observation, exempts the customer.

4. If a customer is referred to DOLWD as a mandatory E and T participant, does the county have to explore good cause if DOLWD reports that the customer is a no show or is not complying?

Answer: Yes. Good cause must be explored prior to an E & T sanction. If the customer is contacted and doesn't claim good cause it should be documented. The customer should be given written notice and 10 days to provide verification of good cause if good cause is claimed, or if it is unknown as to whether the customer is claiming good cause. **(If we are Voluntary E&T There will be no sanction and no need to examine good cause)**

5. How do you determine which E&T code is correct or supersedes the other?

Answer: Current hierarchy for code on AEIWP

01 if Mandatory, 02 if voluntary, 04-20 Federal Exemptions (05= priority per ME findings), 24-31 State Barriers (31= last resort)

6. Are counties exempt from E&T subject to voluntary quit policy?

Answer: State barriers, including being in a Non-E&T county, exempt individuals from being referred to E&T components but only Federal exemptions exempt someone from work registration, ABAWD, and voluntary quit policy.

7. In counties where E&T work requirement is there, and a person has a sanction from the past and the case has been closed for any particular reason for a while and then the HH comes in and reapplies for SNAP:

Do we prorate the SNAP back to the application date if they comply or to the compliance date for that person?

Answer: If the sanctioned customer is the only one in the SNAP household, put the date the sanction was cured on AEFPPY instead of the date of application and document CLRC why you did not use the application date. This customer is not eligible for SNAP until the day the sanction is cured.

Follow up: How should this be handled in HH where there are other members not sanctioned?

Answer: When there are other members in the SNAP household, they should be eligible for SNAP from the date of application. The sanctioned individual will be added to the case as a change effective in the month after the sanction is cured.

8. Is pregnancy a disability for Work Registration? Would it be correct to use code 20?

ANSWER: Pregnancy itself is not an exemption

07 is for verified disability.

20 is for a verified illness or injury.

24 is a state barrier but could be used for unverified but observed illness.

Pregnancy itself is not an exemption but if the pregnancy is causing complications... a 20 or a 24 could be used.

Example:

20-Dr note stating can't work (Verified)

24-worker observed trouble walking due to swollen legs. (not verified but observed)



9. I have a question in whether we should refer a person such as a school cafeteria worker or bus driver to E&T. They cannot elect to be paid over 12 months. Their income is ending this month and the verification states they will be returning to work in August, but at this time they are not working and do not meet any exemptions.

ANSWER: Per the SNAP Policy Manual

D. Barriers to Employment & Training Work Components

the school cafeteria worker or bus driver would be exempt under a State Barrier (On call-back to job).

As long as these individuals will be returning to work after the Summer, Spring or Winter break then they would not be referred to DOWLD.

10. We have a customer age 19 in Job Corps and working a job under their program. Since Job Corps is funded under the WIA according to the policy clearances on AEIIT we would code her J (JTPA). Since Job Corp is considered an educational and training program would we code her 18 (student) on AEIWP or would another code be more appropriate?

ANSWER: On AEIWP- 18 would be appropriate because this is a recognized training program.

11. Are we going to be Voluntary Employment and Training (E & T) 10/1/15? If so, what counties will that apply to?

ANSWER: We are going Voluntary E&T beginning Oct 1<sup>st</sup>, 2015. There are now 52 out of the 95 counties in Tennessee: (UPDATE. As of 10/01/16 all 95 Counties are Voluntary E&T)

12. How are cases that are **currently sanctioned** for E & T non-compliance to be handled with E & T becoming voluntary 10/1/15?

ANSWER: A person who has been imposed a sanction (1, 3, 6 months) has to fulfill the sanction period before potentially being allowed to participate in the SNAP program again. If the sanctioned individual gains a FEDERAL exemption during the sanction period, then you can end the sanction at that point and that person can participate again in SNAP.

13. If a person does not want to volunteer for E&T.. they don't meet an exemption.... what code do we use?

Answer: 31 is used as a last resort. This code would be used for individuals that do not want to volunteer and do not meet an exemption. Also, for these individuals (if there is no ABAWD exemption) we need to be explaining to them that come January they may only be eligible for 3 months of benefits in a 3-year period.

14. If we have customers coded as '01' it is making us change them before we can deregister them.... So we have been using '02' to complete the deregistration and then roll them over to a '31' or another exemption.

Answer: They only need to put the 02 if they want to refer someone. They need to use the exemption to deregister. If there is no other exemption...31 is the code they need to use to de-register someone.

15. We want to clarify the deregistration step.

What is the process when we receive notification from Labor and a customer stops participating...? Do we still make the attempt to reach customer? Phone attempt with a 10-day CNCC exploring good cause... Or do we just proceed with deregistering customer and placing them as a '31' if no other exemptions apply?

Answer: For any non-compliance that has happened after 10.01.15 you do not have to explore good cause. You can de-register the customer with a 31. In the notice just explain that they have been

removed from the E&T program and if they would like to be a part of the E&T program to please contact their worker.

16. Call from Depart of Labor was received. Stated that that none of the de-registrations we keyed into ACCENT during 11-2015 transmitted over to them. We did numerous ones. We are using reason code '35' for deregistering. We opted to NOT use reason code '33' due to it being linked with sanction. We need assist in resolution. Any ideas?

Answer: Code 35 is not a de-registration code that should be used. The codes that are VOS approved are:

- 32 Application Denied
- 33 Work Program Sanction; Failure to Comply
- 34 Obtained a Job
- 36 Became Exempt
- 38 ABAWD-Non-Compliant

The de-registration code that would best fit this would be 36-became exempt. Their exemption code is 31-barrier approved by DHS (if no other exemption exist).

17. If I'm not in one of the 42 E&T counties do I have to use an actual exemption code on AEIWP or can I just code them a 31?

Answer: Do not just code them a 31. 31 is used as a last resort. Please explore a federal exemption first. If they do not meet a federal exemption explore a state barrier and use 31 as a last resort.

18. According to ABAWD, a customer should be referred to work registration if they are pregnant. Will the DOLWD send this pregnant customer back to DHS? They are sent back for work registration.

ANSWER: Pregnancy is an ABAWD exemption. If they are pregnant they are exempt on AEIIT with a "Y". However, it is not a work registration/E&T exemption. Since E & T is no longer mandatory, if the customer wants to volunteer for E & T they would be an 02. If the customer does not want to volunteer for E&T and there is no other exemption you will code them as a 31 on AEIWP.

19. I found this older clearance and wanted to know if it is still correct; I know no county is mandatory at this time, but would the 16 code be appropriate in this situation? A customer works 30 hours per week but, the hourly rate is lower than minimum wage. Is it mandatory for the customer to be referred for Employment & Training (E&T)?

Answer: The customer can be E&T exempt due to working a minimum of 30 hours weekly. The customer would also be exempt if weekly wages were at least equal to the Federal minimum wage multiplied by 30 hours.

Follow-up: We want to be sure we are reading this answer to question correctly. It seems to say that the customer can either have wages equal to 30 hours per week at minimum wage OR the customer could actually work 30 hours per week, but could make less than minimum wage and still get the 16 code? We thought for E&T it had to be wages at least equal to minimum wage x 30 hours, but this answer seems to say either wages or working 30 hours (even earning less than min wage) can earn that 16 code.

Answer: Our Policy manual: Chapter 9 C. A. 8 page 66  
Employed and Self-Employed (16)

Exempt the following employed/self-employed individuals:

- a. persons who are employed or self-employed and work a minimum of thirty (30) hours weekly;  
or

- b. persons who are employed/self-employed and receiving weekly earnings at least equal to the federal minimum wage multiplied by 30 hours;

Federal Regs: §273.7 Work provisions. (b)(vii)

“An employed or self-employed person working a minimum of 30 hours weekly or earning weekly wages at least equal to the Federal minimum wage multiplied by 30 hours”

20. Will a referral to DLWD go over on a pending case or will it go once the case is approved?

Answer: DLWD referrals will go on a pending case if there is a work program sanction on AEOIE and the date is current date. That is for when we were mandatory, and individuals had to comply with E&T before we could approve. If you just have a case pending and no sanction, no, it will not send a referral.

Follow-Up: Should the approval date and the referral date be the same?

Answer: If you have a case that applies on 12/1. And you do not approve until 12/3 you will need to make the Reg Date the app date and the referral date will be the approval date.

21. If customer decides after the case is approved to volunteer for E&T, do we have to run AEABC once we enter the info on AEIWP.

Answer: You can update the code and referral date without running the driver. ACCENT will send the referral when the nightly batch is run to DLWD's VOS system if you update the referral date to current date on AEIWP.

22. We have someone that is volunteering 30 hours a week due to being ABAWD. Since they are “working” 30 hours a week, is this reason to use a 16 on AEIWP? Or do they have to be making minimum wage?

Answer: The amount of money doesn't matter for regular employed individuals that are working at least 30 hours week. But they need to be “Employed” or “Self-Employed”. Simply being a “volunteer” would not allow this exemption. If no other exemption will work, they need to be coded as a 31 on AEIWP.

(vii) An **employed or self-employed** person working a minimum of 30 hours weekly or earning weekly wages at least equal to the Federal minimum wage multiplied by 30 hours. This includes migrant and seasonal farm workers under contract or similar agreement with an employer or crew chief to begin employment within 30 days (although this will not prevent individuals from seeking additional services from the State employment services agency). For work registration purposes, a person residing in areas of Alaska designated in §274.10(a)(4)(iv) of this chapter, who subsistence hunts and/or fishes a minimum of 30 hours weekly (averaged over the certification period) is considered exempt as self-employed. An employed or self-employed person who voluntarily and without good cause reduces his or her work effort and, after the reduction, is working less than 30 hours per week, is ineligible to participate in the SNAP Program under paragraph (j) of this section.

23. If someone contacts us mid-certification and wants to volunteer for E&T, what do we use as the referral/registration dates on AEIWP? The date of contact for both?

Answer: Only update the referral date. The registration date stays the date of application because that is the day they completed “work registration”. The referral date is updated to current date (today's date). When batch runs over night, the referral is sent to the Department of Labor and Workforce Development to their VOS system.

24. Other than the ABAWD handout, what else should we give the customer? I thought we were supposed to be handing out something about E&T?

Answer: At the time of interview, we should mail or give the customer a DLWD brochure along, an E & T handout, an ABAWD flyer and the [Consolidated Work Notice](#).

25. If a customer has a vehicle that is in the wife's name that draws SSA, and the husband is not working, can he be coded '27' for exemption or would he be considered to have access? If she was working and he was not could he be coded 27?

Answer: No, the customer would be considered to have access to transportation. If she was working and he was not, yes, he could be coded a 27 for no access to transportation; however, this would be on a case-by-case basis.

26. How should screen AEIWP and documentation be completed for a customer that works 10 hours (AEIEI) as well as volunteers 10 hours with documentation?

Answer: If no other code is appropriate-use 31. Code 16 on AEIWP is for if an individual is working 30 hours or earning income equal to the federal minimum wage times 30 hours.

27. Is it considered incorrect to code a customer a 31 on AEIWP if the customer has a vehicle, but no resources for gas?

Answer: Yes, it is considered incorrect because per the SNAP policy manual under Barriers to Employment & Training Work Components, a 27 is what code is used and not a 31. This is in section D Identified Exemptions to Employment & Training Work Components in the [Work Requirements & Exemptions](#)

\*No access to transportation (the individual does not have a reliable vehicle, there is no public transportation available, or the individual does not have the resources to use public transportation or purchase gas).

28. In the CLRC if the field for Work Registration has a 02 code for "Want to participate in work program." how should the question for "Did the customer want to volunteer for E&T?" be answered?

Answer: If the Work Registration field is coded a 02, "yes" would be the response to the "Did the customer want to volunteer for E&T?" in the CLRC. It would be contradictory to put any other answer to that question if 02 is the Work Registration code.

29. What are the de-registration codes for AEIWP?

Answer: The de-registration codes can be located on the [SNAP Work Codes](#) Desk Guide and they are listed below.

**Deregistration Codes**

32 Application denied

33 Work program sanction; failure to comply

34 Obtained a job

36 Became exempt

38 ABAWD Non-Compliant

30. If a child is on a case and is 16 and under do we have to update CLRC regarding their AEIWP code?

Answer: Every customer needs to have a code listed in CLRC for "Work Registration/E&T code and justification of code."

31. Can an E&T referral be sent over for a customer that is receiving Transitional SNAP (T-SNAP)?

Answer: Yes, an E&T referral can be sent over for these customers because they are not receiving Families First cash benefits and are not participating in a work program through Families First.

Follow-up: Can an E&T referral be sent over for a customer that is receiving Transitional Child Care while still on SNAP benefits?

Answer: Yes, an E&T referral can be sent over for these customers because they are not receiving Families First cash benefits and are not participating in a work program through Families First.

32. Can individuals who are receiving a Caretaker Child Only TANF grant be eligible to participate in the SNAP E&T program?

Answer: Yes, if the TANF award does not include their needs in the eligibility determination, they are not considered to be receiving cash assistance from TANF and therefore eligible to participate in E&T as long as the customer is eligible for SNAP.

33. When making a referral to E&T, does the customer have to be coded an 02 on AEIWP even if there is another code that may be applicable?

Answer: Yes. An 02 code is needed on AEIWP for the referral to go over to TDLWD. Please ensure that AEIWP is coded correctly for E&T referrals and that the screen is filled out correctly. For questions on how to make an E&T Referral please also see [Registering and Deregistering Clients from Employment and Training \(E&T\)](#)

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