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Processing Time Limits

110 APPLICATIONS

111 Obvious Denials

If information on the application form indicates the household is ineligible, deny the application without scheduling a face-to-face interview.

The agency must schedule an interview for all applicant households who are not interviewed the same day even in cases where the form indicates the household may be ineligible. The household must be given the opportunity to confirm all reported information is still correct and current.

112 Reuse of the Application Form After Denial

If the household wishes to reapply after being denied, a new application must be completed. The previous application is not reused, unless the case meets the program requirements to be reinstated.

113 Benefit Effective Date

A household eligible for TANF must receive benefits effective the approval date or the 30th day from the date of application whichever is sooner.

Provide benefits effective the date of application or the next normal issuance date.

Initial Month of Application: The initial month's benefit is prorated based on the date of application if the household is otherwise eligible. The ongoing benefits are issued and made available the first day of each month.

Applications After the 15th of the Month: Households applying after the 15th of the month will receive (if otherwise eligible) the initial month's benefit and the second month's benefit upon approval.

114 Proration

Benefits are not issued if the prorated amount is less than $10. This includes a $10 amount prior to any recoupment.

In TANF two-parent households, where the only child is an unborn, only the needs of the pregnant woman are considered for a cash payment. The father/domestic partner and unborn's needs are not included. Once the child is born, the father/domestic partner and newborn become required household members and all other eligibility requirements must be met (A-300).

Prorate benefits for the initial month of application from the date of application.

Prorated benefits Under $10 for the Initial Month: Prorated benefits calculated to be under $10 for the initial month of application will not be issued. Ongoing benefits under $10 will be paid.

Nevada uses a standard 30-day calendar formula *(full month's benefit X 31-date of application ÷ 30 = allotment)* to determine monthly benefits. When a person applies on the 31st of the month it is the same as applying on the 30th. Always subtract the application date from 31 days, regardless of the number of days in the month.

Benefits for the initial month are prorated using the 30-day formula as follows:

1. Subtract the date of application from 31 to arrive at the number of days to be prorated.
2. Divide the whole allotment for the household size by 30 days. The sum is the daily SNAP benefit amount. Round to cents.
3. Multiply the number of days in #1 by the sum in #2. Drop the cents.
4. The results in #3 are the prorated benefit amount.

Example: A household with a whole monthly allotment computed to be $395 applies on July 17. The household's prorated allotment for July is $184 (31-17 = 14 days. $395 / 30 days = $13.1666 = $13.17. $13.17 x 14 = $184.38 = $184.

The system will automatically compute and pro-rate the initial month's benefit based on information posted in the system. When computing manual budgets, use the same formula to determine pro-rated benefits.

115 Deadlines

Applications for TANF assistance are required to be processed with a determination of eligibility by the 45th day from the application date.

Ineligible households will be notified as soon as possible but no later than 30 days after the application date. Households who fail to provide requested verification will be denied on the 30th day from the date of application. The day after the date of the application is the first day of the 30-day period.

Exceptions:

- Provide benefits to applicants eligible for expedited services according to those time frames.
- Follow the procedures for missed appointments and for pending information when the 30th day is a non-workday.

116 Delays in Processing Application

- Applications processed late receive retroactive benefits effective the application date or the first date the household is eligible.

117 Missed Appointment

If the household misses their interview appointment,

deny the application the next workday.

Households who fail to keep their TANF appointment are provided a legal notice advising them of TANF denial due to their missed interview appointment (MIA). A new application will be required.

send a legal notice the following workday advising them of the missed interview appointment (NOMI). It is up to the household to contact the office to reschedule an appointment or discuss any hardships in keeping an interview. If the household does not contact the office or respond to the notice, deny the application as follows:

- **Initial or Untimely Recertification Application**: Deny the application for non-cooperation thirty (30) days following the date of the application. The date of the application is not counted in the 30-day count.

- **Timely Recertification**: Deny the timely recertification on the last day of the current certification period. See manual section B-124 regarding cooperation within thirty (30) days of denial.

If by the 30th day after the file date . . .	**Then. . .**	
the applicant has not requested another appointment,	deny the application.*	
the applicant has requested another appointment,	● reschedule the appointment, and ● continue pending the application even if the appointment is after the 30th day.	
	If the applicant...	**Then...**
	misses the appointment,	deny the application on the 30th day*, or the day of the appointment if the appointment was scheduled after the 30th day.
	keeps the appointment, and the appointment is on or before the 20th day after the file date,	follow procedures in manual section B-118, Pending Information, and provide benefits by the 30th day after the application date.
	keeps the appointment, and the appointment is after the 20th day,	• allow the applicant 10 days to provide needed information. • if information is received by the 10th day following the appointment, certify or deny the application by the 30th day* after the application date (or on the same day information is received if after the 30th day). If the applicant is eligible, provide benefits by the 30th day* after the application date. **Note:** If the information is not received by the 10th day, deny the application the next workday.
*If the 30th day after the application date is a non-workday, take action as appropriate on the following workday.		

118 Pending Information

If more information/proof is needed to complete an application, allow the household **at least 10 days** to provide it. The due date must be a workday.

> **Note:** For expedited service applications, postpone all verifications except identity.

Determine what documents are readily available to the household and request them first if they are anticipated to be sufficient proof. Give the applicant Form 2429-EE (Insufficient Information) explaining what is needed, the program(s) requiring the information, the date the information is due, and the date the program application(s) will be denied if the information is not received. If information is not provided or postmarked within the time frames given, deny the application or terminate assistance allowing applicable adverse action.

> **Exceptions:**
>
> - If circumstances make it necessary, hold the application past the 30th day to allow the household **at least 10 days** to comply. If the household has not complied by this deadline, deny no earlier than the following workday.
> - If the eligibility factor in question does not affect eligibility of the entire household, exclude the ineligible member(s) and approve the remaining members. If the excluded person is a required member, their income and resources are countable even though they are excluded.
>
> If the applicant is eligible, provide benefits by the 30th day after the application date.

119 Information Reported at Application

Any information reported by the client or discovered by the agency through other sources between the application date and the decision date must be taken into consideration in determining eligibility.

Send a Notice of Pending Status, if verification of the reported information is required to complete the application process.

120 REDETERMINATION/RECERTIFICATION

121 Redetermination Notice/Notice of Expiration

Effective January 1, 2010, all TANF cash households require a redetermination every twelve months from the calendar month of approval.

Send the application form and include any other required forms and pamphlets (refer to manual section A-200).

SNAP households are automatically mailed a Notice of Expiration (NOE) forty-five days before the current certification ends. The NOE informs the household of its rights to uninterrupted SNAP benefits if they reapply by the deadline given.

Exceptions: Households certified for one or two months are issued a NOE when their application is approved. The Notice of Decision also includes the Notice of Expiration.

- If a Joint SNAP/TANF application is filed; SNAP eligibility will be within the SNAP time limits at the TANF review of eligibility, do not request a separate application from the household.
- Households certified for one month, or certified for two months during the second month of the certification period, must reapply by the **17th** day after the last approval to receive uninterrupted benefits.
- Households certified for more than two months must reapply by the **15th** day of their last issuance month to receive uninterrupted monthly benefits. Provide the application packet upon request.

Monthly NOMADS caseload reports are used to identify due and overdue reviews, certification periods, umbrella cases, etc. Staff use

the monthly redetermination report (REDT, RED1) to identify households, which have a redetermination due in the current or next two months. This report also identifies overdue reviews which must be resolved and completed.

the report to identify households due for recertification in the current or following month.

These reports include all active cases.

122 Processing Redetermination (RD's)/Timely Recertifications

Process redeterminations before cutoff of the month in which the RD is due.

In the month prior to the month the RD is due or no later than 13 days before adverse in the month the review is due; provide the household with an appropriate application for the redetermination.

If the RD is returned, the case manager must evaluate all information provided on the RD, and any changes reported by the household or discovered by the agency through other sources. Request verification of any unverified eligibility factors and allow the household at least 10 days to provide the requested information. Allow less than ten (10) days if they agree to a shorter time.

If the verification is returned, update the case and complete the REDT process in NOMADS.

Process timely recertifications by the last day of the certification period. Ensure the client's normal benefit is not interrupted.

SNAP households may use any appropriate application for timely recertifications.

When the recertification is received, the RCRT function must be started in the computer system within two business days of receipt.

The case manager must evaluate all information provided on the recertification application, regardless of the application form submitted, and any changes reported by the household or discovered by the agency through other sources. Verification of any unverified eligibility factors must be requested at the interview or by mail (when an interview is not required) allowing the household at least 10 days to provide the requested information.

If the recertification is held pending verification, allow the household until the end of the current certification to provide the required proof before taking adverse action for failure to provide information.

To reapply timely, the household must submit the completed application form by

- the **15th** day of the last month of the certification period, or
- the **17th** day after the notice date for one or two month certifications.

Note: If the 15th of the month falls on a weekend or holiday, the household has until the next business day to submit a timely recertification.

If the RD application or the requested verification is not provided, send a notice on the workday after the due date to terminate the case.

If the timely recertification appointment is missed and a second appointment is requested, schedule one before the last day of the month, if possible. Deny the recertification on the last day of the last month if the

- household fails to contact the office for another appointment, or
- the household requests another appointment, but one cannot be scheduled before the end of the last month.

123 Processing Untimely Recertifications

Use initial application time limits and procedures for recertifications that are not received in the local office within the time frames.

The household must reapply within the last 45 days of the certification period, or later, to be recertified. Recertifications received more than 45 days prior to the end of the recertification period will not be treated as a valid recertification. The application may be used to update case information.

124 Timely Recertification Cooperation Established Within 30-Day Period

Timely recertifications denied or terminated due to non-cooperation with an interview or request for information (RFI) must be reinstated if the household cooperates within thirty (30) days after the last day of the ending certification period. Good cause for not cooperating is not required. This 30-day period is referred to as the "Window of Opportunity" (WOO) period. If the case is reinstated under WOO policy, benefits are prorated from the date of cooperation.

If the client provides good cause as to why they did not cooperate with the original request or interview appointment, reinstate the case without prorating benefits.

To avoid possible quality control discrepancies, the reason for reinstatement due to good cause or the WOO period **must be documented/narrated** in the case record.

For example: A good cause reason (not all inclusive) can be:

- illness, hospitalization, or surgery,
- family emergency,
- employment conflicts,
- death, and

Other barriers such as lack of:

- child care, or
- transportation problems, or
- inability to obtain information or replace verification, or
- inability to access the Welfare office due to some disaster, or
- United States or other postal service problems causing delays in mail service, or
- agency discrepancies or system problems.

All of the above would be considered good cause reasons to reinstate a case.

Households, who fail to cooperate within the 30-day window, do not meet "good cause" for reinstatement. If they file an application within the 30-day time frame, process as a new application with a new issuance date. Filing an application form within the 30-day extension period is not considered cooperation.

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Issuing Benefits

210 TYPES OF BENEFITS

1. Initial — the first month for which a benefit is issued. Untimely SNAP recertifications are processed like an initial (new) application.
2. Prorated — the benefit issued for the initial application month is based on the application date for SNAP or the date of approval/30th day, whichever comes first, for TANF.
3. Supplemental — additional benefits for the current or future month provided to a household when initial or monthly benefits have already been issued.
4. Retroactive — initial benefits issued for a month before the month the application is approved.
5. Restored — all other full- or partial-month benefits owed a household for a past month. These benefits can be used to offset claims against a household.
6. Replacement — benefits reissued due to circumstances resulting in a loss of all or part of the original benefit.
7. **30-Day – Window of Opportunity – Cooperation** — Timely SNAP recertifications that close due to noncooperation and later cooperate within the 30-day window of opportunity beginning with the first day after the certification end date are processed as a timely recertification, not a new application. These households receive benefits for this month based on the date of cooperation. For example, a household files a timely recertification to continue May 1 SNAP benefits, but fails to cooperate. The certification ends April 30. The 30-day window of opportunity is May 1 through May 30. The household cooperates on May 15. Benefits are prorated and issued from May 15, unless good cause for reinstatement is applicable.

220 BENEFIT ISSUANCE METHODS

TANF benefits can be issued by one of three methods:

- EBT
- Direct Deposit
- Check

All SNAP benefits are issued by EBT. Food Stamp coupons were de-obligated in June of 2009.

220.1 Benefit Amount

- The amount of the benefit is based on the assistance unit size and net income.
- Issue benefits for less than $10 only for
  - supplemental payments, and
  - payments made after recoupment is processed.

- A household allotment (benefit) is based on household size and net income.
- The system will not issue benefits for $1, $3, or $5, and will round up these benefits to $2, $4, or $6.

230 AUTHORIZING BENEFITS

TANF and SNAP benefits are authorized by the case manager when they post an eligible version for the program in the system.

230.1 Issuance of Benefits via Electronic Benefit Transfer (EBT)

EBT is a system which allows a recipient to authorize transfer of their government benefits from a federal account to a retailer account to pay for products received.

When a household is certified to receive either TANF or SNAP benefits, their benefit amount is deposited into their EBT account each month. They access their account by use of an EBT card and Personal Identification Number (PIN).

The EBT card is a plastic card similar to a debit or credit card. When paying for groceries other services, or to access funds from their TANF benefits, the EBT card is swiped through a Point-of-Sale (POS) terminal, and the recipient enters their PIN to access the account. The processor verifies the PIN and the account balance, and sends an authorization back to the retailer/individual. The recipient's account is then debited for the amount of the purchase/withdrawn amount. The recipient will receive a receipt indicating the amount of the debit and the balance of their remaining benefits.

230.2 EBT Benefit Availability

EBT issuances are transmitted to the EBT contractor each business day. Newly approved benefits are deposited into the EBT account by 7:00 a.m. the next morning, and are immediately accessible with a valid EBT card and PIN. Monthly EBT issuances are available on the issuance effective date regardless of holidays or weekends.

Note: Newly approved benefits authorized (posted) on a Saturday or Sunday are transmitted to the contractor on Monday and will be available by 7:00 a.m. Tuesday morning. Holidays will result in early transmission of benefits records to ensure access to benefits are not delayed.

230.3 EBT Card Issuance

EBT cards are issued over-the-counter by authorized staff in each district office. EBT cards may be issued at any time during the application process, but no later than the day benefits are approved. Reasonable efforts should be made to issue the card at application or interview to minimize the number of visits to the office.

When an EBT card is issued, applicants and/or their Authorized Representative (A/R) are provided the EBT Instruction Documents; these forms provide information about EBT cards and instructions on how to use the card to access benefits. Applicants and/or their A/R acknowledges by signing and dating Form 2321-EGB, they:

- understand their Rights and Responsibilities;
- received training on the use of the EBT system, including the purpose of the card;
- have been provided notification of the fees for EBT withdrawals in Automated Teller Machines (ATM's);
- understand the appropriate use of SNAP benefits;
- understand the appropriate and restrictive access of TANF NEON and TANF Child-Only benefits along with the consequences that restricted usage may result in the assignment of benefits to a protective payee who will receive future benefits on behalf of the assistance unit; and
- understand what illegal usage is and the penalty for illegal use.

A copy of this form is provided to the client and one is kept in the casefile.

When the applicant or their Authorized Representative is not available in person to sign the form acknowledgement, the case manager will mail the form to the household and indicate in the casefile the date the form was mailed.

Note: Benefits only become available once the household is approved for assistance and the benefit amount is transmitted to their EBT account.

230.3.1 EBT Card TANF Restricted Use

Effective January 1, 2014, TANF NEON and TANF Child-Only EBT benefits cannot be accessed from ATM machines or used to purchase items in the following locations:

- casinos;
- gaming establishments;
- liquor stores; or
- retail establishments which provide adult entertainment.

The EBT Coordinator in the Investigations and Recovery (I & R) unit will provide a quarterly report of POS/ATM TANF cash usage. The report will be used to review for EBT use in prohibited locations.

The office managers or their designees will be notified of the report results and when restricted use is detected on the quarterly report.

Note: If a household has used its EBT card in a prohibited location, the District Office Manager or their designated staff may consider, on a case-by-case basis, whether the use in a restricted location was the household's only means available to obtain their TANF benefits. If so, DWSS may consider lack of access as reasonable cause and not impose an adverse action on the household. However, the prohibited POS/ATM location will still be prohibited, and DWSS will continue to work to fulfill our federal requirement to provide recipients adequate access to their cash assistance in non-prohibited locations, including the ability to withdraw their assistance with minimal fees at no charge.

When restricted usage is detected, a warning letter must be sent to the household indicating the benefits provided are to cover a family's ongoing basic needs such as shelter, utilities, food, clothing, etc., and if another restricted usage is determined, they will no longer receive the cash benefits and instead a protective payee (someone they may select) will be established to receive the cash benefits on their behalf to ensure the family's basic ongoing needs are met.

Considering adverse action, the District Office is responsible for ensuring a "Protective Payee" (whom they may choose) meets the requirements to receive the benefit amount for the assistance unit once restrictive usage is determined the second time. If a protective payee is initiated and the case is later closed or is terminated and the household reapplies for TANF cash, the assignment of a protective payee is required to receive the TANF cash benefit through EBT.

230.4 Over-the-Counter (OTC) Card Issuance

EBT card issuance staff will issue a card in the district office by:

- ensuring, the applicant or their A/R has signed and understands Card Issuance Authorization Form 2321-EGB;
- swiping the EBT card through a Card Reader device. This action allows the system to "read" the card number and enter it into the EBT system;
- entering the Individual Case Identification (ICI) Number in the EBT Administration Terminal;
- allowing the applicant to select a PIN type from the following:
    - 01 - No PIN
    - 02 - Use Prior PIN
    - 04 - Year of Birth
    - 06 – Last 4 digits of Card Number
- verifying applicants have received their EBT Instruction Documents; and
- ensuring all of the household's questions regarding the use of their EBT card are answered, and they are ready to access their benefits.

230.5 EBT Card Issuance by Mail

EBT cards may be mailed directly from the EBT contractor if the applicant or the caseworker indicates visiting the local office is a hardship. This includes, but is not limited to applicants who:

- are elderly;
- are ill or disabled;
- live in extreme rural areas; or
- have no reasonable means of transportation.

When a card is mailed it will be sent in a cardholder with instructions for selecting a PIN by telephone and includes training materials describing how the recipient can access benefits.

Do not order an EBT card if a card has already been mailed to the correct address within the last five (5) days. If a new card is requested, the previous card will automatically be canceled (statused), making it unusable. If the recipient subsequently receives the canceled card in the mail and attempts to use it, the transaction will be refused.

Example: On Monday, the case manager requests a mailed EBT card. On Wednesday, the recipient calls and reports they have not received the card and another card is requested. When the contractor mails the card requested on Wednesday, the original card is canceled (statused). On Thursday, the recipient receives the original card and goes to the grocery store where their transaction is refused. Unfortunately, the recipient must now wait for the card requested on Wednesday to arrive before they can access their benefits.

230.6 Who Receives an EBT Card

One EBT card is provided for each TANF case.

For TANF households, the card may be issued to:

- the applicant;
- relative caregiver for Child-Only cases (i.e., an ineligible parent(s) or a relative caregiver);
- another adult household member included in the assistance unit;
- their designated Authorized Representative; or
- a protective payee when it's determined EBT benefits have been used in restricted areas at a POS/ATM. The head-of-household may select the protective payee to receive the benefits. See manual section B-300 when an individual cannot be a protective payee.

One EBT card is provided for the head-of-household in each SNAP case. The card may be issued to:

- the head-of-household;
- the head-of-household's spouse, as long as the spouse is a member of the SNAP household; or
- an authorized representative appointed by the head-of-household.

Social Welfare Managers and Family Services Supervisors may authorize card issuance to individuals not listed above; when a hardship exists and an exception is necessary to ensure the household has access to benefits.

Example: The head-of-household has been in an auto accident and is unable to appoint an Authorized Representative. A relative is caring for the children, but needs access to the household's benefits to provide for the children.

The head-of-household may allow an authorized representative or other household member to use the card at their discretion; but the head-of-household remains responsible for all benefits accessed with the EBT card.

Under special circumstances, the head-of-household may request and be approved to have a second "active" EBT card issued to their Authorized Representative. This card will access the same benefit account, but have its own associated PIN selected by the Authorized Representative.

The case manager may approve the Authorized Representative for their own EBT card if:

- a written request is made by the head-of-household,
- the authorized representative does not reside with the head-of-household, and
- the household presents compelling reasons for the necessity of an additional card.

Example: An elderly recipient's Authorized Representative (A/R) lives across town and does the majority of the household's shopping at a grocery outlet close to A/R's home. After shopping, the A/R then delivers the groceries to the recipient. It would be inconvenient for the A/R to travel across town to pick up the EBT card, shop and then return with the groceries. In addition, the recipient does not wish to give the A/R her card as they often pick up fresh milk and vegetables at a local market.

There will be no more than two "active" EBT cards for one benefit account at any one time.

240 INDIVIDUAL CASE IDENTIFICATION (ICI) NUMBER

The Individual Case Identification (ICI) number is assigned by NOMADS when a case is registered and is displayed on the APPL screen. When an EBT card is issued, the ICI links the card to a case with the electronic benefit account. The ICI is also used by the system when transmitting the demographic file and the benefit file to the EBT provider.

Note: An EBT card cannot be issued until the case is registered in NOMADS, and an ICI number is generated by the system.

250 PERSONAL IDENTIFICATION NUMBER (PIN)

The Personal Identification Number (PIN) is a four-digit numerical code the recipient selects to access their electronic benefit account.

An EBT card cannot be used to access the benefit account without the PIN. This prevents unauthorized individuals from accessing the recipient's benefits should the card be lost or stolen.

When a card is issued over-the-counter, a PIN is chosen by the applicant/recipient at the district office. When a card is issued by mail, the recipient will choose a PIN by phone.

Households should be advised to keep their PIN secure by:

- choosing a number no one else could easily guess;
- only giving their number to those they trust to access their benefits on their behalf (i.e., authorized representative or spouse);
- keeping the number secret from everyone else;
- not letting anyone see them enter the number on a POS device;
- not writing or keeping the number on or near the card; and
- changing the number immediately if it may have been compromised.

Note: Division staff never choose, view or have access to the household's PIN.

250.1 Changing the PIN

Individuals may change their PIN at any time. To change the PIN, they must visit the EBT authorized personnel in the district office or call JP Morgan directly at 1-866-281-2443 to change their PIN.

260 MAILING ADDRESSES

Ensure benefits are only mailed to the household's home address in Nevada.

Exceptions:

- The household is temporarily living at another address.
- The household has a post office box or general delivery address.
- The household has an alternate payee (enter the alternate payee name and address on the ALTP screen).
- The household provides a good reason for a different mailing address, showing they would suffer hardship if benefits were mailed to their home address.
- No checks or Medicaid cards are mailed out-of-state without prior approval by the Chief of E&P.

DO NOT send benefits to a Division employee's home address (unless the employee is an applicant or recipient).

SNAP households must be living in Nevada. There is no durational residency requirement in SNAP.

Nevada SNAP households may access or receive benefits out of state as follows:

- Once approved, Nevada SNAP households can access their SNAP EBT account from any point of sale (POS) location in- or out-of-state that accepts the Nevada Quest card.

  SNAP benefits can be accessed for up to 365 days from the date the benefit became available. Unused benefits are expunged and reported to Food and Nutrition Service (FNS) after 365 days.

*******IMPORTANT*******

Update the mailing address as soon as a change is reported. If a reported change of address is not updated by cutoff, the notice of decision and/or Medicaid card will be mailed to the old address. The TANF and SNAP EBT card will also be returned if the address is not updated.

When a household reports a change in address, ALWAYS review the case to determine if there is an alternate payee, and update the address on the ALTP screen at the same time if required.

270 REPLACEMENT OF EBT CARDS

An EBT card is valid until canceled by the household. As long as the applicant has a valid EBT card, do not issue another one.

If an EBT card is lost, stolen, damaged, or the recipient no longer wants the Authorized Representative (with an authorized card) to access their account, it is the recipient's responsibility to report the circumstances as soon as possible.

Recipients are instructed to report lost/stolen cards immediately by calling the Division's Voice Response Unit (VRU) at (775) 684-7200 or (702) 486-1646 and selecting the lost/stolen option. They will be routed to the EBT contractor's 24-hour, 7-days/week, Service Center for assistance. They may also call the EBT contractor directly at 1-866-281-2443 to report a lost/stolen card. Once reported, the benefit account is immediately "frozen" to prevent an additional loss of benefits. **Benefits accessed with a lost/stolen card prior to being reported cannot be replaced**.

A new card is mailed within 24-48 hours, depending on weekends and holidays, of the reported loss. During normal business hours, the recipient is asked to come to the office with identification to be issued a replacement card. After hours, they will be asked by the Service Center if they would like to have a new card mailed, or if they prefer to visit their local district office on the next business day. Once the recipient is issued their new EBT card, the account is reactivated.

280 REPLACING BENEFITS

TANF and SNAP benefits on an EBT card may be replaced if the client or agency can demonstrate the card was stolen and benefits were used by a person who was not authorized by either the client or the agency. In order for this to happen, the person using the benefits fraudulently must have obtained the PIN from some source other than the client willingly giving them the PIN. Have the client complete Form 2305-EF to request replacement of stolen benefits.

Replacing TANF and SNAP Benefits in an EBT Account

The security of benefits deposited in an EBT account is the responsibility of the head-of-household. They may protect their benefits by storing their EBT card in a safe place, keeping their Personal Identification Number (PIN) secret and separate from the card, keeping their EBT receipts as proof of benefits used, and reporting lost/stolen cards immediately so account access is restricted until a new card is issued and the lost/stolen card is canceled (statused).

TANF and SNAP benefits ARE NOT replaced when benefits in an EBT account are used prior to the head-of-household reporting a card as lost or stolen, or prior to requesting the cancellation of an authorized representative's card to the EBT contractor or EBT specialist.

No benefits will be replaced or restored if the client gives or sells their PIN number and card to another person. Benefits will be replaced and/or restored if the agency, contractor or retailer causes a benefit discrepancy and this is verified. This includes benefits used by an authorized representative, spouse, boyfriend, girlfriend, children, other household members, houseguests, friends, and strangers. If a card is stolen, benefits cannot be accessed unless the person knows the PIN.

Exceptions: TANF and SNAP benefits in an EBT account may be replaced at the discretion of the Chief of Eligibility and Payments, Chief of Investigations & Recovery, and/or the Eligibility and Payments program specialists when:

- a mailed EBT card is reported as lost in the mail (never received), and benefits were fraudulently accessed by someone other than a household member.
- benefits were incorrectly debited by a retailer.

  The recipient has ninety (90) days from the date of the error to report an EBT balance problem. EBT staff have ten (10) business days from the date the household reports a problem to investigate the issue and reach a decision. If the claim is substantiated, a benefit adjustment will be made to the account. If reported after ninety (90) days, there will be no benefit adjustment.

- benefits are accessed AFTER the head-of-household has requested the cancellation of a card.

  The EBT contractor is required to immediately cancel (status) a card when it is reported lost or stolen, or the head-of-household has requested their authorized representative's card be canceled.

  If the contractor fails to cancel the card when requested by the household and benefits are subsequently lost, they must be replaced.
- The aforementioned individuals deem the household's particular circumstances warrant such a replacement.

When a recipient reports a loss of TANF or SNAP benefits in an EBT account, refer them to an EBT specialist. The EBT specialist will research the circumstances of the loss and request authorization for replacement, if deemed appropriate.

280.1 Replacement of Check

Non-Receipt of TANF Check

When a recipient reports that a check was not received, the case manager must determine if;

- the missing check was issued, and
- the check has not been returned.

If the check has not been returned, Form 1060, Affidavit – General and Forged, must be completed by the case manager and the recipient.

The case manager completes Section 1 and the recipient must complete Section 2 and Section 4. Section 5 must be completed by a Notary.

Check Received but later Lost, Stolen, Forged or Defaced.

When a recipient reports that a check was received but was later lost, stolen, forged, or defaced, Form 1060, Affidavit – General and Forged, must be completed by the case manager and the recipient.

The case manager completes Section 1 and the recipient must complete Section 3 and Section 4. Section 5 must be completed by a Notary. If the recipient reports the check was defaced, the case manager must obtain the check and forward it with the affidavit.

Once the form is completed, the original must be forwarded to the Accounting Unit in Central Office for processing. A photocopy must be maintained in the case record and a photocopy given to the recipient.

Once a determination has been made that the check has not been returned or cashed, the Accounting Unit will notify the case manager that the check can be canceled and reissued on the NOMADS BMNT screen.

If the warrant **has been cashed:**

- the reissue process is suspended until the original check is returned to Central Office Accounting
- Central Office Accounting forwards the check in question, along with completed Form 1060 to the Investigations and Recovery Unit.

I&R will notify the case manager when or if a check can be reissued.

Note: If the household reports cashing or receiving the original check before it is reissued, immediately notify Central Office Accounting or Investigations and Recovery.

290 EBT Card Destroyed in Household Disasters

When the household requests replacement of an EBT card destroyed in a household disaster, issue a new card as soon as possible.

291 Destroyed Food

When a household reports food purchased with SNAP benefits has been destroyed in a household disaster, issue a replacement unless:

- the household failed to report the loss within 10 days of the disaster, or
- the household was issued benefits using FNS-approved disaster issuance procedures during the same month as the replacement request.

If the reissuance is authorized the following action is taken:

1. The household must complete the Affidavit of Claimant, Form 2305-EFD;
2. The disaster is verified through a collateral contact, such as the fire department, Red Cross or a home visit. The loss must be reported within 10 days of the date of the disaster.
3. Reissue the benefits, not to exceed a one-month allotment.

Note: There is no limit to replacements of destroyed food.

292 USING THE EBT CARD

The EBT card may be used at any location displaying the QUEST logo, including grocery stores and ATM machines.

The TANF benefit can be used at a point of sale (POS) device to make cash purchases and receive cash back with no additional fees, depending on each store's policy. They may also withdraw cash from an ATM; however, there is an $.85 fee with additional surcharges, depending on the ATM used. There are no additional surcharges when using an ATM owned by Chase.

The SNAP benefit may only be used to pay for food through a point-of-sale (POS) device located at the cash register. Once groceries are totaled, the recipient will choose the EBT option, swipe the card and enter their PIN. The system verifies the account has sufficient funds to cover the purchase and authorizes transfer of the funds from the account to the retailer. A receipt will be provided after each transaction and will indicate the amount debited and the remaining balance in the EBT account.

A paper voucher system may be used to purchase food if the EBT system is offline, or the SNAP authorized retailer does not have a POS device (i.e., small grocery outlets, farmer's markets, group homes). Retailers are provided with specific instructions for the voucher system, and may call the EBT Retail Service Center if they have additional questions.

293 EBT TRAINING AND RECIPIENT RESPONSIBILITIES

During the application interview, the case manager will provide the applicant with EBT training materials and review the following with them:

- using their EBT card;
- finding retailers, which accept the EBT card by looking for the QUEST logo;
- finding their benefit balance by checking their last receipt;
- securing their card and protecting their secret PIN; and
- reporting lost/stolen cards by calling the numbers provided in the training material.

The recipient is advised **NOT TO**:

- write the PIN on the card;
- keep the PIN with the card;
- tell anyone their secret PIN, unless they want to give access to all of their benefits to another person, such as an authorized representative;
- bend or fold the card;
- scratch or write on the black strip on the back of the card;
- wash the card or get it wet;
- leave the card near magnets, TVs, stereos, VCRs or microwaves; or
- leave the card in the sun or other hot place, like the dashboard of a car.

EBT card issuance staff verifies the head of household has received the EBT training materials and understands their rights and responsibilities as part of the card issuance process by ensuring they have signed Card Issuance Form 2321-EGB.

294 EBT DORMANT/INACTIVE ACCOUNT STATUS

An EBT SNAP account which is not accessed by the household for one hundred eighty (180) days is considered inactive. A daily report of inactive accounts is generated and reviewed by EBT staff. EBT staff attempt to contact each household on that day's report with an account balance of $100 or more to determine if the household has encountered some barrier preventing benefit access, is still alive or is still residing in state.

If the head of household is not contacted, the account and card will be "statused" and noted (CLOG) in NOMADS. When an account is statused, the household must contact the office for account reactivation and card replacement. Account access MAY NOT be withheld from the household for any reason, including, but not limited to, non-cooperation with eligibility requirements, potential or established overpayments, fraud investigation, etc.

An EBT SNAP account which is not accessed by the household for three hundred sixty (360) days becomes dormant. The system automatically locks the account, which denies the household access to any benefits remaining in the household's account. At this time, any pending debts are collected from the household's account. The system will attempt to satisfy the debt with benefits remaining in the account and unresolved debt is retained pending further availability of benefits.
Unlocking the household's account requires the household contact the office and may be reversed by EBT staff. Actions regarding a dormant account are entered into NOMADS, either automatically (I&R system [type 6 payment]) or by staff (CLOG).

295 EXPUNGEMENT

Benefits are available to the household based on the "period of intended use". When the period of intended use has expired, the benefits are expunged from the account and may not be reissued or restored.

The period of intended use for TANF benefits is 180 days from issuance.

The period of intended use for SNAP benefits is 365 days from issuance.

296 REPAYMENT OF A SNAP CLAIM USING SNAP BENEFITS HELD IN AN EBT ACCOUNT

The head-of-household may choose to use SNAP benefits held in their EBT account to reduce or eliminate the balance of an established SNAP claim. Refer to manual section B-960 for specific policy and instructions.

Benefits due to be expunged will automatically be applied to any open SNAP claim before being reported/returned to FNS.

297 CONFERENCES AND HEARINGS REGARDING EBT ISSUES

Applicants have the same rights to conferences and hearings regarding EBT issues as they do for any other decision or issue. When the issue in question is related to EBT, the hearing representative should request an EBT specialist participate in the hearing process.

298 CANCELLATION/STATUS OF EBT CARDS UPON DEATH OF THE ENTIRE SNAP/TANF HOUSEHOLD

When the case manager receives notification the **entire** SNAP or TANF household is deceased, the case must be terminated as soon as administratively possible. After case termination the case manager must contact the EBT Specialist to status the EBT card. The EBT Specialist will status the EBT card and deactivate the EBT account. This will ensure improper use of the deceased individual's/household's SNAP or TANF benefits does not occur.

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Special Households

410 BOARDERS

411 Eligibility Requirement

A boarder is a person residing with a household who provides meals or meals and lodging in exchange for money (reasonable compensation).

To receive SNAP, a boarder must participate with the household. A boarder cannot participate as a separate household.

A boarder may be eligible as part of the household providing the board if:

- they are otherwise eligible, and
- the household requests the boarder be included.

Note: Boarders living in a commercial boarding house cannot participate in SNAP.

411.1 Individuals Not Considered Boarders

Do not consider the following people as boarders:

- children of the household under age 22; however, this provision does not apply to foster children,
- siblings,
- spouses, and
- individuals furnished both meals and lodging but paying less than reasonable compensation. They are members of the household providing meals.

Exception: A child or adult in foster care may be a boarder unless they are included in the household with other members.

411.1.1 How to Determine Reasonable Compensation

Reasonable compensation is a monthly amount

- equal to the full SNAP allotment for the number of boarders, or
- equal to two-thirds of the full allotment for the number of boarders if the household furnishes two meals or less a day.

Count only the amount paid for meals if it can be separated from lodging. If the amount cannot be separated from lodging, evaluate the total payment.

412 Boarders as Household Members

If the household includes a boarder (including a child or adult in foster care) as a household member,

- count all of the boarder's income, resources, and deductions, but
- do not count the payment from the boarder as income.

413 Boarders That Are Not Household Members

- Do not count their income and resources; and
- Count the boarder's payment as self-employment income for the household (except foster care payments as stated in manual section A-737).

420 DISQUALIFIED/EXCLUDED/INELIGIBLE MEMBERS

421 Members Disqualified, Excluded or Ineligible because of Ineligible Non-Citizen Status, SSN Disqualification or Ineligible ABAWD Status

421.1 Reasons for Disqualification/Exclusion

Disqualify/Exclude household members who are ineligible because they

- Do not meet Social Security enumeration requirements (noncompliance or voluntary request to comply other than for religious beliefs or good cause reasons)
- Are a non-qualified non-citizen (including non-citizens awaiting sponsor information or proof of sponsor information).
- Are an ineligible ABAWD due to 3-month time limit.

421.2 Resources

Count all nonexempt resources in full of the disqualified/excluded members listed in B-421.1 who would **otherwise be a required** household member.

Do not count the disqualified/excluded member when determining which resource limit applies to the household.

421.3 Income and Earned Income Deductions

421.3.1 Income

Enter the countable gross income of the disqualified/excluded member(s) who is an **otherwise required** household member in the system in the same way as for other household members. The disqualified/excluded household members' income is prorated among all members, including those disqualified, and only the eligible members' portion is budgeted.

Note: Count in full any cash contributions to the household from a non-household member.

421.3.2 Earned Income Deduction

Apply the deduction **only to the portion** of a disqualified/excluded member's countable earned income that is prorated in the household, and apply it in full to the earned income of remaining members.

421.4 Household Deductions

Standard Deduction —

The household is entitled to this deduction in full.

Child Support expense, Dependent care, shelter costs except the Standard Utility Allowance (SUA) —

Prorate if expenses (other than SUA) are **billed to or paid by** the disqualified/excluded member, or they are jointly responsible for the expenses. **The expenses are divided equally** among all household members. Count the eligible members' share in the household budget.

Count in full (do not prorate) if an eligible member pays the expenses.

Do not prorate the Utility Allowance (UA). Assign the UA to an eligible member (age is not a factor). See manual section A-778.5.1, Utility Allowance (UA), for examples.

Homeless Shelter Standards - Prorate the standard if the household claims the standard allowance, regardless of who the expense is billed to or paid by.

421.5 Medical/Excess Shelter Deductions

Medical —

Prorate the medical bills of a disqualified/excluded member listed in B-421.1.

Unlimited Excess Shelter —

The household is eligible for this special provision if the disqualified/excluded member is the only person who qualifies for it.

421.6 Income Test and Household Size

Do not include the disqualified/excluded member in determining the household's income limits or the amount of the allotment.

421.7 Adverse Action

If a member is disqualified/excluded while certified, notify the household allowing adverse action before disqualifying/excluding a person for failure to comply with SSN requirements, being an ineligible non-citizen or an ineligible ABAWD. The 13-day adverse action notice must explain the reason for the disqualification/exclusion and what the person has to do to become qualified, and the benefits of remaining members. All SNAP household benefits are from the 1st through the last day of the month so the adverse action date will be the same date for all cases. Ongoing benefits are available in the EBT account the first day of each month. The adverse action date is displayed on the SUMM and STAT screens. See manual section C-260 — SNAP Adverse Action Dates.

The adverse action date count begins with the last day of the month and counts backward (e.g., issuance ends 3/31/02, adverse action cut-off is 3/19/02). Computer action must take place no later than this date. However, to meet adverse action notification requirements, computer posting must occur 14 days prior to the affected benefit, unless a local print is done on the actual adverse date. Include holidays and weekends in the adverse action count.

421.8 Reserved

421.9 Ending Disqualification

When a disqualified/excluded member becomes eligible, add them to the household the month following the end of the disqualification/exclusion. Depending upon the type of change in circumstances, a supplemental issuance may be applicable.

To add a previously disqualified member:

- change the disqualified/excluded member to a participating member code in the computer, which also stops proration of their income and expense; and
- complete/update other necessary computer screens.

421.10 Verification

Disqualified/Excluded members (otherwise required members) are considered part of the household although not allowed to participate. Their circumstances, including income and resources, are subject to verification the same as any other member.

422 Members Disqualified Because of Intentional Program Violation (IPV), Noncompliance with the SNAP Employment and Training Program, Fleeing Felon or Drug Related Felon

Members disqualified because of Intentional Program Violation (IPV), conviction of a drug related felony, status as a fleeing felon or in noncompliance with SNAP Employment and Training Program requirements are still considered part of the household although not allowed to participate. Their circumstances, including income and resources, are subject to verification the same as any other member. The remaining members may participate if eligible.

422.1 Resources

Count all nonexempt resources of a disqualified member listed in B-422.

422.2 Income and Earned Income Deductions

Count all income and expenses of a disqualified member. The disqualified member is entitled to the 20% earned income deduction.

422.3 Shelter and Medical Deductions

The household receives the excess shelter and medical deductions even if the disqualified person listed in B-422 is the only elderly or disabled person in the household. Even though the household can receive uncapped shelter deductions, both the gross and net income tests must be passed if the disqualified/excluded person was the only elderly or disabled person in the household.

Do not count the disqualified/excluded person in determining the household's size, resource or income limits.

422.4 Adverse Action

A notice of adverse action is not required when disqualifying a member for intentional program violation (IPV); however, notify the household, allowing adverse action, when disqualifying a member for a felony drug conviction, fleeing felon status or SNAP Employment and Training Work Program noncompliance. To meet the advance notice requirements, notice of an action to reduce or terminate benefits must be taken (posted) in the computer at least 14 days in advance to ensure the computer-generated notice is mailed on time. If case circumstances require a local notice print, posting can be done on the 13th advance notice date. When counting the 13-day advance adverse action notification period, weekends and holidays must be included.

422.5 System Entries for Intentional Program Violations (IPVs)

Refer to the NOMADS User Task Guides instructions to end a disqualification period for Intentional Program Violation (IPV),

- change the disqualification code in the system to an eligible code for the applicable footer months; and
- update other applicable computer screens to reflect the newly eligible member.

422.6 Ending IPV Disqualifications

The person previously disqualified for an IPV is added to the household the month after their disqualification ends.

430 ELDERLY OR DISABLED HOUSEHOLDS

431 Definition of Elderly

SNAP defines an elderly person as someone who will be age 60 or older as of the last day of the month of application. If the client turns 60 years of age during the certification period, the system will automatically update the case. These households are allowed specialized budgeting (see manual section B-433) and their resource limit increases to $3,250.

432 Definition of Disabled

The following individuals are considered disabled:

- Individuals receiving or approved to receive SSI or Social Security disability payments.

- Veterans receiving VA benefits because they have a 100% service-connected disability according to the VA, need regular aid and attendance or are permanently housebound.

- Surviving spouses of deceased veterans who meet one of the following criteria according to the VA:

  – need regular aid and attendance,
  – permanently housebound, or
  – approved for VA benefits because of the veteran's death and could be considered permanently disabled for Social Security purposes. (See manual section B-432.1 for Social Security's criteria for permanent disability.)

- Surviving children (any age) of a deceased veteran who the VA
  – has determined are permanently incapable of self-support, or
  – has approved for benefits because of the veteran's death and considered permanently disabled for Social Security purposes. (See manual section B-432.1.)
- Individuals receiving federal, state or public disability retirement benefits for a disability considered permanent under Social Security standards.
- Individuals receiving Railroad Retirement Disability who are also covered by Medicare.
- Individuals receiving interim assistance (IA) benefits pending the receipt of SSI.

- Individuals approved for Medical Assistance to the Aged, Blind and Disabled (MAABD).
- Individuals receiving disability benefits from any other state or private employment source, which uses criteria at least as stringent as those used by the Social Security Administration.

Note: Those who qualify for a disability benefit but due to an overpayment recoupment receive no payment, are considered disabled.

Households with a disabled member are allowed specialized budgeting the same as households with elderly members and have a resource limit of $3,250.

432.1 Social Security's Criteria for Disability

The Social Security Administration determines any of the following 12 conditions result in permanent disability:

- Permanent loss of use of both hands, both feet, or one hand and one foot.
- Amputation of leg at hip.
- Amputation of leg or foot because of diabetes mellitus or peripheral vascular diseases.
- Total deafness, not correctable by surgery or hearing aid.
- Statutory blindness, unless caused by cataracts or detached retina.
- IQ 59 or less, established after the person becomes 16 years old.
- Spinal cord or nerve root lesions resulting in paraplegia or quadriplegia.
- Multiple sclerosis in which there is damage to the nervous system caused by scattered areas of inflammation. The inflammation recurs and has progressed to varied interference with the function of the nervous system, including severe muscle weakness, paralysis, and vision and speech defects.
- Muscular dystrophy with irreversible wasting of the muscles, impairing the ability to use the arms or legs.
- Impaired renal function caused by chronic renal disease, resulting in severely reduced function which may require dialysis or kidney transplant.
- Amputation of a limb of a person at least 55 years old.
- Acquired Immune Deficiency Syndrome (AIDS) progressed so it results in extensive and/or recurring physical or mental impairment.

Some of these conditions are obvious and their existence is evident by observation. Others may require the opinion of a physician and/or staffing with the Chief of Eligibility and Payments and/or SNAP Program Specialist. **Do not** send a referral to NMO, as they no longer make medical determinations for SNAP.

Note: Many people with one of the 12 conditions might already receive SSI or Social Security blindness or disability payments, or their disability is obvious (such as amputation of leg at hip). **For example**, a veteran's surviving spouse who also receives SSI already qualifies as disabled under manual section B-432, Definition of Disabled. There is **no need to prove** Social Security permanent disability.

433 Special Provisions for Elderly or Disabled Households

Households with an elderly or disabled member receive special treatment. The special provisions are

- **Income tests** — households with elderly or disabled members **are exempt** from the gross income test.
- **Medical deduction** — households with an elderly or disabled member who has medical bills that exceed $35 a month are entitled to a medical deduction.
- **Excess shelter** — households with elderly or disabled members receive an excess shelter deduction for the full monthly amount that exceeds 50% of the household's monthly income after the allowed deductions.
- **Resources** — households with a **disabled** or **elderly person** have a resource limit of $3,250.

434 Verification

An elderly or disabled person who claims separate household status must provide the information needed to determine if they are elderly or disabled.

440 Reserved

450 PARTICIPANTS IN SPECIAL PROGRAMS

451 Alcoholic/Narcotic Treatment Centers

451.1 Eligibility Requirements

Alcoholics or narcotic addicts who regularly participate as residents in a center that conducts a drug or alcoholic treatment program may apply if the treatment center meets either of the following criteria:

- The center is authorized by USDA - Food and Nutrition Service (FNS) to accept SNAP benefits, or
- The center is a private, nonprofit organization or institution or a publicly operated community mental health center that is approved by the Nevada State Substance Abuse Prevention and Treatment Agency (SAPTA).

Determine eligibility using the same income and resource standards as other households.

Note: Include the child(ren) of the narcotic addict or alcoholic in the household if they live together at the treatment center. However, children residing in the center who receive treatment must apply as a one-person household.

The center **must act as authorized representative**.

Residents who are not regular participants in a treatment or rehabilitation program are not eligible. **Document/Narrate the reason for ineligibility in the CLOG or other designated computer screen(s).**

451.2 Worker Responsibilities

For alcoholics or narcotic addicts participating at treatment centers,

1. verify the center meets one of the criteria in manual section B-451.1;

2. give the center application and change reporting forms, etc;

3. obtain a signed list of participants on a monthly basis;

4. conduct periodic random on-site reviews of the centers to ensure the accuracy of the monthly listings.

   During these visits, document

   - date of the visit,
   - number of residents, and
   - proof of certification.

5. Report any suspected misuse of SNAP benefits by the center to the supervisor or Office Manager.

451.3 Office Manager Responsibilities

1. Report misuse of SNAP benefits in centers certified by USDA to

   Officer in Charge, Supplemental Nutrition Assistance Program
   Food and Nutrition Service, USDA
   360 East 2nd Street, Ste. 705
   Los Angeles, California 90012

Do not take any further action on a facility certified by USDA before USDA's action. Compute over issuances for the individual residents as appropriate.

2. Report misuse in centers certified by state agencies to the Investigations and Recovery (I&R) Specialist, SNAP Program Specialist or the Chief of Eligibility and Payments in Central Office.

   Note: If the I&R staff handling the investigation confirms the report is valid, they refer the facts to the Regional Administrator, USDA, Food and Nutrition Service, 90 Seventh Street, Suite 10-100, San Francisco, California 94103. The investigative unit sends a copy of the referral to the Social Welfare Manager responsible for the case record and the Chief of Eligibility and Payments.

451.4 Processing Applications

Application processing time frames and procedures are the same for residents except

- **Household size** — Use the following procedures to certify treatment center residents and their families if they live together:

  – Single residents are certified as one-person households.
  – Certify all adult residents and their children, who are not receiving treatment themselves, as one household.

- **Authorized Representative** — The center must act as authorized representative for residents until they leave.

- **Expedited Service** — Benefits must be provided to eligible residents by the **seventh** day from the application date. The application date is the first day of the expedited time frame.

- **Adverse Action** — If the center loses its certification from the certifying agency or agencies of the state, or has its status as an authorized representative suspended due to a Food and Nutrition Service (FNS) disqualification as a retailer, residents shall be notified they are no longer eligible to participate, but ***NO*** adverse action is required. However, residents of group living arrangements applying on their own behalf are still eligible to participate. [FNS Sub Chapter C-7CFR273.13(b)(11)].

- **Work registration** — The resident is exempt.

451.5 Center Responsibilities as Authorized Representatives

The center acting as AR must

- report to the district Welfare office loss of income or certification;
- apply for, receive and use individual household Electronic Benefits Transfer (EBT) card at authorized stores or other FNS certified establishments for the resident;
- report changes, losses, misuse and over issuance of SNAP benefits;
- buy and prepare food for eligible residents;
- buy meals delivered to the individual residents; and
- report residents leaving the center.

The resident and AR both must sign the application form, unless the resident designates the AR on another form. The center acting as AR is liable if it knowingly commits a program violation to obtain SNAP benefits for residents. **Note:** A center disqualified by USDA as a retailer or has lost its license from a state agency cannot be an AR.

451.6 Residents Leaving the Center

1. Once the participant leaves the center, the center must:

   a. Give the resident their EBT Card (if it was in possession of the center);
   b. Return any **un-transacted** EBT benefits, or the household's full SNAP allotment if already issued and no benefits have been spent on behalf of that individual;
   c. Cease using the resident's EBT card, which will be inactivated upon report the client has left the center.

2. If the SNAP allotment becomes available in an EBT account through the use of the EBT QUEST card, the center must:

   a. Provide the resident the full allotment if no food assistance has been provided regardless of when the resident leaves.
   b. Provide one-half of the benefits/allotment if any portion of the benefits has been accessed using the EBT QUEST card on their behalf and the client leaves the center before the 16th day of the month. The resident receives no benefits if they leave the center after the 15th day of the month and SNAP benefits have been issued and used.

3. The center must give the resident a change report form and tell them to report their new address to the local office within 10 days.

4. If a resident leaves unannounced, the center must return their EBT card and any benefits received or accessed via EBT after the departure to the local district office.

5. EBT benefits will remain in the EBT account, and may be accessed by the recipient up to one (1) year after reissuance.

6. The center must provide the local district office with the resident's forwarding address, if known.

7. The center may not act as AR for participants who leave the facility.

If a resident, with a pending application, leaves the group home/center (with or without notification) and their whereabouts are unknown and there is no subsequent contact with the agency, do not deny. Hold the application until the 30th day after the date of application before taking a denial action for loss of contact.

452 Group Living Arrangements

452.1 Definition

A group living arrangement is a public or private nonprofit residential facility which serves no more than 16 residents. The facility must be certified by any Division of the Nevada Department of Health and Human Services as a group home or group care facility, or Food and Nutrition Service to redeem SNAP benefits.

Note: Group home policy does not apply when the majority of meals are not provided by the home.

452.2 Eligibility Requirements

Disabled residents, as defined in manual section B-432 may be certified in a group living arrangement. Eligibility is determined using the same income and resource standards as other households.

The residents of group living arrangements may

- apply for themselves;
- apply through an authorized representative of their choosing; or
- apply through an authorized representative employed by the center.

The residents in the group living arrangement decide if they want to apply as a group, as individuals, or through an AR. If a member of the group wants to apply on their own, the facility's decision to let him apply is based on the resident's physical and mental ability to handle his own affairs. Accept applications from any individual the center allows to apply as a one-person household or for any group of residents applying as a household, regardless of whether one or all have an AR.

452.3 Worker Responsibilities

Take the following actions when certifying individuals in a group living arrangement:

1. Verify the group living arrangement meets both criteria below:

   - **certified** by a state agency as required. This certification may be verified by contract documents or certificates of eligibility or a published listing from USDA/FNS or the Nevada Department of Health and Human Services.
   - Operated as a nonprofit facility. Verify nonprofit status. If the center is authorized by USDA to accept SNAP benefits, the group living arrangement's eligibility is verified.

2. Give the Authorized Representative the application, Rights and Obligations and Authorized Representative forms.

3. Obtain a signed listing of participants on a monthly basis from the group care facilities' AR.

4. Conduct periodic random on-site visits.

   During these visits document

   a. date of the visit,
   b. number of residents, and
   c. proof of certification and nonprofit status.

5. Report any suspected misuse of SNAP benefits by the center to the supervisor or Office Manager.

452.4 Office Manager Responsibilities

1. Report misuse of SNAP benefits in centers certified by USDA to

   Officer in Charge, Supplemental Nutrition Assistance Program
   Food and Nutrition Service, USDA
   360 East 2nd Street, Ste. 705
   Los Angeles, California 90012
   Telephone: (213) 894-7834
   Toll Free: (877) 823-4369

   Do not take further action on a facility certified by USDA before USDA's action, but correct over issuances as needed.

2. Report misuse in centers certified by state agencies to the Investigations and Recovery Specialist, SNAP Program Specialist or the Chief of Eligibility and Payments in Central Office. If the investigative unit determines the report is valid, they refer the facts to

   Officer in Charge, Supplemental Nutrition Assistance Program
   Food and Nutrition Service, USDA
   360 East 2nd Street, Ste. 705
   Los Angeles, California 90012
   Telephone: (213) 894-7834
   Toll Free: (877) 823-4369

A center disqualified by FNS or loses its state license cannot serve as an Authorized Representative.

452.5 Processing Applications

Most time frames and procedures for certifying households apply to residents of group homes. The exceptions are

- **Household size** — Use the following procedures to certify group home residents and their families if they live together:
  - If the group home applies, single residents are certified as one-person households.
  - If the residents apply together, 16 is the largest household.
- **Expedited Service** — Benefits must be provided to eligible residents by the <u>seventh</u> day from the application date. The application date is the first day of the expedited time frame.

- **Adverse Action** — If the center loses its certification from the certifying agency or agencies of the state, or has its status as an authorized representative suspended due to a Food and Nutrition Service (FNS) disqualification as a retailer, residents shall be notified they are no longer eligible to participate, but ***NO*** adverse action is required. However, residents of group living arrangements applying on their own behalf are still eligible to participate. [FNS Sub Chapter C-7CFR273.13(b)(11)].

- **Work registration** — The resident is exempt.

452.6 Center Responsibilities as Authorized Representatives

The group home acting as AR must

- report to the local office a loss of income or certification;
- apply for, receive and redeem SNAP benefits for resident;
- report changes, losses, misuse and over issuance of SNAP benefits;
- buy and prepare food for eligible residents;
- buy meals delivered to the individual residents; and
- report residents leaving the group home.

The resident and AR both must sign the application form, unless the resident designates the AR on another form. The center acting as AR is liable if it knowingly commits a program violation to obtain SNAP benefits for residents.

Note: A group home disqualified by USDA as a retailer or has lost its license from a state agency cannot be an AR.

If the Group Home is Not the Authorized Representative:

- Residents may apply as a one-person household or groups of residents may apply as a household.
- If the household retains use of their EBT benefits and a member leaves the group home, all unused EBT benefits are retained by the household.
- If a group of residents have applied as one household and the benefits have been given to the group home as payment for meals, the home shall return a pro-rata share of one-half of the allotment/EBT benefits to the departing resident(s) and instruct them to contact the local Welfare district office to update their case and EBT account information, if the residents leave prior to the 16th of the month.

452.7 Residents Leaving the Group Home

1. If the resident has left or is leaving the Group Home (GH), the Group Home must:

   a. Give the resident their EBT card if it was in possession of the center.
   b. Return any untransacted benefits, or the household's full SNAP allotment if already issued and if no benefits have been spent on behalf of that individual household and return any **unused** SNAP benefits when they leave the home.
   c. If applicable, cease acting as the authorized representative and using the authorized representative EBT card.

2. If the SNAP benefits have been redeemed or become available in an EBT account through the use of the EBT QUEST card, the Group Home must:

   a. Provide the resident the full benefits if already issued and unused regardless of when they leave, unless the EBT account has not been accessed;
   b. Report the client has left the facility. Any unauthorized representative EBT card will be inactivated.
   c. Provide one-half of the benefits/allotment if any portion of the benefits have been accessed using the EBT QUEST card on their behalf and the client leaves the facility before the 16th day of the month. The resident receives no benefits if they leave the facility after the 15th day of the month and benefits have been issued and used.

3. The group home must give the resident a change report form and tell them to report their new address to the local office within 10 days. If the resident does not report the change and cannot be located, terminate assistance allowing adverse action.

4. If a resident leaves unannounced, the group home must return their EBT QUEST card and benefits received after the departure to the local office.

5. The group home must return to the Division of Welfare and Supportive Services (DWSS) any unused SNAP benefits that were not given to departing resident. EBT benefits will remain in the individual's EBT account, and may be accessed by the recipient up to one (1) year from issuance.

6. The group home must provide the local DWSS office with the resident's forwarding address.

7. The group home may not **act as** an authorized representative for participants who leave the facility.

If a resident, with a pending application, leaves the group home/center (with or without notification) and their whereabouts are unknown and there is no subsequent contact with the agency, do not deny. Hold the application until the 30th day after the date of application before taking a denial action for loss of contact.

453 Prepared Meal Services

453.1 Communal Dining or Meal Delivery Services

Eligible households may use their EBT QUEST card (if the center has a point of sale (POS) device) to purchase prepared meals through **communal dining** or **meal delivery services**.

To be eligible, household members must be

- 60 years of age or older; or
- housebound, physically disabled, or unable to prepare their own meals. The disabled household member who is under 60 must be receiving SSI to participate in communal dining.

453.2 Prepared Meals for the Homeless

Homeless households may use SNAP benefits to purchase prepared meals from authorized meal providers or food dispensers approved by FNS for that purpose (see policy in manual section B-455.1).

454 Residents in Shelters for Battered Women

454.1 Eligibility Requirements

Residents in approved shelters for battered women and children may receive SNAP benefits. They must meet the same income and resource standards as other households, except duplicate participation.

The special procedures for residents in shelters for battered women apply to people living in private or public nonprofit residential facilities that usually serve meals.

If the shelter does not serve meals it is not classified as an institution. Residents of this type of shelter may receive SNAP benefits as individual household units or as part of a group of individuals like any other household.

Residents in shelters for battered women may apply for SNAP and use SNAP benefits on their own behalf. They may also appoint a shelter representative or another person to act as authorized representative.

454.2 Approved Centers

Shelters for battered women and children must be public or private nonprofit residential facilities that serve battered women and children. If a facility serves other people, part of the facility must be set aside on a long-term basis to serve only battered women and children.

If nonprofit status is questionable, verify the shelter's status as a nonprofit organization by seeing a current certificate from the Internal Revenue Service, or if USDA/FNS has certified the shelter as a retailer, then eligibility of the shelter is confirmed.

454.3 Buying Meals

Resident households may use their EBT QUEST card (if the center has a point of sale (POS) device) to purchase meals prepared at a shelter authorized by FNS to redeem SNAP benefits.

454.4 Processing Applications

The same processing standards and time frames for initial and ongoing eligibility decisions, handling reported changes and other actions, including verification and documentation requirements apply to residents in shelters for battered women.

454.5 Expedited Service

Shelter residents are eligible for expedited service if otherwise eligible. The expedited time frame (7 days) begins the date the application is date stamped in the Division of Welfare and Supportive Services (DWSS) district office.

454.6 Participation Twice in Same Issuance Month

Shelter residents who are members of a currently certified household may participate as a separate household for one month, even if the former household has already received stamps if

- the former household's allotment was based on a household size that included the battered individual and children;
- the former household includes the person who abused them or threatened to abuse them. See manual section B-454.1; and
- the sheltered resident was not designated as the head of household in the former residence they left.

454.7 Determination of Eligibility

Determine eligibility for shelter residents based on <u>their</u> income, resources, and expenses. The income and resources of their former household and jointly held resources are not counted. Consider room payments to the shelter as shelter expenses.

454.8 Adverse Action

A shelter resident has the same right to adverse action notices, hearings, and lost benefits as other households.

454.9 Work Requirements

Residents must cooperate with work requirements unless otherwise exempt.

455 Homeless Households

Homeless households are defined as those who have no regular nighttime residence, or whose primary residence is

- a supervised shelter that provides temporary living quarters,
- a halfway house or similar institution that provides temporary residence for individuals intended to be institutionalized,

- a place not designated for, or ordinarily used as, a regular sleeping accommodation for human beings (e.g., hallways, park bench, bus station, lobby or similar places), or
- temporary quarters in another person's residence is limited to 90 days.

Note: Homeless meal providers **may not be authorized representatives for homeless individuals**.

455.1 Eligibility Requirements

Homeless households can apply for SNAP benefits even if they are living in a shelter for the homeless. They must meet the same household composition, income, and resource standards as other households. If the household pays for room in a shelter, consider the payments as shelter expenses.

Homeless households can apply for and use SNAP benefits the same as other households. They can also use their SNAP benefits to purchase prepared meals from establishments that have been

- approved by Division of Welfare and Supportive Services (DWSS) as providers of meals to the homeless, and
- authorized by USDA/FNS to accept (redeem) SNAP benefits.

455.2 Worker Responsibilities

If a meal-provider representative contacts Division of Welfare and Supportive Services (DWSS) about certification procedures, the local district Welfare office will be responsible for evaluating the establishments serving meals to homeless persons, and granting the State-certification.

The designated Division of Welfare and Supportive Services (DWSS) employee must ensure, through discussion with the meal provider, the establishment:

1. Is seeking State-certification as a homeless meal provider.

2. Completes and submits Form 2724, Application for Certification As a Homeless Meal Provider.

3. Is a public or private nonprofit organization which serves meals to the homeless.

4. **If the meal provider does not meet the requirements in #3, deny the application, or if the meal provider meets the requirements, the designated Division of Welfare and Supportive Services (DWSS) staff will**

   - schedule a visit with the establishment's operator at a time convenient for both parties; and
   - review the establishment's abilities to, and methods of, providing meals to homeless persons; and
   - resolve, if questionable, any doubts about the provision of meals to the homeless at the visit.

5. The office manager makes the final decision as to whether or not the establishment serves meals to homeless individuals.

6. If the establishment is a public or private nonprofit organization which serves meals to the homeless, Form 2723, Certification as a Homeless Meal Provider, will be mailed to the establishment.

7. If either criterion in #6 above is not met, Form 2722, Denial of Certification as a Homeless Meal Provider, will be mailed to the establishment.

8. Forms 2723 and 2722 must be signed by the office manager.

9. Notice of Certification or Denial of Certification must be sent to the provider within 30 days of the date of application.

10. The local office must maintain a current listing of certified homeless meal providers and provide a copy to Central Office Eligibility and Payments.

11. A state certification remains in effect indefinitely.

12. Once certified, no further action is taken, unless information is received indicating the provider no longer serves meals to the homeless. At that time, contact the provider to determine whether or not they are still eligible as a homeless meal provider. The office may require an on-site visit.

13. If the state withdraws its certification of a homeless meal provider, complete Form 2725 and forward it to the Food and Nutrition Service (FNS) office:

    SNAP Program Specialist
    USDA/FNS
    360 East 2nd Street, Ste. 705
    Los Angeles, California 90012
    Telephone: (213) 894-7834
    Toll Free: (877) 823-4369

455.3 Meal Provider Responsibilities

Authorized meal providers for the homeless

- are responsible for determining if a household may use SNAP benefits to purchase prepared meals;
- must require the household produce its **EBT QUEST card** which entitles them to purchase meals with SNAP benefits;
- must allow SNAP households the option of paying for their meal if this option is afforded non- SNAP households;
- cannot charge the SNAP household more than the average cost of meals for other patrons;
- must ensure meals provided are not totally from donated foods.

Note: Some Homeless Meal Providers are certified as a non-traditional retailer with FNS in order to receive a POS device. A retailer may not pre-charge for meals/ products, nor can they allow credit (give services and charge the client later after benefits are approved). They are required to charge at the time services are rendered.

456 Homeless Youth

In an effort to ensure homeless youth can access healthy food, SNAP benefits will be made available providing they meet the following requirements:

A homeless youth is defined as an individual under the age of 18 who does not live with his/her parents who purchases and prepares his/her own food.

The homeless youth may be living:

- on the streets;
- in a shelter;
- in a vehicle;
- in a motel; or
- in a temporary situation without a permanent address.

Homeless youth are not required to have a photo ID or permanent address to apply for SNAP benefits.

If they are younger than 18 and living on their own, they are not required to apply as part of their parents “household”.

If the homeless youth is staying temporarily with others, she/he can apply independently from the other household members if she/he purchases and prepare their own food. If the homeless youth is temporarily staying with others and they purchase and prepare food together, they must apply as part of the household in which they are staying.

456.1 Identification

Examples of acceptable identification evidence which the applicant may provide include, but are not limited to, a driver's license, a work or school ID, and ID for health benefits or from another assistance or social services program, a voter registration card, wage stubs, or a birth certificate.

Any documents which reasonably establish the applicant's identity must be accepted, and no requirement for a specific type of document, such as a birth certificate, may be imposed.

460 HOUSEHOLDS WITH SPECIAL CIRCUMSTANCES

461 SPONSORED NON-CITIZENS

Eligible legal non-citizens may be sponsored by an individual meeting sponsorship requirements.

461.1 Definition

A sponsored non-citizen is a non-citizen for whom a person (the sponsor) has executed an affidavit of support (INS Form I-864 or I-864A) on behalf of the non-citizen pursuant to section 213 of the INA.

Sponsored non-citizens entering the country on or after August 22, 1996 are sponsored under a legally enforceable affidavit of sponsorship. This sponsorship remains in effect and the sponsor' income must be deemed until one of the following conditions are met:

- The non-citizen gains U.S. Citizenship;
- The non-citizen has worked or can receive credit for 40 qualifying quarters or;
- The sponsor dies.

Note: Not all non-citizens must obtain a sponsor before being admitted into the United States.

461.2 Non-Citizens Not Affected by Sponsor Deeming

Sponsor deeming rules do not apply to the following individuals:

- Non-citizens who are not required by INS to have a sponsor;

- Non-citizens who are refugees, parolees, asylum grantees, or Cuban/Haitian entrants.
- Non-citizens whose sponsors receive TANF or SSI.
- Non-citizens admitted to the United States before April 1, 1980, under Section 203(a)(7) of the Immigration and Naturalization Act.
- Non-citizens admitted to the United States after March 31, 1980, under Section 207 (c) of the Act.
- The dependent child of the sponsor.
- The dependent child of the sponsor's spouse.
- Non-citizens who the agency has determined to be unable to obtain food and shelter taking into account:
  1. The sum of the eligible non-citizens household income
  2. Cash on hand
  3. Food
  4. Housing or other assistance
  5. Cash contributions from the sponsor or others
  6. The value of any in-kind assistance provided by the sponsor or others.

The sum of the income may not exceed 130% of the poverty in the application month.

If the non-citizen is determined to be indigent, the only amount that the agency can deem is the amount actually provided for the period beginning on the date of such determination and ending 12 months after this date. The indigent determination may be renewed for 12 month periods.

The local office **MUST** notify the USCIS* of each indigent determination, including the names of the sponsor and the sponsored non-citizen involved.

- Non-citizens who are not required to have a sponsor under the Immigration and Nationality Act, such as refugees, parolees, asylum grantees or Cuban/Haitian entrants.
- Non-citizens who are members of their sponsor's SNAP case.
- Non-citizens who are sponsored by an organization or group as opposed to an individual.
- Non-citizens who the agency has determined to be unable to obtain food and shelter taking into account:
  1. The sum of the eligible non-citizens household income
  2. Cash on hand
  3. Food
  4. Housing or other assistance
  5. Cash contributions from the sponsor or others
  6. The value of any in-kind assistance provided by the sponsor or others.

The sum of the income may not exceed 130% of the poverty in the application month.

If the non-citizen is determined to be indigent, the only amount that the agency can deem is the amount actually provided for the period beginning on the date of such determination and ending 12 months after this date. The indigent determination may be renewed for 12 month periods.

The local office **MUST** notify the USCIS* of each indigent determination, including the names of the sponsor and the sponsored non-citizen involved.

- Battered non-citizen spouses, non-citizen parents of a battered child, or child of a battered non-citizen, **for 12 months** after the agency determines that the battering is substantially connected to the need for benefits, and the battered individual does not live with battered. **After 12 months**, the agency must not deem the batterer's income and resources if the battery is recognized by a court or the INS and has a substantial connection to the need for benefits, and the non-citizen does not live with the batterer.

* See Manual Section A-640.6.2 for the address of the United States Citizenship and Immigration Services.

461.3 Responsibility to Provide Information

The sponsored non-citizen is required to obtain all information from the sponsor and sponsor's spouse and for reporting changes in the sponsor's situation as any other change is reported.

Failure of the sponsor to submit information necessary to determine non-citizen and sponsorship status, income and resources, will result in ineligibility for the entire TANF household.

Non-citizens waiting for proof of information from the sponsor are disqualified until the information is provided. Remaining household members may participate if eligible.

When verification is not submitted timely, the non-citizen is considered an ineligible non-citizen. The non-citizen's income and resources are counted using the disqualified non-citizen rules.
If the disqualified non-citizen later provides the information, process the information as a reported change.

461.4 Reserved

461.5 Reserved

461.6 Sponsors' Liability in Overpayments

Sponsors and non-citizens are jointly liable for overpayments resulting from incorrect information provided by the sponsor unless the sponsor can show good cause or that he was not at fault for the error. The sponsor or non-citizen, or both, can appeal the amount or fault of an overpayment.

If a sponsor and non-citizen are jointly liable for an overpayment

- Refer both to Investigations and Recovery (I&R), if intentional program violations are suspected.
- If intentional program violations are not suspected, establish a claim against the non-citizen's and the sponsor's households on open cases and refer claims on closed cases to I&R.
- Demand letters are sent to both the non-citizen and the sponsor. In the sponsor's demand letter, inform them they are not responsible for the claim if they have good cause for the error or were not at fault. Do not suspend action on the non-citizen if still pursuing action against the sponsor.

461.7 Reserved

462 Strikers

462.1 Definition

A striker is anyone who participates in a slow-down or stoppage of work with one or more other employees. However, once a company hires a replacement for a striker, an individual is no longer considered a striker.

A person's status as a striker ends only when they return to the job, retire, quit, get locked out or fired, or the company is forced out of business regardless of the length of the strike.

Exception: Apply the voluntary quit penalty to striking federal, state, or local government employees who are dismissed because they strike.

462.2 People Not Considered Strikers

People not considered strikers are those who are

- exempt from work registration on the day before the strike for any reason other than employment (such as care of a child).
- not participating in the strike, but cannot work because of the strike. **Example:** Airline pilots strike, and baggage handlers cannot work because there is no work.
- afraid to cross the picket line because of threatened harm.
- locked out of their jobs by employers, including people who were on strike before the lock-out.

462.3 Eligibility Requirements

Deny the household's application or terminate ongoing benefits for any month in which a legal parent with whom the child is living is participating in a strike on the last day of the month.

When determining eligibility and grant amount, do not include the needs of other members of the household who participate in a strike on the last day of a month.

Note: Calculate overpayments when applicable.

A household with strikers is ineligible for SNAP benefits, unless the household was eligible the day before the strike and is otherwise currently eligible.

462.4 Resources

If resources are over the maximum limit either the day before the strike or currently, the household is ineligible.

Exempt any property necessary to produce income, such as tradesman's tools.

Prestrike Eligibility — Use the income of all household members (including the striker) as of the day before the strike. If the household is ineligible, deny or terminate the case.

If the household would have been eligible before the strike, compute current eligibility.

Current Eligibility

1. Compare the striker's income for the 30 days prior to the day the strike began with his current income (including union benefits and part-time jobs). Count the higher of the two incomes.

2. Add the striker's higher income to the current income of other household members.

If the household is not eligible, deny or terminate benefits.

If the household is eligible based on current income and income before the strike, determine if the household meets all other eligibility criteria. Other eligibility criteria must be considered the same as income, e.g., the household must be eligible both currently and before the strike.

The household WILL NOT receive an increased allotment as a result of a decrease in the household's income due to the strike.

462.6 Work Registration

A striker must comply fully with the work registration requirement. However, they do not have to accept employment at a location subject to a strike or lock-out. Employment is available if a strike is prohibited under either the Taft-Hartley or Railway Labor Acts. Failure by the striker to return to this employment, for any reason, is failure to comply with work registration requirements. This makes the entire household ineligible.

462.7 Verification

Contact union and company officials to find out the probable length of the strike and to verify wages from the struck company, striker's benefits, or other help from the union.

Do not use the services of people or organizations who are parties to a strike or lock-out to interview applicants involved in the strike or lock-out.

463 Households with Members on TANF and Medical Only

See manual section A-600 for two-parent TANF cases that include an other-related child (stepchild).

470 ABLE-BODIED ADULTS WITHOUT DEPENDENTS (ABAWDs)

Effective 11/22/96, all ABAWD individuals ages 18 through 49 are ineligible to continue to receive SNAP benefits after receiving three (3) full issuances (do not count or track prorated benefits for the initial month of application or benefits calculated to be under the minimum allotment and not paid for the month of application), if during a 36 month period (this is a rolling period of time not a set 3 year period) they did not either:

- work at least 20 hours or more per week (averaged monthly) **Note**: receiving earnings equal to 20 hours per week multiplied by the federal minimum wage does **NOT** apply here as it does in the FSET exemptions; or
- participate in and comply at least 20 hours or more per week with a Workforce Investment Act of 1998 (WIA) formerly known as the Job Training and Partnership Act (JTPA) program, Trade Adjustment Assistance Act (TAAA) program; or
- participate in community service at least 20 hours or more per week.

For the purposes of this section, work is defined as:

- work in exchange for money;
- work in exchange for goods or services (work “in kind”); or
- a combination of work for money and work “in kind.”

Eligibility for another three (3) months can be regained under certain conditions. The additional three (3) months **must be** consecutive. See manual section B-473.

470.1 ABAWD Exemption Provisions

An applicant/recipient meeting one of the following conditions is **exempt** from the ABAWD provisions.

To be **exempt** from the ABAWD provisions, the applicant/recipient must be:

- under age 18 or age 50 and over (an individual is no longer considered an ABAWD as of their 50th birthday);
- medically certified as physically or mentally unfit for employment as follows:
  1. is receiving temporary or permanent disability benefits issued by governmental or private sources;
  2. is obviously mentally or physically unfit for employment as determined by the Division of Welfare and Supportive Services (DWSS);
  3. if the unfitness is not obvious, provides a statement from a physician, psychologist, medical personnel or social worker that he or she is physically or mentally unfit for employment.

- a parent (natural, adoptive or stepparent) of a household member under age 18, even if the child who is under the age of 18 is not eligible for SNAP;
- residing in a home with an individual under age 18, even if the child is not eligible for SNAP benefits (i.e., non-qualified citizen). The child does not have to be under parental control of the adult, however, they must be in the same SNAP household;
- a pregnant woman (the father of an unborn is not exempt from the ABAWD provisions due to caring for a dependent until the baby is born);
- a high school student age 18 or 19;
- meeting a **federal** work exemption as outlined in manual section A-822 (e.g., receiving unemployment insurance benefits or employed or self-employed at least 30 hours per week, or receiving earnings equal to 30 hours per week multiplied by the federal minimum wage). **Note**: ABAWDs receiving a **state** work exemption are not subject to the FSET participation requirement, but are subject to the 3 in 36-month or limitation on receipt of benefits; or
- residing in Labor Surplus and/or High Unemployment Rate Waiver areas. See manual section B-472.

A provision of the Balanced Budget Act of 1997 permits states to exempt up to 15 percent of their unwaived, unemployed, childless ABAWD population from the PRWORA three-month time limit. Each year FNS notifies states of their number of exemptions. The Division of Welfare and Supportive Services (DWSS) will allocate a determined number of monthly exemptions to each district office. Eligibility staff will provide exemptions to ABAWD individuals who are (1) obviously physically or mentally unfit for employment and are unable to provide medical certification from a physician, psychologist, medical personnel or social worker; or (2) residing in rural Nevada (non-waiver areas) when employment opportunities become limited (i.e., mining closures).

Update ABAWD status no later than the next month following the change in circumstance for Status Change Reporters. If the adverse action date has passed, update the case for the next available month. Decisions regarding ABAWD status for Simplified Reporting households will be delayed until the next recertification, unless the change is reported by the client.

470.2 ABAWD Certifications

SNAP cases with:

- a single individual who qualifies as an ABAWD will only be certified for a three-month (90-day) period. These individuals will receive an automatic Notice of Expiration (NOE).
- more than one adult in a multiple person/family SNAP household (with one or more adults who qualify as an ABAWD) will be given a normal certification period (e.g., 6, 12 or 24-month period) and future-actioned by the case manager for 80 days after approval or recertification to remove the ABAWD from the case if proof of compliance with provisions outlined in manual section B-470 is not received by the end of the 70-day period (three month ABAWD eligibility period).

471 SNAPET Work Codes To Screen and Use In Determining SNAPET Status

The ABAWD requirements and SNAPET participation are two separate determinations:

- An individual receiving UIB is exempt from both the ABAWD requirement and SNAPET participation.
- Individuals age 18 through 49 are subject to both ABAWD requirements and SNAPET participation, unless otherwise exempt.
- Individuals 50 through 59 are subject to SNAPET, but not ABAWD provisions.
- Individuals living in waivered areas are exempt from ABAWD requirements.
- An individual who is working between 20 and 29 hours a week is exempt from ABAWD requirements (ABAWD code W), but is subject to SNAPET participation, unless otherwise exempt.

For SNAPET work participation requirements, see manual section A-800.

FEDERAL SNAPET EXEMPTIONS

An individual meeting a federal exemption is NOT an ABAWD (see manual section B-470). When an individual no longer meets a federal exemption, determine if the individual is then considered an ABAWD and update the E&T code (mandatory or state exemption).

For Federal SNAPET Exemption codes see manual section A-816.

STATE SNAPET EXEMPTIONS

An individual meeting a state exemption may be an ABAWD or non-ABAWD.

For State SNAPET Exemption codes see manual section A-816.

SNAPET PARTICIPATION DEFERRALS

For SNAPET Participation Deferral codes see manual section A-816.

MANDATORY CATEGORY CODES – SNAPET

Mandatory Codes	Definitions
M	Mandatory
(Y) in Vol Sts field	Volunteer
E	Exempt

472 Labor Surplus and High Unemployment Rate Waiver Areas

Effective November 22, 1996, Able-Bodied Adults Without Dependent Children (ABAWD) individuals who reside in or move to a waiver area are exempt from the ABAWD provisions.

- **Tribal Areas with Unemployment Rate Over 10%**

1. Duck Valley Reservation 2. Fort McDermitt Paiute-Shoshone Reservation 3. Goshute Reservation 4. Lovelock Colony 5. Reno-Sparks Colony	6. Walker River Paiute Reservation 7. Stewart Community 8. Winnemucca Colony 9. Elko Colony 10. Fallon Colony

- **Tribal Areas with Unemployment Rate More Than 20% Above National Average Rate Over Two Years**

1. Pyramid Lake Reservation 2. Fallon Paiute-Shoshone Reservation	3. Carson Colony 4. Duckwater Reservation 5. Moapa

- **Nevada Counties with Unemployment Rate More than 20% Above National Average Rate Over Two Years**

1. Mineral County	

- **Labor Surplus Areas – Designated by the Department of Labor as Having Insufficient Jobs Due to an Employment-to-Population Ratio**

1. Lyon County 2. Mineral County 3. Nye County	4. All of Washoe County with the exception of Reno and Sparks 5. All of Clark County with the exception of Las Vegas, North Las Vegas, and Henderson

472.1 Statewide ABAWD Exemption

Effective October 1, 2010, the entire state of Nevada is exempt from the provision limiting ABAWD individuals 3 months of SNAP benefits in a 35-month period until at least September 30, 2011. This exemption is due to Nevada qualifying for extended UIB benefits due to insufficient jobs in the state under the provisions of 7 CFR 273.24(f)(2). Individuals who are exempt under the statewide exemption must be evaluated for SNAPET participation. This exemption does not exempt the entire state from SNAPET requirements.

473 ABAWD Time Limits and Tracking

Able-Bodied Adults Without Dependents (ABAWD) who do not meet work requirements can only receive SNAP benefits for three (3) months in a 36 month period. An ABAWD denied/terminated because they exhausted the first three months may regain eligibility as indicated below.

- **Regaining Eligibility and Application of the Second 3-Month Period**

To regain eligibility an ABAWD must work or participate in a work program (or a combination of both) for 80 or more hours **within a thirty-day period**. The person did not have to be participating in the SNAP program when the 80-hour criteria was met. **Note:** An individual who regains eligibility may **remain eligible** to receive SNAP benefits if meeting the work requirements listed in manual section B-470. The requirement of working or participating in a program for a minimum of 80 hours in a thirty-day period to regain eligibility does not have to be recent. An individual ABAWD may meet this requirement while receiving SNAP or during the period they are off SNAP or during the 30-day application process. To regain eligibility for three (3) consecutive months, an individual must have had eligibility denied/ terminated.

A person who regains eligibility and subsequently can **no longer** meet the ABAWD work requirements, remains eligible for three (3) consecutive months beginning on the date the individual notifies the division they no longer meet the requirements. The second three-month eligibility period can be given only once in the 36-month period.

- **36-Month Period**

Once started, the 36-month period continues, even while the person is not participating in SNAP. However, the three month “clock” count may start and stop based on employment, involvement in work/training programs or SNAPET work requirement exemptions.

DO NOT budget the income/resources of an ineligible ABAWD against the remaining household members.

- **Out Of State ABAWD Status**

If it is verified a person received SNAP benefits in another state in ABAWD status, this must be counted and tracked, except as noted below:

NOTES:

* If one of the three-month issuances expires and the client later reapplies for benefits, they are entitled to an additional month(s) of benefits, if otherwise eligible, because the expired issuance cannot be counted as one of the three issuances in a 36-month period because it was not redeemed.

* If only one or two issuances in the three-month count are received out of state, the client may receive the additional issuance(s) in Nevada, if otherwise eligible.
* Do not include (track/count) **an initial application month's prorated issuance** received in **any** state as one of the three months.

- **Tracking ABAWDS**

The Tracking System will identify **individual** ABAWD status by the "N" or "Y" or other applicable codes shown below on the ABAWD screen. ABAWD status should also be tracked in the case record. The status of the individual will be tracked for the months to be counted as an ABAWD. Therefore, if a person becomes exempt from the ABAWD provision because they went to work for two months and became unemployed, left the program, or moved to a waivered area, the system will only track the months the individual is not meeting the conditions in manual section B-470. **The ABAWD status must be updated in the computer when there is a change that impacts the status**. When eligibility is regained for receipt of the three (3) consecutive months, use ABAWD code **"R"** in the ABAWD field.

In NOMADS, the "ABAWD" screen is used to capture and track ABAWD status by using one of the following codes:

CODE	DEFINITION
N	Not an ABAWD
O	Other ABAWD eligibility (15% exemption)
R	Requalified ABAWD
W	ABAWD meeting work requirements
X	Ineligible for FS for any reason (for non-NOMADS)
Y	ABAWD does not meet work requirements
Z	ABAWD living in waiver area

*Reference NOMADS User Task Guide A.ll.30

Update ABAWD status no later than the next issuance cycle following the change in circumstance. If the adverse action date has passed, update the case for the next issuance cycle. **Do not count months** the client was not an ABAWD when applying the 3 in 36-month rule. If there is a coding or tracking problem and/or system correction is needed, contact the HELP DESK to update the tracking system with the correct ABAWD indicator.

The following 3 in 36-month chart provides guidance in how to determine countable months.

EXAMPLE OF THE APPLICATION OF THE ABAWD 3 IN 36-MONTH RULE:

Mary reapplies for SNAP 2/2000. The 3 in 36-month look back period would begin the month of application back to the year 1997. Mary received SNAP in 1/97, 2/97 and 3/97 and was not meeting work requirements so she could not continue receiving benefits. She is now eligible to receive SNAP for 2/00, 3/00 and 4/00 because March is the only countable month in the past 36 months 3/97 - 2/2000.

Due to the rolling 36-month period, March 1997 will drop off the count and allow for an April 2000 issuance. The example chart **counts the month of application backward** to identify the first 36th month to determine the number of countable SNAP issuance months to be included in the 3 in 36 count.

1/97	2/97	[3/97] *36*	4/97 *35*	5/97 *34*	6/97 *33*	7/97 *32*	8/97 *31*	9/97 *30*	10/97 *29*	11/97 *28*	12/97 *27*
1/98 *26*	2/98 *25*	3/98 *24*	4/98 *23*	5/98 *22*	6/98 *21*	7/98 *20*	8/98 *19*	9/98 *18*	10/98 *17*	11/98 *16*	12/98 *15*
1/99 *14*	2/99 *13*	3/99 *12*	4/99 *11*	5/99 *10*	6/99 *9*	7/99 *8*	8/99 *7*	9/99 *6*	10/99 *5*	11/99 *4*	12/99 *3*
1/00 *2*	[2/00] *1*	3/00	4/00	5/00	6/00	7/00	8/00	9/00	10/00	11/00	12/00

This chart shows the 36-month period to be 3/97 to 2/2000; however, the 36-month window will change because it is rolling and dropping a month each time as follows:

1. 3/2000 - 36-month period = 3/2000 - 4/97 = 2 months of SNAP received.
2. 4/2000 - 36-month period = 4/2000 - 5/97 = 3 months of SNAP received.
3. 5/2000 - 36-month period = 5/2000 - 6/97 = 3 months of SNAP received.
4. 6/2000 - 36-month period = 6/2000 - 7/97 = 3 months of SNAP received.

If the client does not meet work requirements after receiving the 2/2000, 3/2000 and 4/2000 issuances, she will not be eligible until the year 2/2003 (e.g., 2/2000 to 1/2001, 2/2001 to 1/2002, 2/2001 to 1/2003).

480 STUDENTS IN HIGHER EDUCATION

481 Definitions

For the purpose of this section, a student is between the ages of 18 through 49 and enrolled at least half time in an institution of higher education. 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.

Note: Business, trade, vocational or technical schools who require an individual to take and pass an entrance "equivalency test" in lieu of a high school diploma or GED are considered an institution of higher education.

Enrollment — Enrollment begins the first day of the first school term. Once enrolled, the student is considered enrolled through the regular school year and vacation; unless the student graduates, is suspended/expelled, drops out or does not intend to register for the normal school term (excluding summer school).

Note: Refugee training programs approved, funded or operated by the Office of Refugee Resettlement (ORR), Department of Health and Human Services (HHS), are federally recognized training programs.

482 STUDENT ELIGIBILITY REQUIREMENTS

A student qualifies for SNAP by meeting any one of these requirements:

- Enrolled in the school less than half-time, suspended from school, or not planning to register for the next normal school term/course, if another term is available for the student's curriculum.

- Medically certified as physically or mentally unfit for employment as follows:

    1. is receiving temporary or permanent disability benefits issued by governmental or private sources;
    2. is obviously mentally or physically unfit for employment as determined by Division of Welfare and Supportive Services (DWSS);
    3. if the unfitness is not obvious, provides a statement from a physician, psychologist, medical personnel or social worker that he or she is physically or mentally unfit for employment.

- Employed for pay at least 20 hours a week OR, if self-employed, work a minimum of 20 hours a week and receive weekly earnings at least equal to the federal minimum wage multiplied by 20 hours.

- Participates during the regular school year in a state or federally funded work/study program.

- Is assigned or placed in an institution of higher education in compliance with one of the following programs:

  — Workforce Investment Act of 1998 (WIA), formerly known as JTPA;
  — NEON;
  — SNAPET;
  — 236 of the Trade Act of 1974;
  — Other state and local government employment training program (approved by Central Office).

- Approved for TANF NEON.

- Responsible for the care of a dependent household member who is

  — under the age of 6; or
  — above the age of 5 and under 12 years old, and there is no available or adequate child care, or the other adult household members are working, or physically incapable of providing adequate child care;
  OR
  — under 12 years old and the single parent is enrolled full time in an institution of higher education (e.g., enrolled in a business, technical, trade, beauty or vocational school, or enrolled in regular curriculum at a college or university that offers degree programs regardless of whether a high school diploma is required. This includes correspondence and off-campus home-study enrollment. This exemption only applies in those situations where only one natural, adoptive or stepparent (regardless of marital status) is the same SNAP household as the child.

POLICY NOTE:

If both parents are students, both **cannot** obtain student eligibility by caring for the same child.

483 Ineligible Students

An individual who does not meet the student eligibility requirements is not a member of the household. Do not count their income and resources for the remaining household members.

484 Work Requirements

Eligible students may be exempt from work requirements during the semester and regular school vacations if they remain enrolled.

485 Student Income

Determine the countable amount of all types of educational assistance, following policy in manual section A-734.

Note: Student income is not exempted upon reaching 18 years of age.

486 Student Resources

Follow resource policy in manual section A-547 to determine resources.

487 Verification

Verify money from scholarships, loans, grants, and cash. Verification sources include but are not limited to:

- A statement from the grantor.
- A statement from the educational institution.
- Budget worksheets, or the like, from the educational institution.
- Form 2020 completed by the grantor or educational institution.
- Receipts for allowable costs.

490 RESERVED

RESERVED FOR FUTURE USE

510 (Reserved)

Changes

610 INTRODUCTION

Changes are situations that occur in a household which may affect eligibility or benefit amounts. Action must be taken on **reported** changes, regardless of the client's reporting requirements, to ensure program integrity is maintained by

- issuing benefits timely and accurately;
- ensuring the state is not sanctioned for failing to provide benefits to eligible households in the correct amount; and
- maintaining Quality Control (QC) tolerance levels.

615 REPORTING REQUIREMENTS

616 WHAT TO REPORT

616.1 TANF, Medicaid and SNAP Households Who Do Not Meet Simplified Reporting Criteria (These households are referred to as Status Change Reporters for the purpose of the SNAP Program.)

Households are advised of their responsibility to report changes in

- source or amount of income (changes in vendor payments do not have to be reported);
- household composition/household member's extended absence;
- ownership of a licensed vehicle and other non-exempt vehicles;
- earned income when there is a change in employment status which includes:
    1. Change of employer.
    2. Starting/stopping a job.
    3. Promotion and/or change in hourly wage increase or salaried wage rate.

4. Change from full-time to part-time or part-time to full-time for employed household members. **Note:** Part-time employment is employment which is less than a weekly average of 30 hours. Full-time employment is employment with a weekly average of 30 hours or more per week. To determine the weekly average, divide total hours worked in the month by 4.3.

   Exception: This does not apply to salaried employees, whose salary does not fluctuate based on number of hours worked. They would report under 1, 2 or 3.

- Marital status, or reconciliation with the absent parent;
- Available resources such as cash, stocks, bonds, or money in a bank or savings account;
- Residence or mailing address;
- Receipt of a lump-sum payment;
- Private medical insurance coverage;
- School attendance of a child 16 or older (includes attendance for a minor parent);
- Other circumstances or anticipated changes which may affect eligibility or benefit amount;
- Address, job, or other information related to the absent parent; and
- Social Security number for a required household member.

- Gross monthly **unearned** income if the amount changes by more than $50 during the certification period;
- Available resources such as cash, stocks, bonds, or money in a bank or savings account which cause the household's limit to reach or exceed $2,000 or $3,250 (whichever applies);
- The legal obligation of child support paid to or for nonmembers if the change is more than $50 (see manual section A-630.4);
- Residence and resulting change in shelter costs.

616.2 Simplified Reporting (SR) Households

All households meeting the SR criteria should be designated as an SR household as defined in manual section A-1824.1.

Note: Do not change reporting requirements once a case has been designated as SR.

SR households must report all changes outlined in manual section B-616.1 at initial and recertification applications when an interview is required; however, once an interview is conducted SR household's reporting requirements are reduced to reporting the following:

- Gross income which exceeds the 130% poverty level for the household size (this amount is printed on the NOD when the case is approved or an action is taken which generates a NOD as long as the SR flag on the APPL screen is marked "Y").
- If the head of household moves to another state.

NOTE: Categorically eligible households that are Simplified Reporters who have income below 200% of poverty but exceeding 130% of poverty at approval are required to report changes in income exceeding 200% of poverty.

SR households submitting the interim recertification, who are not required to have an interview, are only required to report the changes listed above between the submission of the application and the notice of approval.

When the interim review of eligibility or a complete Application for Assistance is received, and no interview is required, it is the case manager's responsibility to review all information previously reported as well as any changes reported by the household on the application, including the review of all available interfaces.

Any other changes the agency becomes aware of, regardless of the source, must be acted on according to normal policy and procedures.

616.3 Able Bodied Adults Without Dependents (ABAWD)

Individuals determined to be an ABAWD per B-470 have additional reporting requirements. In addition to meeting the reporting requirements in either A-616.1 or A-616.2 (depending on household type), an ABAWD must report any change in work hours falling below 20 hours per week averaged monthly.

617 WHEN TO REPORT

All applicants must provide correct information on their circumstances when completing an application for assistance and during the eligibility interview.

Changes must be reported immediately from the date of application up to the date of approval.

After approval, any change in circumstances must be reported no later than the **fifth** of the month following the month the change occurred.

Once an applicant is interviewed, they are not required to report additional changes until after approval. Once approved:

- Reportable changes which occur between the interview and the approval must be reported within 10 days of the approval date.
- Reportable changes occurring after approval notification must be reported within 10 days of the change.

618 HOW TO REPORT

Household members or someone acting on their behalf may report changes

- in person;
- by telephone;
- by mail, fax or email;
- on the Change Report Form 2584;
- Quarterly Transitional Medicaid Report, or

Applications submitted to the Division are another method of reporting changes. Each application should be evaluated for changes that would affect ongoing benefits for other households, such as a household member moving out of one household into another household.

619 RECEIPT OF REPORTED CHANGES

Households who report changes in person should have this information or verification date-stamped by the person who accepts the information. It is the household's responsibility to prove they were in the office, if necessary. Therefore, they should make use of the logs located in all offices. Changes reported by mail or telephone acknowledged by a notice of decision if benefits are affected. **Note:** Receipt of third-party calls or verification reporting changes may also be used. Anonymous calls reporting changes need clarification and/or supporting verification before impacting eligibility/benefits.

620 APPLICATION OF THE SNAP 10*10*13 RULE

Status Change Reporting Households must report changes in circumstances which affect their benefits while Simplified Reporting Households must only report if they move out of the state or if their household income exceeds 130% of the poverty level for their household size. The agency's responsibility is to act timely on all changes reported by the client, or discovered by the agency regardless of what type of reporter the household is. The household has ten (10) days to report, the agency has ten (10) days to act on the change by impacting the benefit and must notify the household of any changes to their benefits by allowing 13-day adverse action (unless adverse action is not applicable or is waivable). **Note:** Intake households must report changes that have occurred from the date of application through the date of interview at the time of the interview.

To meet the advance notice requirements, notice of an action to reduce or terminate benefits must be posted in the computer at least 14 days in advance to ensure the computer-generated notice is mailed on time. If case circumstances require a local notice print, posting can be done on the 13th advance notice date. When counting the 13-day advance adverse action notification period, weekends and holidays must be included.

Application of the 10*10*13 Rule

1. Household Responsibility - The First 10 Days

Certified households must report required changes for their household within **ten days** from the date the change occurs or becomes known to the household.

2. Agency Responsibility - The Second 10 Days

Changes resulting in:

- Decreases or terminations:

The agency must act within 10 days of the change report date to effect the benefit change and issue the notice of adverse action.

- Increases:

If the household does not provide sufficient information to verify the increase in benefits, no action will be taken until the information reported is verified. The agency will allow the household 10 days to provide the information. The household must provide the verification within 10 days of the agency's request in *order to be considered timely*.

- Incomplete change reports:

If the household does not provide sufficient information to determine if the change will increase or decrease the benefits, no action will be taken until the information reported is verified. The agency will allow the household 10 days to provide the information. The household must provide the verification within 10 days of the agency's request in *order to be considered timely.*

3. Agency Notification - The 13-Day Adverse Notice Period

When a change results in a **decrease** or **termination**, the household must be sent a 13-day advance notice of adverse action. When counting the 13 days, weekends and holidays must be included; however, if this date falls on a Friday, weekend or holiday, the action must be taken the prior workday. To meet the advance notice requirements, the action to reduce or terminate benefits must be taken (posted) in the computer at least 14 days prior to the last day of the month, to ensure the computer-generated Notice of Adverse Action (NOAA) is mailed on time. If case circumstances require posting as late as the 13th day of the adverse action notice period, local print must be done to meet advance notice requirements.

4. Agency Action on Changes

The case manager must act timely on all changes making any necessary benefit adjustments for the appropriate benefit month(s). This includes action on all reported changes as well as changes discovered by the case manager or other staff regardless of the source.

620.1 Case Examples for Applying the 10*10*13 Rule (not all inclusive)

The following are a few examples to show which benefit month(s) are impacted based on adverse action requirements. The STAT screen reflects the adverse action date for each month. The adverse action date can also be accessed through the SUMM screen by selecting "Program Details.". It is important to check the adverse action date before updating an issuance to ensure the action is taken in the correct footer month, allowing applicable adverse action. See manual section C-260, SNAP Adverse Action Dates.

1. Change decreasing benefits with enough information reported to affect benefits:

   On May 3rd, client reports her husband has started a job effective May 1st, which pays $6 per hour and he will be working 40 hours per week. Their SNAP benefits begin on the 1st of each month. The case manager issues Form 2429 requesting verification and, because there was enough information reported, calculates the best estimate of the husband's wages and budgets the wages to the SNAP case on May 13th. The adverse action period would end on May 31st and the first month to be impacted would be June 1st.

2. Change reported with insufficient information and client returns necessary verifications within ten (10) days of report date:

   Client reports a change in residency on April 30th. He is unsure what his rent will be, but is certain it is less than the $300 per month he was paying. He thinks he will be responsible for his utilities, but is not certain. On May 1st, the case manager issues Form 2429 requesting necessary verifications within ten (10) days. On May 11th, the client returns all necessary verifications to support his new rent as $250 per month, which will include his utility expenses. The case manager has until May 23rd to update the SNAP case, and if applicable, the 13-day adverse action period would end on May 31st.

3. Change reported with insufficient information and client returns necessary verifications beyond ten (10) days of original report date:

   On November 1st, client reports she has started a new job. Her SNAP benefits are issued on the 1st of each month. No information is given regarding rate of pay, hours, start date or employer's name. The case manager issues Form 2429 on November 2nd requesting necessary verifications be returned by November 12th. She provides the verification on November 12th. Because the verification was received timely to the Form 2429 request, but beyond the ten (10) days of the report of change, the case manager should update the SNAP case as soon as possible, but no later than the next month, allowing adverse. Since the client's benefits begin on the 1st, the case manager should update by November 17th to allow for adequate adverse to affect the December benefit.

4. Multiple reports of change:

   Client reports a job termination on July 15th and provides a statement from his employer to verify this. On July 22nd, client reports he has moved and will be living with his mother at no cost. On July 31st, same client calls to report he has a new job making $15 per hour working 35 hours per week, has moved again and now resides with his wife and 2 children. He will also be paying child support as a payroll deduction from his new wages.

Each of these changes must be considered separately by the case manager. The case manager has until July 25th to update the loss of employment reported on July 15th since verification was provided at the time of the report. The case manager has until August 1st to act upon the change as reported on July 22nd regarding the change of residence. Since the client reported another change of residence on July 31st, the case manager must evaluate the new residential change as well as the additional reported changes in wages, household composition, and child support expenses for necessary verifications and act on this change report before August 9th.

Note: All changes reported together on July 31st must be verified and updated at the same time, not separately. Allow applicable adverse action.

623 QUESTIONABLE INFORMATION AND/OR UNCLEAR CIRCUMSTANCES

If the agency receives questionable information, regardless of the source, a household's circumstances are unclear, or mail is returned (see B-623.1 for returned mail), take the following steps:

1. Send a request for information (RFI) using Form 2429–EE when clarification and/or verification are required to determine continuing eligibility.

2. Allow the household at least ten (10) days to respond to the request for information, clarification and/or verification.

3. If the household fails to respond or does not provide enough information to continue the case, or the resulting verification requires a reduction or termination of benefits, a Notice of Adverse Action (NOAA) **must be mailed at least fourteen (14) days** prior to the effective date of the reduction/termination to meet advance notice requirements, unless circumstances require a local print on the 13th day.

   If a third party (other than the authorized representative) does not cooperate in providing information or provides incomplete information, DO NOT close the case. Work with the client and information already on file (includes income) to arrive at a prudent decision or resolution based on the best information available. Document the circumstances in the CLOG.

623.1 Returned Mail

For TANF, Medicaid and SNAP Status Change Reporters:

If mail is returned by the U.S. Post Office with an **in state forwarding address**, follow the guidelines in B-623 to request the required verifications.

If mail is returned by the U.S. Post Office with **an out-of-state forwarding address or no forwarding address**, close the case waiving adverse action and mail the notice to the last known address.

If mail is returned by the U.S. Post Office with **an out-of-state forwarding address or no forwarding address**, close the case allowing adverse action and mail the notice to the last known address.

For Simplified Reporting Households

If mail is returned by the U.S. Post Office with an **in-state forwarding address**, the case manager will update the client's address based on the information provided by the U.S. Post Office; no other action is required for this SNAP case. If **an out-of-state address is provided**, close the case allowing adverse action.

If mail is returned by the U.S. Post Office **without a forwarding address**, document the casefile that mail was returned and address the change at the next recertification. Do not close the case unless information has been received verifying that the client has applied for SNAP benefits in another state or an out-of-state address is provided.

NOTE: Use of the individual's EBT card out of state is not verification the client has abandoned Nevada residency.

624 RESERVED

630 PROCESSING REQUIREMENTS

631 RESERVED

632 ACTIONS ON CHANGES

Upon receipt of a change report, ensure the following actions are completed:

- Date stamp the reported change or report forms and any verification provided.
- Check inquiry to identify all related cases affected by the change.
- Transfer the information to the correct caseload, if the case is located elsewhere.
- Review the change to determine the effect on the household's benefits.
- Request verification required to update the case based on the reported change. When requested verifications are not provided, terminate assistance allowing for adverse action. If verifications are provided on or before the last day of the month, reinstate assistance. When terminating TANF benefits, evaluate each household member's eligibility for all other categories of Medicaid.

- Document
  - the reported change;
  - the date the change occurred; and
  - the date the change was reported.
- Calculate a budget (if applicable)
- Notify the household
  - if benefits increase; or
  - if benefits decrease or terminate.

633 MOVES WITHIN THE STATE

If a household moves to an area covered by a different office, follow procedures for case transfers in manual section B-1200.

634 MASS CHANGES

The state or federal government initiates changes which affect all or a large number of households. Reporting these changes is not required. Mass changes generally occur in

- the income eligibility standards;
- the shelter and dependent care deductions;
- the Thrifty Food Plan and standard deductions;
- the standard utility allowance (SUA);
- the standard telephone allowance;
- cost-of-living adjustments (COLA) for Social Security, SSI, VA, and other federal benefits;
- TANF grants; and
- other eligibility criteria based on legislative or regulatory actions.

Some mass changes such as deduction amounts, income standards and most TANF amounts are updated automatically and benefits are adjusted effective the date of the change. Cost-of-living-adjustments (COLA) increases to income such as SSA, SSI, VA and other pension amounts are updated manually. Reports are produced at the time of a mass change, indicating households where automated mass changes could not occur and a report of households receiving a type of income subject to a COLA. All of these cases require worker intervention and must be updated manually.

Generally, individual notices are produced for automated mass changes whenever a change in the benefit amount occurs.

635 CHANGING A SNAP CASE FROM PUBLIC ASSISTANCE (PA) TO NON ASSISTANCE (NA)

Use the following steps to change a PA case to NA when

- the TANF case or related TANF funded support benefits is terminated or converted to a medical category (and the household does not meet any other category of expanded categorical eligibility); or
- a household composition change causes a category change.

Step	Action
1	Make the necessary adjustments to the SNAP case, such as household composition, income, deductions, expenses, etc.
2	Change the case categorical status in the computer.
3	If needed, notify the household of any benefit change.

636 CHANGING A SNAP CASE FROM NA TO PA

Use the procedures in manual section A-161 to change an NA case to TANF PA when processing joint applications and use the following procedures to change an ongoing NA case to TANF PA.

Step	Action	
1	Make the necessary adjustments to the SNAP case, such as household composition, income, deductions, expenses, etc.	
2	Change the suffix category to categorical eligibility status in the computer.	
3	Send the appropriate client notice.	
4	**If the SNAP certification period expires . . .**	**Then . . .**
	before the month in which the next TANF review of eligibility is due	• ensure the household understands it must reapply to receive uninterrupted benefits; • process a SNAP recertification when the application is received; and • use the SNAP application as an RD for the related TANF case.
	the same month the next TANF review of eligibility is due or afterwards	• process a SNAP recertification with the next TANF review of eligibility; **Note:** Review of eligibility periods may be adjusted to align the TANF RD to the SNAP certification period. Use the SNAP Recertification to process a TANF/Medicaid review of eligibility to align the SNAP and the TANF/Medicaid periods. SNAP certification periods must be determined based on policy in A-1824.

637 SNAP INCREASES CAUSED BY REDUCED OR TERMINATED TANF

When TANF cash is reduced as a result of an IPV disqualification, do not increase SNAP benefits. For all other TANF reductions or terminations, increase SNAP benefits with the changed updated TANF amount. Provide supplemental or restored benefits if necessary.

Example: The TANF grant of $468 is reduced to $400 and the household begins paying rent of $500 effective May 1, these changes were known to the agency April 28th. The SNAP case is not updated until May 3rd; therefore, a supplemental benefit is required.

Example: The TANF grant of $468 is reduced to $400 effective June 1 and the household size increases by two persons. The case is updated on May 12 for the June 1 allotment. No supplemental benefit is necessary.

Note: A supplement can only be done if the issuance month being supplemented has not ended. Once the benefit month has ended, the benefits must be restored, see manual section B-800, Restored Benefits.

637.1 Means-Tested Income Penalties Resulting from Noncooperation with TANF or Other Means-Tested Programs

The means-tested penalty can only be applied to the SNAP case if there is:

1. A TANF grant ***already included and budgeted*** on the case and a member is disqualified for an IPV for the TANF program or an overpayment is being collected for an IPV which occurred on/or after September 22, 1996.

   Note:

   - If TANF benefits are terminated, this income, including the means-tested penalty income, is removed from the SNAP case.
   - TANF-related means-tested income penalties are not applied from state to state.
   - Only Nevada TANF IPV overpayments are evaluated for a means-tested income penalty.

2. Other means-tested income from outside agencies and a reduction in this income occurs due to non-cooperation. The means-tested income penalty is applied to persons disqualified from a household receiving county assistance or Indian General Assistance (IGA) for non-cooperation. However, the individual and assistance must ***already be included and budgeted*** on the SNAP case. Non-cooperation resulting in a reduction of other means-tested income must have occurred on or after September 22, 1996. If the other means-tested income terminates, this income and the penalty amount is removed from the SNAP case.

Important Note: SSI is not considered a means-tested program and is no longer included in this section.

To identify and document the amount of the means-tested penalty to budget on the SNAP case:

- determine the total benefit received and already budgeted on the SNAP case;
- identify the disqualification amount (e.g., overpayment amount and/or disqualified person's amount of TANF benefits due to an IPV);
- subtract the disqualification amount from the total benefit to arrive at the benefit amount not penalized.

Note: NOMADS does not have a special code or tracking method for the means-tested income penalty portion. Case managers **must CLOG** why, when and how much of the penalty was applied.

Terminated SNAP Case with Means-Tested Penalty: If SNAP benefits (which includes a means-tested penalty) are terminated and the household reapplies for SNAP benefits ***within sixty (60) days*** after the termination date and the household is still receiving a reduced amount of income from TANF, county assistance or IGA, the means-tested penalty will resume on the SNAP case. If reapplication occurs **after sixty (60) days**, the means-tested penalty will not be reimposed.

Pending TANF Application with Approved SNAP: If the SNAP case is approved before the TANF application and a TANF IPV disqualification is imposed at the time TANF is approved, no means-tested income penalty is applied. However, once a TANF grant is budgeted on the SNAP case, any subsequent IPV disqualifications will result in application of the means-tested income penalty.

State Only Cooperation Requirements: The means-tested income penalty **cannot** be applied due to TANF state only cooperation requirements (e.g., verification not returned, noncooperation with the review of eligibility process, failed to appear for an interview). State only requirements normally end with a denial or termination of TANF benefits. A TANF IPV disqualification must occur and impact TANF income ***already included and budgeted*** on the SNAP case.

638 CHANGES IN PROGRAM ELIGIBILITY STANDARDS

If circumstances change and the household is subject to new TANF income standards or new SNAP income/resource standards, apply the changes

no later than the month following the month the change was required to be reported.

within 10 days from the date the change is reported allowing adverse action.

639 CHANGES FOR JOINTLY PROCESSED SNAP/SSI CASES

Jointly processed SNAP and SSI households have the same reporting requirements as other SNAP households.

640 CHANGES AFFECTING BENEFITS

Normal budgeting rules will be applied when determining if augmentation of a previously paid benefit month should be considered due to changes.

641 ADDITIONS TO THE HOUSEHOLD

Determine eligibility when a new member must be added. If the new household member is active in another household, do not add them until they are removed from the other household, unless they are a required TANF household member. Underpayments are made to the receiving household and overpayments calculated for the losing household if the member is not added and removed timely.

Simplified Reporting Households are not required to report changes in household composition once the eligibility interview has been conducted. If the agency becomes aware of a change, it must be acted on accordingly; however, under-payments and overpayments are not calculated unless the agency did not act on the known change timely.

641.1 Adding New Members to TANF Cases

A new member is added and payment is effective the date they enter the home if the change is reported timely unless they are not a required household member. If they are not required members, they are added and payment is effective the day they meet all eligibility requirements or the 30th day from the date of the request to include them in the household, whichever is sooner. The Addition to the Assistance Unit, Form 2109 may be used to request new members be added to the household.

If a new member is not reported timely and the change results in an underpayment, the effective date of the change is the date on which it is reported by the assistance unit or the date the change is discovered by the Division, regardless of when the change actually occurred.

If information or verification needed to add a required household member is not provided by the date requested, terminate assistance. If the new member is not required, deny their request and continue TANF for the remaining household members.

Exception: If necessary, hold the application past the 30th day to allow the household at least 10 days to comply. If the household has not complied by this deadline, take action to terminate the case no earlier than the next workday.

If the addition of a required member reduces benefits, calculate an overpayment beginning the month they entered the household.

641.2 Adding Newborns to the Case

If a newborn is reported timely and all eligibility requirements are met, newborns are required members and added to the TANF household effective their date of birth. If a newborn is not reported timely, the effective date of the change is the date it is reported by the assistance unit or the date the change is discovered by the Division. Upon notification of the child's birth, determine which eligibility factors apply

Newborns are eligible for Medicaid for one year without a separate application when the mother was eligible for Medicaid at the time of the birth.

Add newborns for medical when the agency has been notified of the child's birth and eligibility elements to add the newborn to the TANF household have not been verified. When TANF eligibility elements are verified at the time the agency is notified of the child's birth, add the newborn for cash to the TANF household. In this instance, it is not necessary to follow the above procedures for adding a newborn for medical only.

Note: If the birth occurred prior to the approval date, the newborn is treated as any other member.

641.3 Adding Members to PA SNAP Cases

If the change results in an increase in benefits, add the new member effective the next month after the change is reported. If benefits have already been issued for that month, update the case and issue a supplemental payment within ten (10) days from when the change was reported.

Example: The change is reported on March 25th. Add the new member to affect April's issuance. If the case manager is unable to act on the change prior to April's benefits being issued, add the new member to the case and issue a supplemental payment for April's benefits within ten (10) days from the date the change was reported.

The new members' TANF grant may be added to the SNAP case if the issuance has not been paid. However, TANF underpayments and supplemental payments are lump sum payments and counted as a resource except when the TANF payment covers a portion of an issuance month not yet paid and the underpayments will be received during the issuance month.

Notes:

- Add the new member to the SNAP household only if information to process the SNAP change is provided, but do not add the new person to the TANF case without obtaining verification required by that program.

- Children visiting or fulfilling court-ordered visitation privileges on an irregular basis, or spend the summer months or other holidays with the SNAP household are not required to be included in the household. These children are not considered to be residing in the household on a permanent basis. However, these children may, be included in the SNAP household for the time they are visiting if they are not currently receiving benefits in another household.

- In shared/joint physical custody situations (court ordered or otherwise) where the children reside with both parties, going back and forth between parents or other relatives (this could also be a shared relative and parent custody issue), determine who has the children at the time of the SNAP application.

If the other parent is not receiving SNAP benefits, the parent making the current SNAP application must include or add the children to their household. Once the case is approved, or the children are added to an existing case, eligibility continues until recertification or the children are reported out of the home. These households are simplified reporting households and are not required to report the child entering or leaving the household until recertification.

For example: If the mother applies and has the dependent children in her physical custody and the father is not on SNAP, the case is processed or updated with the children included. The children can go back and forth to the father's home and this will not cause ineligibility.

Verify if the other parent is contributing any cash or support for the children included in the SNAP household. If yes, budget the income.

Court-ordered custody, child support, cash contribution and residency may be verified by (not all inclusive):

- Court orders for custody/child support.
- Landlord/client statements.
- School records.
- Cash contribution statement/Form 2506.
- Investigations and Recovery evidence/home visits.

- If the other custodial party (parent/relative) has already included the children on a current application or are currently receiving SNAP benefits for the children, the children continue to be included in that SNAP household.

- If both parents, in a shared/joint custody situation apply for SNAP benefits on the same date, only one parent is entitled to include the children. If the parents will not make a choice or agree to allow the other one to apply for the children, the children will be excluded from both households. The case manager must document the circumstances to support the decision to exclude the children. In shared/joint custody situations, where the parties are unsure as to who should include the children, a determination will be made regarding the primary caregiver, where the children customarily takes their meals and, if applicable, who is ordered to pay support for the dependent children. If the parents apply on a different date, whoever applied first is the household to include the children.

641.4 Adding Members to NA SNAP Households

If the household reports a change timely and provides verification, it must be acted on within 10 days. Add the new member to the SNAP household effective the next month after the change was reported if the change increases the benefit, or the next appropriate month, allowing adverse action, if adding that individual would reduce or terminate the SNAP benefits. **Note: See notes in manual section B-641.3.**

If the household reports a change timely or untimely but delays providing verification, terminate the SNAP benefits allowing adverse. If the verification is provided prior to the effective date of the termination, reinstate the case and add the new member. DO NOT add the new member until the next month after verification is received.

641.4.1 Household Changes Affecting Pending SNAP Applications

If the household reports a new household member prior to approval of a pending application, the new member is added back to the effective date of the application. This member's needs, income and resources will be counted for the same period.

If a member of the household moves out of the household prior to the benefits being approved, do not consider the member's needs, income or resources.

641.5 Adding Mandatory or Non-mandatory Members

Step	Action	
1	Has the household provided all information or required verifications?	**Yes**: Add the member to the case.
		No: Go to Step 2.
2	Is the information or required verification available?	**Yes**: Go to Step 3.
		No: Deny the addition (non-required members) or terminate assistance (required members).
3	Is the information or required verification a legal requirement (such as citizenship)?	**Yes**: Deny or terminate.
		No: Go to Step 4.
4	Is the household addition a mandatory member?	**Yes**: Terminate the entire case.
		No: Deny the addition.

641.6 Adding Disqualified Members

If the member being added was disqualified for. . .	add the member effective the month. . .
intentional program violation	After the disqualification ends (see manual section B-422)
SSN or citizenship	After the disqualification/voluntary exclusion ends. If applicable, discontinue prorating the income the same issuance month the disqualified voluntarily excluded member is added.

For Employment and Training services, see manual sections A-861 or A-862.

641.7 Change in Caregivers

When a change in caregivers occurs, terminate current assistance no later than the month following the month the change is required to be reported (see manual section B-617). **Example**: A change occurs in January must be reported by the 5th of February. Current case terminates March 1st. If a change is reported earlier, the current case may terminate sooner allowing for adverse action. A new caregiver must provide an application and comply with eligibility requirements (see manual section B-113 for benefit effective date). Eligibility for cash benefits will not begin until the month after the month the children received the benefits in the original case due to no eligible children. Cash benefits cannot be duplicated in two households, although the new caregiver may be eligible for Medicaid.

PARENT TO NNRC

Example 1: Parent no longer resides with child(ren) as of January 14th. On January 15th, relative caregiver applies for assistance. Parent's case is terminated February 1st. The relative caregiver would not be eligible to receive cash assistance for these children until February 1st.

Example 2: Parent no longer resides with child(ren) as of January 14th. Change is reported on February 2nd. Parent's case is terminated March 1st. Relative caregiver applies for assistance on February 28th. The relative caregiver would not be eligible to receive cash assistance for these children until March 1st.

NNRC to PARENT

Example 1: Parent returns to child(ren) as of January 14th and applies for assistance. NNRC case is terminated February 1st. The parent would be ineligible for TANF due to no eligible children until February 1st.

Example 2: Parent resides with child(ren) as of January 14th. Change is reported on February 2nd. NNRC case is terminated March 1st. The parent would be ineligible for TANF, due to no eligible children until March 1st.

Exception: If the child lives with a natural/adoptive parent and a relative who has a court order declaring the parent mentally or physically incompetent to care for the child, the relative guardian may apply for assistance as a needy or non-needy relative caregiver. The natural/adoptive parent is included for assistance. See manual section A-330.

NNRC TO NEEDY RELATIVE CAREGIVER

When a NNRC requests to become a needy relative caregiver, deny the request for months already issued as NNRC as the children for whom the caregiver is applying were previously determined eligible and received assistance under NNRC. Needy relative caregiver assistance would be effective with months not already issued under NNRC.

642 CHANGES INCREASING BENEFITS (OTHER THAN ADDITIONS TO THE HOUSEHOLD)

Determine the effective date of the increase in benefits by

- evaluating the date of change; and
- allowing the household 10 days to provide verification before updating the case.

- evaluating the change;
- acting on the change within 10 days; and
- increasing benefits the next month after the change is reported.

If the change is not acted on before the benefit increase is effective, supplemental benefits must be issued.

642.1 Timely Reporting

The first month which must be affected by a change of circumstance is

- the second month following the month the change occurred.

Note: A change of circumstances is ALWAYS acted on as soon as administratively possible.

Exception: Intake applicants MUST report all changes up to and including the day of approval.

When a change is reported and verified timely, increase benefits effective the next month after the change is **reported**.

Note: If the case manager cannot act on the increase before it is to be effective, supplemental benefits must be issued prior to the end of the affected month.

642.2 Untimely Reports or Verifications

Recalculate the grant to determine any underpayment(s)/overpayment(s).

For all underpayments, the effective date of the change is the date it is reported by the assistance unit or the date the change is discovered by the Division, regardless of when the change actually occurred.

If a change is reported untimely and verification is received timely or untimely, increase benefits effective the issuance month after verification is **received**.

If the household fails to provide verification of a reported change by the required date:

- **terminate** assistance allowing adverse action notification.

Notes:

- When information essential to determine eligibility is requested and not provided, deny or terminate the case.
- Failure of a SNAP household to provide information for another program does not automatically cause a reduction or termination of SNAP benefits. The requested information for another program MUST be shown to be essential and needed for the SNAP case before action can be taken to reduce or terminate benefits.

643 CHANGES DECREASING BENEFITS

Determine the effective dates of changes that decrease benefits by applying adverse action. Act on the change within 10 days after the change is reported and notify the household allowing at least 13 days prior to the effective date.

If the change permitted the household to receive benefits they were not entitled to, calculate an overpayment as required under manual section F-130 for Status Change Reporters.

If the household is a Simplified Reporting household, calculate an overpayment for unreported changes or changes reported untimely only if the change made the household completely ineligible for benefits due to the head of household moving out of the State of Nevada or income exceeded 130% of the poverty level for their household size.

NOTE: Categorically eligible households that are Simplified Reporters who have income below 200% of poverty but exceeding 130% of poverty at approval are required to report changes in income exceeding 200% of poverty.

For reported changes or changes the agency became aware of that were not acted on timely by the case manager, evaluate the change to determine if the client received benefits which they were not entitled to. If so, calculate an over-payment starting from the date the case manager should have acted on the change (not from when the change occurred) and designate it as an agency error.

643.1 Complete Reports of Change

If the household reports a change and the information reduces or terminates benefits, act on the change **whether or not it is verified**. The change is effective the first benefit month following the 13-day adverse action notice. **Exception**: Adverse action may be waived in accordance with manual section A-1843.

Benefit Decrease - Adverse Action Not Required:

When the household reports a change in writing and includes all written information necessary to update the case, act on the change within 10 days. The deadline to update the case is 10 days after the change is reported, or the next allotment after the change is reported, whichever is later. No adverse action is required.

Note: If the next allotment is due within 10 days, no adjustment is needed; however, if time permits, the allotment is updated.

643.2 Incomplete Change Report

If a change is reported without verification or sufficient information, allow the household 10 days to provide the needed information by requesting it on Form 2429. The day after the request date is the first day of the 10-day period. If the verification is not provided:

- terminate assistance.

- If the information clearly makes the household ineligible, terminate assistance.
- If verification is not provided and it is impossible to take action without verification and the household fails to provide it, benefits are terminated.

PA SNAP – If applicable, remove the TANF grant from the SNAP budget the day following expiration of TANF adverse action notice. Change the case to **non-categorically eligible** SNAP status, if the household does not meet any other expanded categorical eligibility, and follow the non-assistance policy above.

Exception: Victims of Domestic Violence approved for fictitious address through the Secretary of State's CAP program must be allowed 17 days to provide verifications (Insufficient Information Request Form 2429) due to mail forwarding. Follow adverse action and processing time frames.

644 REPORTED CHANGES – SNAP BUDGETABLE EXPENSES

Pending SNAP Households – When an applicant reports a deductible expense on a new application determine if that expense must be verified prior to allowing the expense. For medical, child care and child support expenses the worker must request verification of the expense at the time of application. If the applicant fails to verify the expense, the case is approved without the deductible expense. Reported shelter expenses such as mortgage, rent, and utilities will be allowed without additional verification unless questionable.

Ongoing SNAP Households – For ongoing cases, when a household reports a change in deductable expenses, determine if that expense must be verified prior to allowing the expense. For medical, child care and child support expenses the worker must request verification of the expense at the time of the report of change. If the household fails to verify the expense, the expense is not allowed. If the household reports a change in shelter expenses such as mortgage, rent or utilities the expense will be automatically allowed without additional verification, unless questionable.

650 FORMS USED IN PROCESSING CHANGES (not all inclusive)

Form 2429, Insufficient Information Request

- Used to request additional information to determine eligibility when it was not provided with a reported change.
- Request information within 10 days of the reported change and allow 10 days for information to be provided.

Exception: Victims of Domestic Violence approved for fictitious address through the Secretary of State's CAP program must be allowed 17 days to provide verifications (Insufficient Information Request Form 2429) due to mail forwarding. Follow adverse action and processing time frames.

Notice of Decision

- Automatically produced and used to notify the household of an increase, reduction or termination in benefits.

Form 2584, Change Report

- Form 2584 is date-stamped when received as proof of the date of a reported change.

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710 (Reserved)

Restored Benefits

810 ENTITLEMENT TO RESTORED BENEFITS

Households are entitled to restored benefits when

- legislation, federal regulations, or court actions require restoration, or
- the household receives less than the amount to which it was entitled during any benefit month.

Households must be or have been eligible for TANF to receive restored benefits for the affected month(s).

Exception: Households not currently receiving TANF are eligible for restored benefits if the underpayment resulted from

- erroneously denied, terminated or reduced benefits; or
- an adverse action, which was appealed within 10 days and the household, waived the right to continued benefits, and the household was sustained.
- an error in benefit issuance was made and the household was not at fault;
- a hearing decision is overturned in court,
- a member is disqualified for an intentional program violation, which is later found inappropriate by the court.
- the household did not receive 10 calendar days to provide expense verification and it was subsequently provided.

Benefits

- are NOT restored for **unreported changes** or household errors;
- are restored regardless of whether the household is currently eligible;
- must be approved by the supervisor or office manager to be restored;
- are restored if the issuance cycle for which the benefits should have been paid has ended.

820 TIME LIMITS FOR QUALIFYING FOR RESTORED BENEFITS

Benefits are restored for no more than 12 months prior to whichever occurred first

- The date
  - the restoration request is received;
  - of discovery or notification a benefits loss has occurred;
  - judicial action was initiated and the court finds benefits were incorrectly withheld;
  - the household participated in a disqualification hearing and judicial action overturned the hearing decision.

830 HOW TO DETERMINE AMOUNT OF RESTORED BENEFITS

Correct ongoing benefits for a current certification.

- Disregard any months before the 12-month time limit.

Exception: Benefits will be restored to households found categorically eligible for a period denied SNAP from the original SNAP application date whether or not a TANF grant was paid, or the SSI payment effective date, or December 23, 1985 whichever is later.

- Determine the month the loss began;
- Determine if the household was eligible for each month it lost benefits.
- Before restoring benefits, obtain the information to determine the household's eligibility for the benefits in question;
- If benefits were denied, the loss is calculated from the date of application to the date the error was discovered or SNAP benefits were recertified. If terminated, calculate from the date of the initial loss, or if delayed, from the date benefits should have been received

  Note: When an under issuance is due to a change during the certification period, it is effective with the allotment which should have changed had the benefits been calculated correctly (e.g., the household has 10 days to report and action to update benefits must be taken in 10 days).

- Restore the difference between the amount received and the correct amount of benefits, unless the household owes a claim for an overpayment. Subtract the amount to be restored from the amount due on the claim. Issue any remaining benefit amount to the household.

831 Applying Restored Benefits Toward an Overpayment Claim

Determine the amount of restored benefits by

- recalculating the benefit for the month(s) in question to determine what the household is owed. If there is a restored benefit or underpayment due when there is an existing overpayment balance, the worker must for:
  - **Open cases:** Ensure the amount deducted from the benefit does not exceed 10% of the total budgetable gross income including the TANF cash benefit,

    or
  - **Closed cases:** Ensure the restored benefit is applied to the overpayment balance.
- subtracting any claim balance (active, suspended, or terminated including any compromised amount) from the lost benefits before the balance is restored.

  Exception: Retroactive benefits cannot be used to offset claims.

- Overpayment deductions are applied to the gross TANF payment prior to any deductions for sanction penalties.

Notify the household of the disposition of any restored benefits to which they were entitled.

840 NOTICE TO HOUSEHOLD

Notify the household of
- their entitlement to restored benefits;
- the amount to be restored;
- any offset applied to overpayment balances; and
- the right to appeal.

850 DISPUTED BENEFITS

If the household disagrees with the amount of benefits to be restored or any other restoration action, they may request a hearing within 90 days of the notice date.

As a result of a hearing request
- benefit restoration continues pending the hearing decision; and
- upon receipt, benefits are adjusted according to the hearing officer's decision.

The household may request a hearing if their request for restored benefits is denied. The request is documented with justification for the denial and the date denied.

860 METHOD OF RESTORATION

Restore all benefits owed at the same time. Refer to the TASK Guide for entry of the BMNT screen in NOMADS.

- Restore all benefits owed at the same time. Refer to the TASK Guide for entry of the BMNT screen in NOMADS.

Note: Issuances in the amount of $1, $3 or $5 are rounded to $2, $4 or $6.

870 CHANGES IN HOUSEHOLD COMPOSITION

If the household composition has changed, restore benefits to the household containing a majority of the people who were members when the loss occurred.

If a majority of the household cannot be located or is no longer living, restore benefits to the head of the household (HOH) at the time the loss occurred.

880 PROCEDURE FOR AUTHORIZING RESTORED BENEFITS

Upon discovery, authorize restored benefits by issuing an underpayment to current recipients and those who would be current recipients if the error causing the loss had not occurred.

- RLB cannot be issued for more than 12 previous months from when the agency is notified of, or discovered the loss.

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PROGRAM VIOLATIONS/SANCTIONS

910 INTENTIONAL PROGRAM VIOLATION

910.1 Intentional Program Violation (IPV) Definition

An IPV is an intentional action by an accused individual for the purposes of establishing or maintaining program eligibility, or increasing or preventing a reduction in the benefit amount when they:

- Made a false or misleading statement, or misrepresented, concealed or withheld information; or
- Committed any act that violates Nevada Revised Statute 207.340, or Nevada Revised Statute 422A.700, or intentionally violates any rule or regulation established by the Division of Welfare and Supportive Services (DWSS); or
- Made an attempt to obtain, increase or continue public assistance benefits for themselves or others to which they would otherwise not be entitled; or
- Received benefits to which they would otherwise not be entitled; or
- Failed to comply with reporting requirements as set forth in E&P manual section B-600; or
- Made a false or misleading oral or written statement or submitted a false document to DWSS; or
- Altered any voucher or check to increase its value or duplicated any voucher or check to receive benefits they were not entitled to receive; or
- failed to use or return training funds in a manner consistent with the training agreement.

The actions listed above do not have to result in a claim. If there is potential for erroneous benefits being issued, an IPV may exist.

Intent may be demonstrated in a number of ways, such as:

- the accused individual had reason to know or had knowledge of the information withheld or misrepresented;
- the accused individual failed to report or clarify the information withheld or misrepresented during contact with DWSS or contracted staff, either in person, by mail, by phone, FAX or Electronic Mail;
- the accused individual has demonstrated the ability to report or clarify required information in the past;
- the accused individual has a history of previous program violations and/or client caused claims; or
- the accused individual signed and/or initialed a DWSS document acknowledging their reporting requirements/obligations and the penalty for hiding or giving false information.

The following acts are illustrative but not exclusive:

- Concealing or misrepresenting – identity, Social Security number, employment information, paternity information, pregnancy information, marital status, household resources, persons living in the home earned or unearned income, child care information, assets, residency, household expenses, non-custodial parent information, citizenship, household members temporary absence from the home, receipt of public or government assistance, criminal information, school attendance of children, child support issues, medical expenses, separate food units, medical conditions of persons living in the home, lump sum disbursements, winnings, fleeing felon status, subsidized housing, prior Intentional Program Violations or any other information specifically addressed on the public assistance application.
- Altering, forging, duplicating or transferring of DWSS vouchers, forms, checks, affidavits, or any documents submitted to DWSS.
- Misuse or unauthorized presentation, transfer, acquisition, receipt or possession of TANF or SNAP electronic credits or benefits, vouchers, checks, warrants or affidavits,

910.2 Disqualification Penalties for Intentional Program Violation (IPV)

Accused individuals who are found to have committed an IPV, by a court of appropriate jurisdiction, or have signed a disqualification consent agreement, are ineligible for any program benefits for:

A pro rata reduction of the ongoing benefit for:

- First Violation **12 months**
- Second Violation **24 months**
- NEON (training funds) **60 months**
- Residence/ID **120 months**
- Third or Subsequent Violation **Permanently**

A NEON IPV disqualification applies to the TANF program.

If a participant is found to have committed any IPVs due to misuse of NEON training funds, their household will be disqualified from TANF for 60 months.

Note: See manual section A-814.5.1.3 for the Definition of Misuse of Funds. IPV disqualified individuals ineligible for TANF are eligible for Medicaid benefits, if otherwise determined eligible.

- First Violation **12 Benefit months**
- Second Violation **24 Benefit months**
- Residence/ID **120 Benefit months**
- Third or Subsequent Violation **Permanently**

911 DETERMINING INTENTIONAL PROGRAM VIOLATION (IPV) DISQUALIFICATION OCCURRENCES

When one or more IPVs are discovered, each occurrence must be separated by an administrative disqualification order or signed and approved Administrative Disqualification/Penalty Waiver or criminal court Judgment of Conviction (JOC) before the next level of penalties may be pursued. Occurrences are separated in the following manner:

1st Violation	Program violations occurring from the date of the accused individual's birth until the date of disqualification (date of the Hearing Officer's notification letter) order or date of signed and approved waiver (date signed by designated Investigations and Recovery (I&R) staff) or date of the JOC, regardless of the number of violations committed in between.

2nd Violation	Program violations occurring after the approval date of the initial signed waiver until the date of a subsequent signed and I&R approved waiver or after being found guilty of a first violation until the date of a subsequent disqualification order or Judgment of Conviction, regardless of the number of violations committed in between.

3rd or Subsequent Violation	Program violations occurring after the approval date of the second signed waiver until the date of a subsequent signed and I&R approved waiver or after being found guilty of a second violation until the date of a subsequent disqualification order or Judgment of Conviction, regardless of the number of violations committed in between.

911.1 Identification of Intentional Program Violations (IPVs)

IPVs may be identified through a variety of means. The violation **does not** have to be discovered through an investigation or omission by the accused individual and does not have to include the incorrect payment of benefits. As defined in section B-910, the mere **attempt** to acquire benefits incorrectly may be reason enough to pursue disqualification penalties.

Substantiation of a violation may be accomplished through, but is not limited to, collateral contacts, automated interfaces, case investigations or eligibility interviews.

912 REFERRAL PROCEDURES FOR INTENTIONAL PROGRAM VIOLATION (IPV)

Any DWSS employee or staff contracted by the Division may recommend disqualification be initiated against an accused individual by completion and transmittal of Form 6021-AF, "Administrative Disqualification/Penalty Waiver." This is the only form used to pursue an administrative disqualification/penalty for IPVs. Included in the form are the following:

- Violation Summary; and
- Rights of the Accused; and
- Waiver of Right to Administrative Disqualification/Penalty

When completing Form 6021-AF, the worker must check for prior disqualifications by sending an email to welfinvest@dwss.nv.gov (Welfare Investigations) to ensure the appropriate penalty period is correct.

912.1 Signed IPV Waiver

If a signed waiver is obtained, the worker shall:

- create an Investigations and Recovery Information System (IRIS) referral by completing the applicable referral detail fields;
- select the "IPV Waiver Attached" option;
- enter IPV waiver information and save the referral; and
- scan and attach the signed IPV waiver document to the referral.

Upon successful referral generation, IRIS will route the referral to the Referral Management Unit (RMU) for case establishment and routing through the IPV process.

912.2 Request I&R Pursue IPV

If the accused individual refuses to sign the waiver, the worker must refer the case to the I&R Unit for an investigation to pursue an IPV by:

- creating an IRIS referral by completing the applicable referral detail fields; and
- selecting "I&R to Complete IPV Waiver"; and
- entering IPV waiver information and then saving the referral.

Upon successful referral generation, IRIS will route the referral to the RMU for case establishment and routing through the investigative process.

Contact with the accused individual prior to initiation of a SNAP disqualification procedure is not required by SNAP regulations. DWSS staff having sufficient evidence of an individual's guilt may request an administrative disqualification hearing without any intervening communication with the accused individual.

However, contacting the accused individual prior to initiating a formal procedure affords the individual the opportunity to explain away questionable circumstances to I&R staff and avoid the necessity of further action. The contact also provides I&R staff an opportunity to gather further evidence if obtained from the accused individual voluntarily. I&R staff may request but not require individuals to attend meetings to discuss their suspicions. I&R staff may request accused individuals to discuss the issues over the telephone or respond in writing. If the accused individual fails or refuses to respond to any such request, I&R staff having sufficient evidence may proceed with the administrative hearing process. In no event, will the accused individual or household be terminated for non-cooperation with the IPV process

Form 6058-AF, "Timely and/or Accurate Reporting," may be sent to the accused individual as a warning of the suspected violation; however, this form is not necessary to pursue an IPV disqualification.

913 INTENTIONAL PROGRAM VIOLATION (IPV) METHODS

There are three separate methods by which an accused individual may be penalized for an IPV, they are:

1. Acknowledgment and voluntary acceptance of the penalties by the accused, via a signed IPV Waiver; or
2. By formal order of the DWSS hearings officer after conclusion of the administrative penalty/disqualification hearing process; or

3. By conviction in a criminal court for any offense related to violation of any program administered by DWSS.

914 INTENTIONAL PROGRAM VIOLATION (IPV) DISQUALIFICATION HEARINGS

914.1 Consolidation of Administrative Disqualification Hearings

Disqualification hearings for TANF and SNAP may be combined into a single hearing if the factual issues arise out of the same or related circumstances and the household received prior notice the hearings will be combined.

Combining hearings permits presentation of issues at a common hearing time. However, an individual request for Administrative Disqualification/Penalty Waiver, Form 6021-AF, must be completed for each accused individual and for each program.

If combined, a separate file must be established for each case, and separate presentations must occur for each program. This permits individual rulings for each separate program violation.

914.2 Pre-Hearing Resolutions

IPV issues may be resolved without a hearing or prior to a scheduled date of hearing:

- If the accused individual signs the “Waiver of Right to Administrative Disqualification Hearing” section of Form 6021-AF; or
- DWSS formally withdraws their request for a disqualification hearing.

The IPV disqualification waiver may also be used to address accused individual’s program violations without prior submittal of the 6021-AF to the Hearing Unit. This permits accused individual’s acceptance of IPV disqualification penalties without the formality of the actual hearing.

Signed IPV disqualification waivers are forwarded immediately to the designated I&R staff for review and approval signature. After approval, I&R staff will prepare and send a copy of the waiver and Notice of Imposition of Penalties to the accused individual and the appropriate case manager advising of DWSS’s intent to impose disqualification penalties.

If a signed waiver is obtained, penalties shall not be imposed until the case manager has received notification from I&R staff. Once disqualification data is entered to the system by I&R staff, the appropriate case manager will be notified to complete the imposition of penalty.

No further administrative appeal procedure exists after an accused individual waives his/her right to an administrative disqualification hearing and a disqualification penalty has been imposed. The accused individual however is entitled to seek relief in a court having appropriate jurisdiction.

914.3 Intentional Program Violation (IPV) Hearings Process

Administrative Disqualification Hearings and Pre-hearing resolutions are set forth in DWSS's Administrative Manual, section 3103.

On the hearing date, the employee who initiated the IPV action (See manual section B-913) must be available to witness if necessary; however I&R will represent the DWSS and present the case to the hearing officer. See manual section B-1000 for procedures related to individuals contesting an action for other than IPV.

914.4 Intentional Program Violation (IPV) Disqualification Outcomes

Issues sent to the hearing office are resolved on a case-by-case basis. Only **written decisions** issued by the hearing officer, state or federal courts are enforceable. The formal written decision order may:

- Deny or approve the request for a hearing; or
- Deny or approve the request for a disqualification based on a hearing; or
- Approve, with modification of the penalties.

"Reconsideration of the Hearing Decision" is in manual section 3102.15 of DWSS's Administrative Manual.

Accused individuals who disagree with the decision of the hearing officer may appeal their case to district court within ninety (90) days of the date of the hearing officer's decision.

915 IMPOSING INTENTIONAL PROGRAM VIOLATION (IPV) DISQUALIFICATION PENALTIES/REPAYMENT OBLIGATIONS

Disqualification penalties are imposed differently for open and closed cases.

For open cases, disqualification penalties are imposed against the next benefit issuance which the case manager can administratively address after receipt of a signed and approved waiver or an administrative hearing officer's decision or criminal court JOC and I&R notification to impose penalties. Penalties will continue for the ordered period of time or in accordance with the disqualification periods specified in B-910.2. Worker inability to affect benefits because of computer programming restrictions does not negate the case manager's ability to impose the full disqualification period.

For closed cases, the penalties will be imposed immediately following receipt of a signed and approved waiver or a hearing officer's disqualification order or criminal court JOC and I&R notification to impose penalties. Individuals remain ineligible for program participation for the entire disqualification period.

If case managers experience difficulty in coding the disqualification penalty, they are encouraged to seek the assistance of the Help Desk, I&R Unit supervisor, or the I&R program specialist.

- If the case manager fails to apply penalties within specified time frames, only the remaining months of the disqualification may be imposed, (unless permanently ineligible for participation).

  Note: Timely action is required when the case manager has the clear and present authority to impose penalties.

- ***If the disqualification is associated with the incorrect payment of benefits, the case manager must also initiate action to have the claim re-classified as an IPV. This action will facilitate an increased benefit reduction percentage and greater Division retention of recoveries.***

915.1 Count of Disqualified Months Toward Time Limits

When an accused individual has been found to have committed an IPV, disqualified months will count against both the state and federal time limits.

The disqualified member must still continue to meet NEON requirements, unless exempt.

915.2 Budgeting Ongoing Eligibility for Disqualified Members

To determine the need and amount of TANF and SNAP benefits, consider all income and resources of an accused individual required to be in the assistance unit/household, whether or not they are subject to disqualification penalties. Their income and resources are considered available to the assistance unit/household.

915.3 Repayment Obligation of Household Members

All TANF household members and adult SNAP household members, disqualified or not, remain responsible for claim repayment both during and after the disqualification period, until recoupment is complete.

Example: If the legal parent on a TANF case is disqualified, the repayment will be taken from any ongoing benefit containing members who participated during the period of time of the program violation.

920 IPV DISQUALIFICATION INFORMATION SYSTEMS

920.1 Nevada's Central Repository for Program Disqualification Information

All Nevada hearing decisions, criminal court JOC and signed and approved disqualification waivers are transmitted to the Central Office I&R Unit for maintenance and storage. This information is available for use by all DWSS staff. Its primary purpose is to provide documentary evidence of why a disqualification penalty was imposed and substantiate previous disqualification occurrences.

Before completion or submittal of Form 6021-AF, "Administrative Disqualification/Penalty Waiver," case managers must contact the Central Office I&R Unit to obtain information about prior occurrences. See manual section B-912.

920.2 National Electronic Disqualified Recipient Subsystem (DRS)

- The Hearing Unit forwards all TANF disqualification records to Central Office.

- **National SNAP Disqualification Information Access:** The Food and Nutrition Service (FNS) operates a National Electronic Disqualification Recipient System (EDRS) which maintains data for accused individuals found to have committed a SNAP violation within participating states.

- **Reporting Disqualifications:** When an accused individual is disqualified from program participation through a criminal court order, administrative disqualification hearing or voluntary waiver, the disqualification will be reported by I&R in the Central Office to the FNS via the EDRS.

930 SANCTIONS

931 Definition

Effective December 15, 2003, a sanction is a penalty imposed which terminates a household's TANF cash benefits when the household has failed to comply with work requirements (i.e., attend orientation, participation with assessments, training and work activities) or the terms of the Personal Responsibility Plan (PRP). The head of household is responsible for ensuring the compliance of all other household members. Prior to December 15, 2003, the sanction penalty was gradual, with both the monetary amounts and time periods increasing with the next higher sanction level.

As a good faith gesture, ongoing TANF households under a benefit reduction due to a sanction implemented prior to December 15, 2003 will have their TANF benefits restored for January 2004 at a non-sanction level. The head of household will be issued a 30-day conciliation notice and subject to the new sanction policy.

A sanction occurs when an accused individual fails to cooperate with work requirements. The accused individual is ineligible to receive SNAP during the sanction period, but the remaining household members do not lose eligibility.

932 Non-Cooperation with Employment and Support Services

Effective 10/01/2008, non-cooperation with the household's established Personal Responsibility Plan (PRP) will result in a three (3) month sit-out against all members of the household for TANF.

Refer to manual sections A-827.2 – Action for Non-Compliance and A-827.3 – Household Response After a Notice of Non-Compliance.

If the household or any member of the household reapplies during the three-month period, their request for TANF assistance will be denied.

If a NEON mandatory individual in a sit-out joins another TANF household, the household s/he joins will be ineligible (considering adverse action) until the sit-out period ends.

If a non-NEON mandatory individual who was a member of a household with a sit-out joins another TANF household, the child is considered an ineligible member until the sit-out ends. Once the sit-out period ends, the child(ren) must be added to the existing TANF case as an eligible member.

If an accused individual fails to cooperate with SNAP work requirements, a sanction will be imposed against the accused individual's SNAP benefits, as appropriate.

- **First violation** - ineligible for one month **and** until compliance.
- **Second violation** - ineligible for three months **and** until compliance.
- **Third and subsequent violations** - ineligible for six months **and** until compliance.

The computer system will monitor the first, second and subsequent occurrences and prevent eligibility until the period ends.

933 Personal Responsibility Plan (PRP)

If the household fails to cooperate with any of the provisions of the PRP, a sanction will be imposed against the household's TANF benefit. These terms may include, but are not limited to, participation in NEON, job retention assistance, vocational testing/training, education, domestic violence referrals, drug/alcohol testing and treatment, mental health treatment, counseling, parenting classes, mentoring programs, immunizations.

Exception: Although the PRP includes a provision for ensuring school attendance for children ages 7 to 11 under the Immunization/School attendance section, failure to cooperate with this statement is a non-sanctionable offense.

For NEON **mandatory** participants who fail to comply with work requirements or the terms of their PRP, refer to manual section A-800

A sanction is NOT imposed:

- when the head of household is not an eligible member of the assistance unit (NNCT, SSI or ineligible non-citizen);
- against a NEON exempt household; or
- against a household maintaining employment at the participation standard level.

940 INELIGIBILITY FOR FAILURE TO MEET PROGRAM REQUIREMENTS

941 INELIGIBLE CATEGORIES/PERIODS

941.1 Fleeing Felons

Applicants or recipients are not eligible to participate in the TANF or SNAP for any period of time during which:

A. they are wanted by law enforcement for any action associated with a crime which is classified as a felony; or
B. wanted by law enforcement for questioning about a crime which is classified as a felony.

Case managers will use information disclosed on the application/redetermination/recertification or other program report forms, or verified by law enforcement to identify individuals affected by this ineligible category.

Note: Although the agency must take action on known information which could affect a household's SNAP benefits, it may delay taking such action if law enforcement officials request a delay of action because it could interfere with their investigation or apprehension of the fleeing felon. Refer any such requests directly to the I&R supervisor or I&R specialist for review and approval of the request. I&R will advise the case manager of any decision to delay a disqualification. The case manager must future action the case file for a 30-day follow up. An eligibility action to disqualify the individual may be taken upon notification from I & R the delay request has been lifted.

941.1.1 Ineligible Period for Fleeing Felons

Individuals are not eligible to receive TANF or SNAP benefits during any period of time they are classified as fleeing felons. Once the accused individual has been determined ineligible under this category, the accused individual must provide verification they are no longer wanted by law enforcement before eligibility may be restored.

941.2 Parole or Probation Violators

Applicants or recipients are not eligible to participate in the TANF or SNAP program for any period of time during which they are violating a condition of their parole or probation when associated with a felony crime.

Case managers will use information disclosed on the application or verified by the Division of Parole & Probation to determine ineligibility.

941.2.1 Ineligible Period for Parole or Probation Violators

Individuals are not eligible to receive TANF or SNAP benefits during the time they are in violation of parole or probation conditions. Once ineligibility is determined, the applicant or recipient must provide written verification from the Division of Parole & Probation they are currently meeting all conditions of their parole or probation before they may regain eligibility.

941.3 Felony Drug-Related Convictions

941.3.1 Ineligible Period for Individuals Convicted of Felony Drug-Related Offenses

Individuals, regardless of age, who are convicted of felony drug related offenses on or after August 22, 1996 are permanently disqualified for TANF and SNAP benefits. This includes possession, use or distribution of a controlled substance. Individuals *charged* prior to August 22, 1996 and *convicted* after that date are considered eligible.

Note: To be convicted of a felony, a person must have been tried as an adult in an adult criminal court.

Individuals participating in an alternative sentencing program have not been convicted; the actual conviction may be pending the next court date. These individuals would maintain eligibility until they are actually convicted.

An individual may be determined to be eligible after the conviction if the individual provides verification they are currently participating in or has successfully completed a Division approved program for the treatment of the abuse of controlled substances since the last conviction **and**:

a) Demonstrates to the satisfaction of the Division that he/she has not processed, used or distributed controlled substance since he/she began the program; **or**
b) Is pregnant and a physician has certified in writing that the health and safety of the mother and the unborn child are dependent upon the receipt of benefits.

An individual will be verified as not having possessed, used or distributed a controlled substance since their treatment program began if:

- The individual has no further arrest record; or
- The individual provides a statement from their Parole Officer (if they are currently serving a probation period).

941.3.2 Division Approved Programs/Providers

Division approved programs include programs/providers approved by the Nevada Substance Abuse Prevention and Treatment Agency (SAPTA) and the national Substance Abuse & Mental Health Services Administration (SAMSA). Programs completed while the individual was incarcerated or court ordered as a component of their parole or probation also meet the definition of a Division approved program.

Verification

A statement from:

- a SAPTA or SAMSA approved treatment provider is acceptable verification of participation or successful completion of a substance treatment program. A current list of Nevada SAPTA approved providers can be found online at http://mhds.state.nv.us. From the Home Page select Substance Abuse Prevention and Treatment Agency, select Programs then select Treatment Programs to access the most current list of approved treatment providers OR
- For out-of-state SAMSA program/providers verification contact the SNAP Program Specialist in Central Office; OR
- the parole officer in or out of state verifying participation in or completion of a substance abuse program; OR
- federal/state officials, social workers, medical/health providers in or out of state of completion of a substance abuse program that is court ordered and/or a condition of parole/probation; OR
- a combination of sources verifying participation in or completion of a substance abuse program.

Note: The client's statement cannot be accepted to verify participation in or the completion of an agency approved program. Actual documentation must be obtained from the household, or collateral contact information documented in the case record, to determine the program completed and the completion date or to verify current participation.

The inability of an individual to provide proof of a completed program or the inability of the individual to enroll in a program, either due to cost or lack of need, does not create eligibility. These individuals will remain ineligible until proof is provided or enrollment occurs.

941.4 Misrepresentation of Identity or Residence

Accused individuals who are found to have committed an IPV either through an administrative disqualification hearing, a criminal court JOC or have signed a disqualification consent agreement, are ineligible for program benefits for:

- 120 months for accused individual who misrepresent their place of residence or identity in an attempt to receive benefits simultaneously from one or more entities.

Note: The act of fraud is complete when the fraudulent statement is made. Therefore, the accused individual does not have to actually receive multiple benefits to be disqualified.

Example:

Residence – The accused individual is receiving SNAP benefits in California, moves to Nevada without requesting their benefits be terminated in California and fails to disclose they received SNAP benefits in California.

Identity – The accused individual applies for benefits under one identity and SSN, and submits another application for benefits under another identity and SSN.

941.4.1 Ineligible Period for Misrepresentation of Identity or Residence

Accused individuals convicted of misrepresentation of:

- Accused individuals found through a signed and approved Administrative Disqualification/Penalty Waiver, administrative hearing or federal or state court of having made a fraudulent statement or representation with respect to their identity or place of residence to receive TANF from one or more entities simultaneously, are ineligible for 120 months.

- Accused individuals found through a signed and approved Administrative Disqualification/Penalty Waiver, an administrative hearing or federal or state court of having made a fraudulent statement or representation, with respect to their identity or place of residence to receive multiple SNAP benefits simultaneously, are ineligible for 120 months.

941.5 Accused Individual Convicted of SNAP Trafficking

Accused individuals convicted of knowingly using, transferring, acquiring, altering or possessing coupons, authorization cards or access devices in any manner contrary to the Food Stamp Act/regulations involving $500 or more are ineligible to participate in SNAP.

941.5.1 Ineligible Period for Accused Individual Convicted of SNAP Trafficking

Ineligible for two years:

- First finding of trading a controlled substance for benefits.

Ineligible permanently:

- Second finding of trading a controlled substance for benefits or;
- First finding of trading firearms, ammunition, or explosives for benefits; or
- First finding or trafficking SNAP benefits having a value of $500 or more.

941.6 Minor Parent Without Approved Living Arrangements

Unmarried minor parents (under age 18) who do not live with a parent, guardian, other adult relative or in an approved adult supervised setting are not eligible to participate in the TANF program unless exempt for good cause.

941.6.1 Ineligible Period for Minor Parents Without Approved Living Arrangements

Minor parents who are not in approved living arrangements are ineligible to receive TANF benefits.

941.7 Absence of Minor Child for Significant Period

A minor child who is expected to be absent from the household for 45 or more consecutive days and does not meet an exception (see manual section A-1137) is ineligible to participate in the TANF program.

A parent/caretaker relative **who fails to report** such absence by the end of the five-day period <u>it becomes clear</u> the child will be absent for longer than the specified allowable time period is ineligible to participate in the TANF program.

941.7.1 Ineligible Period for Absence of Minor Child for Significant Period

Minor children absent longer than the specified period are ineligible to receive TANF benefits.

The disqualification for a parent/ caretaker who fails to report such absence by the end of the five-day period will be determined through the IPV process.

Note: Remove the ineligible child(ren) as soon as administratively possible. If the only eligible child has left the home or was never in the home, the case must be terminated. The IPV process will still be followed.

Unreported changes are pursued for IPV and/or a claim.

941.8 Non-Cooperation with Social Security Number Requirements

Each household/assistance unit member or persons requesting assistance for themselves must provide a Social Security number or apply for a Social Security Number at a Social Security office. A person seeking benefits on behalf of children in their care must provide the children's Social Security numbers or meet enumeration requirements to receive assistance. If an individual fails to comply, or voluntarily chooses not to provide an enumeration:

Terminate or deny assistance.

If a household member has refused or failed without good cause to provide or apply for an SSN, then that **individual** shall be ineligible to participate in SNAP.

Always evaluate the circumstances for "good cause" or "religious belief's" as reasons for not providing or pursuing enumeration (see manual section A-1300).

Note: Illegal non-citizens are not required to obtain or provide a Social Security number, as the Social Security Administration may not issue one to these individuals. Newborns are exempt from Social Security enumeration requirements under OBRA eligibility provisions for medical assistance only (MAPS-545). Refer to manual section A-1300 for newborn enumeration rules for SNAP and TANF.

941.8.1 Ineligible Period for Non-Cooperation with Social Security Number Requirements

- If the individual refuses to comply with Social Security requirements, terminate or deny TANF.

Note: If the individual is pursuing but unable to obtain the information necessary to obtain an SSN for an assistance unit member, only the person who does not meet the SSN requirements is ineligible. This is **not** considered a non-cooperation issue. See manual section A-1300.

Only the individual for whom the household has refused or failed without good cause to provide or apply for an SSN shall be ineligible in the SNAP household. These individuals are considered excluded household members. The exclusion continues until proof of an SSN or good cause has been provided.

Note: Households/household members who have sent for the needed verifications but have not yet received them are considered to be cooperating. These households/individual members may receive SNAP for two or more months. See manual section A-1300.

941.9 Minor Parent Failing to Meet Educational Requirement

A minor parent is ineligible to participate in the TANF program unless enrolled in and attending full time an elementary or secondary school, vocational or technical school equivalent to a secondary school, or an approved alternative education program (includes GED programs).

941.9.1 Ineligible Period for Minor Parent Failing to Meet Educational Requirement

Minor parents who fail to meet the educational requirement are ineligible to receive TANF benefits.

950 RESERVED

960 BUDGETING STEPS INCLUDING DISQUALIFICATIONS CLAIMS

TANF Budgeting Steps

First Step - Maximum grant is established based on number of eligible members in the household (see TANF Needs Standard Chart in Part C-141);

Second Step - Subtract earned income (after all applicable work expenses and/or disregards and/or child care expenses have been deducted);

Third Step - Total all net earned income with countable unearned income and subtract this amount from the payment need standard based on the number of TANF household members eligible to be included for assistance. The result of this step is the **net grant**.

FINAL NET GRANT

Fourth Step - Subtract any claim from the net grant.

Claims

Claim deductions are calculated by adding together:

1. Gross earned income (include income which is otherwise disregarded in calculating the grant);
2. Unearned income; and
3. Net grant amount.
   Multiply the total by 10% (20% if claim). (See manual section F-160) The end result is the claim amount to be deducted from the net grant amount.

SNAP Budgeting Steps

Once household members' income and expense data is entered into the computer, the system will calculate the correct allotment based on household size, income and any **applicable** shelter expenses, utility allowance, phone or medical expenses. **Note**: Off line manual budgets are done for claims. SNAP budgeting is done by the computer except for **manual claims** which require recomputing the allotment for each month in question.

Steps: Apply the gross income test in both the eligibility and allotment determination, unless policy specifies otherwise.

Compare countable gross income to the maximum gross monthly income allowable by household size, except for 1) households containing an elderly or disabled member; and 2) categorically eligible cases. If the household does not pass the gross income test, deny/ terminate benefits.

1. Add all gross earned income.
2. Multiply by 80% for net earned. **Do not allow the 20% for claims resulting from non-reporting of earnings.**
3. Add all unearned income to net earnings.
4. Subtract the standard deduction, allowable dependent care and verified court ordered child support payments. The result is the adjusted income. **If elderly/disabled**, also subtract medical expenses less the $35 deductible to reach the adjusted income.

960 BUDGETING STEPS (Con't.)

Fifth Step – For an IPV disqualification, subtract "needs" (pro rata share) for each disqualified member.

Note: Disqualification penalties may be assessed against more than one person in a grant.

If all persons on a case are disqualified, the case will not close automatically. The worker must close the case.

5. Subtract allowable shelter expense:
   - Total monthly shelter expenses
   - Multiply adjusted income by 50%
   - Subtract remainder of adjusted income from shelter expense.
6. Subtract the lesser of actual expenses or fixed max expense from the adjusted income for net income. **If elderly/disabled**, subtract the actual excess shelter expense from adjusted income for net income.
7. To determine allotment value:
   - Use Allotment Tables in Part C-220

     or
   - Multiply net income by .3 (30%) and subtract unrounded product (2 decimal places) from the maximum allotment for the household size.

Claims (also see manual section F-160):

Claims deductions are determined by multiplying the monthly allotment:

a. by 10% for agency and client claims; **OR**
b. by 20% for IPV and Fraud claims.

960 BUDGETING STEPS (Con't.)

TANF BUDGETING EXAMPLES With Claims/Sanction

Family of 3 - Gross grant = $383 - Earned income = $200/mo. There is no unearned income.

Example: 1. Intake Case:

Compare total household earned/unearned income to the 130% of Poverty. If eligible, deduct $90/20% work expense, child care expenses and add unearned income (if applicable).

Compare this *net income* to the 100% Need Standard for the month of application. If the net income is less than the 100% Need Standard, the appropriate earned income disregard will be effective the first grant month. Subtract any unearned income from the payment allowance amount to determine the amount of the cash grant.

First Through Third Month With Earnings & 100% Earned Income Disregard Applied

$383 maximum grant
-$ 0 earned income - 100% disregard
$383 net grant amount

Fourth Through Sixth Month With Earnings and 85% Earned Income Disregard Applied

Without Child Care	With Child Care
$383 maximum grant – $ 30 earned income – 85% disregard $353 net grant amount	$200 gross earned income – $170 85% disregard – $ 30 child care $ 0 net earned income $383 maximum grant – $ 0 net earned income $383 net grant amount

960 BUDGETING STEPS (Con't.)

Seventh through Ninth Month With Earnings and 75% Earned Income Disregard Applied

Without Child Care	With Child Care
$383 maximum grant – $ 50 earned income – 75% disregard $333 net grant amount	$200 gross earned income – $150 75% disregard – $ 30 child care $ 20 net earned income $383 maximum grant – $ 20 net earned income $363 net grant amount

Tenth through Twelfth Month With Earnings and 65% Earned Income Disregard Applied

Without Child Care	With Child Care
$383 maximum grant – $ 70 earned income – 65% disregard $313 net grant amount	$200 gross earned income – $130 75% disregard – $ 30 child care $ 40 net earned income $383 maximum grant – $ 40 net earned income $343 net grant amount

Example: 2. Ongoing Cases:

If a member of an ongoing case with no earnings begins receiving earned income, they are eligible to receive the earned income disregards (if not previously exhausted) without applying the income tests, using timely reporting criteria.

If a new member with income is added to a household with disregards in place, apply the earned income disregard to the new member's earnings the month they come into the home. Do not compare their income to either the 130% of Poverty or 100% Need Standard.

Use the examples listed above for determination of the final payment based on the corresponding disregard level.

960 BUDGETING STEPS (Con't.)

Example: 3. Ongoing Case With 3 Persons - Claim

$383 maximum grant
-$ 0 earned income - counted due to 100% disregard ($200/mo. earnings)
-$ 0 no unearned income to add
$383 net grant

- Manual Claim (CL) Computation - Round Down at each step (10% or 20% if IPV overpayment)

Step 1.	$383 net grant x 10% ($38.30)	=	$38
Step 2.	$200 gross income x 10%	=	$20
Step 3.	Claim Deduction	=	$58

Step 4. $383 net grant
-$ 58 subtract CL deduction
$325 grant amount after CL

Example: 4. Ongoing Case with 3 Persons -- Disqualification

Calculate the IPV disqualification amount.

$383 net grant
$127 pro rata share ($383/3) = $127 is disqualification amount

If this same household had two IPV disqualified individuals, the pro rata share would be 2/3 of the net grant ($255).

970 RESERVED

980 RESERVED

990 OTHER

991 Additional Information

Use Form 4834 to inform the investigator of any new information that would affect the claim for a case under investigation for Intentional Program Violation.

992 Misuse of Benefits

The USDA is notified of:

- violations by retail grocery stores on the redemption of SNAP. (**Examples:** allowing unauthorized purchases and accepting benefits for previous purchases.)
- misuse of SNAP by authorized representatives of drug or alcohol treatment centers and group living arrangements certified by the USDA as a retailer.
- Investigations & Recovery staff will notify the Office of the Inspector General of:
  - suspected misuse of benefits by program participants; and
  - SNAP security violations by postal employees or issuance personnel.

995 Forms Used for Intentional Program Violations (IPVs)

- Form 2649, Administrative Disqualification Hearing Summary
- Form 6021, Request for Administrative Disqualification Hearing
- Form 2030, Report Claim Determination/Disposition
- Form 6029, Request for Administrative Disqualification Adjudication/Hearing

996 Forms Used for Other Disqualifications/Sanctions - Reserved

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Hearings

1010 RIGHT TO APPEAL

A hearing may be requested by a household member or an authorized representative on any action to deny, reduce or terminate benefits. In addition, households may request a hearing:

- on an action to make payments to a protective payee, or
- because an application was not acted on with reasonable promptness and/or according to specified time frames.
- on any action taken which affects their benefits, including approvals and increases.

A hearing request may <u>not</u> be granted by the Hearing Officer when:

- the request is not received timely;
- the sole issue is either a state or federal law requiring an automatic grant adjustment;
- benefits are reduced or terminated as a result of mass change without individual notice of adverse action.
- the issue is a denial for extension of TANF benefits due to hardship. Denial of a hardship request is not an action to deny, reduce or terminate benefits. It is a denial to continue benefits which would exceed state or federal time limits. **Note**: A hearing must be granted for termination of benefits due to time limits; or
- no negative action has been taken by the agency.

1020 TIME PERIOD FOR REQUESTING A HEARING

A hearing request must be received:

- within 90 days from the date of the Notice of Decision; and
- the request must be in writing.

Note: The day after the notice date is the first day of the 90-day period.

- within 90 days of the date the action occurred; and
- the request may be made orally or in writing.

Exception: The household may request a hearing up to a year after a denial of a request for a restoration of lost benefits.

1030 HEARING PROCEDURES

Within 10 days of a hearing request, the designated hearing representative must send a copy of the request to the Hearing Officer, review the case action for accuracy/ supporting evidence, prepare a summary of events for the conference and schedule a pre-hearing conference with the household within five (5) days to discuss the contested action. At this time, efforts to reconcile the disagreement without the necessity of a hearing are made. A pre-hearing conference **DOES NOT** in any manner affect the right to a hearing. The Hearing Officer is notified in writing of conferences resulting in withdrawals or dismissals. See Division of Welfare and Supportive Services Administrative Manual - Section 3100.

Exception: Pre-hearing conferences for households contesting a denial of expedited service will be scheduled within **two working days**, unless the household requests a later date.

1030.1 Dismissal/Withdrawal of a Hearing Request

If the contested action is reversed after receiving a hearing request, a report is prepared which explains the reasons for this action. The report is forwarded to the Hearing Officer prior to the date and time set for the hearing. The Hearing Officer notifies the household the hearing is dismissed because the action which precipitated the request will not be taken.

Previous determinations which were reasonable when rendered but are now unreasonable because new evidence concerning the determination has been submitted and good cause exists may be reversed. Good cause includes new evidence which was not available when the determination was made, any mechanical, computer or human mistakes in mathematical computations or any error in making an eligibility determination.

When the hearing request is withdrawn, the previously contested action must be taken (e.g., update the case, reinstate benefits, terminate, etc.).

1030.2 Scheduling and Location of Hearing

Upon receipt, a request for a hearing is forwarded to the Hearing Officer who notifies the household and appropriate staff of the time, date, and place of the hearing. The household is given at least ten days advance notice prior to the scheduled hearing unless they request the hearing be held in a shorter period of time. At the discretion of the Hearing Officer, a hearing may be postponed if requested by either party. **Note**: Postponements of Food Stamp/Medicaid Estate Recovery hearings cannot exceed thirty (30) calendar days.

Hearings may be conducted by telephone when agreed to by all parties and acknowledged in writing. The telephone hearings will be tape recorded.

A hearing is considered abandoned when neither the household or their authorized representative appear for a scheduled hearing, unless the Hearing Officer finds good cause for failing to appear. Substantiation of good cause must be received within ten (10) days of the date of the scheduled hearing.

1040 TIMELY ACTION ON HEARINGS

Once completed, the Hearing Officer notifies the household and appropriate staff of the hearing decision. Use the following procedures to implement the Hearing Officer's instructions.

<table>
<tr><th>If the hearing decision results in restored benefits, an increase in benefits for the current month, and/or future months, and</th><th colspan="2">Then . . .</th></tr>
<tr><td>no additional information or verification is needed</td><td colspan="2">ensure that within 10 days from the date notice is received
! benefits for future months are increased, and
! all benefits for the current and past months for which the household is eligible are provided or mailed.</td></tr>
<tr><td rowspan="4">additional information or verification is needed</td><td colspan="2">within 10 days give the household Form 2429, Insufficient Information Request, and allow 10 days for the needed information to be provided. List the specific information/verification needed in order to provide benefits.</td></tr>
<tr><td>If . . .</td><td>Then . . .</td></tr>
<tr><td>all needed information requested is received</td><td>within 10 days increase benefits for future months and/or issue benefits for the current and past months.</td></tr>
<tr><td>part, but not all, of the information requested is received</td><td>increase benefits for future months and/or benefits for each month for which information/verification is provided within three work days from receipt of the information/verification.*</td></tr>
<tr><td colspan="2">*To reissue, replace or restore benefits, See manual sections B-200, B-300 and B-800.</td></tr>
</table>

Note:

- The household's statement is acceptable verification if no other information is available.
- Do not deny restored benefits solely because a third party refuses to provide verification.
- Upon request, the household is assisted in obtaining the needed verification.

- Do not restore benefits more than 12 months prior to the date a hearing was requested.

1050 BENEFITS RECEIPT DURING THE HEARING PROCESS

1051 Continued Benefits

Households are entitled to continued benefits if the request for a fair hearing is:

- received no later than the 10th day after the effective date of the proposed action. Assistance continues unchanged until the hearing decision is made unless a written request benefits not be continued is provided; or the Hearing Officer determines there is no need for a hearing (refer to manual section B-1010).

Note: TANF is not reduced or terminated when a hearing request is due to non-compliance with **NEON** program requirements. The determination to sanction and the length of the sanction is the decision of the Hearing Officer. The sanction will be imposed after the hearing decision is received, effective the first month administratively possible.

- received prior to the effective date of proposed action or within 13 days from the date of the Notice of Decision (the day after the date on the notice is the first day of the 13-day period) whichever is later. This request may be verbal or in writing. If not received timely, good cause must be shown. The household shall be provided continued benefits until whichever occurs first:

  — The certification period ends;
  — The household voluntarily withdraws the request for a hearing or for continued benefits; or
  — The Hearing Officer upholds the contested decision.

Benefits are not continued if

- the client request benefits not be continued in writing.
- a change affecting the client's TANF grant/Medicaid occurs after the hearing, but before a decision is given and the client does not request a hearing after notice of the change.

Note: If a hearing is lost or abandoned, the household is required to repay any EXCESS benefit received for the period of time during which the hearing was processed.

- the household waives rights to continued benefits, either verbally or in writing, continued benefits will not be paid.

Note: If a hearing is lost, abandoned or withdrawn by the household, they may be required to repay excess benefits received during the period of time the hearing was being processed.

- Federal law or regulations require reduction or termination of benefits.
- benefits are reduced or terminated as a result of mass change without individual notice of adverse action. Reinstate benefits only if the issue being appealed is misapplication of policy or benefits were improperly computed.
- a disqualification period is imposed as a result of an Intentional Program Violation (IPV) waiver signed by the recipient, or an IPV hearing decision. These issues must be resolved by an appeal to District Court within specified time frames.

Additionally, households are not entitled to continued benefits when notice of adverse action is not required for the situations listed in manual section A-1843.1.2.

1052 Waiver of Continued Benefits

The household may appeal, but waive its right to continued benefits by providing a signed and dated statement to this effect. If the household waives this right, reduce or deny benefits when the 13-day notice period expires.

1053 Reducing or Ending Benefits Before the Hearing Decision

Benefits continued or reinstated during the hearing process cannot be reduced or ended before the hearing decision unless

- another change adversely affects the household and the later change is not appealed; or
- a mass change affects the household's eligibility. (Adjust benefits accordingly.)
- the certification period expires.

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Nondiscrimination/Interpretive Services

1410 NONDISCRIMINATION POLICY

The Division of Welfare and Supportive Services (DWSS) does not discriminate against any applicant or participant in any aspect of program administration. Benefits are extended to all eligible households without regard to age, race, color, sex, handicap, religious creed, national origin, or political beliefs.

The Division must inform the public of this nondiscrimination policy and the applicable complaint procedures, and must provide access to nondiscrimination information within 10 days of a request. All Division district offices must post nondiscrimination and civil rights policy in lobby areas. Workers are also given publications to post in individual interviewing areas.

> Each Division district office and satellite office must display a nondiscrimination poster provided by the United States Department of Agriculture (USDA).

1420 DISCRIMINATION COMPLAINTS

Explain the following procedures to clients who feel they have been discriminated against and want to file a claim.

Encourage the client to complete Form 2174-EG. Once the complaint is received, submit it to the social welfare manager (SWM) for investigation. Clients may submit the complaint directly to the appropriate federal office, any Division district office, Central Office or all of the above. Below is the contact information for the Federal Civil Rights Office for each program.

U.S. Office of Civil Rights (OCR)
Dept. of Health & Human Services
50 United Nations Plaza
San Francisco, CA 94102

(415) 437-8310,
toll free 800-368-1019 or
TDD (415 437-8311

> Food & Nutrition Service
> U.S. Dept. of Agriculture
> Washington, D.C. 20250
>
> U.S. Department of Agriculture
> Director, Office of Adjudication
> 1400 Independence Avenue, SW
> Washington, D.C. 20250-9410

or
Food and Nutrition Service (FNS)
United States Department of
Agriculture (USDA)
90 Seventh Street, Suite 10-100
San Francisco, CA 94103

Clients must file their complaints in writing within 180 calendar days of the incident that caused the complaint.

In the event a complainant refuses to put the allegation in writing, the person to whom the allegation is made must put the elements of the complaint in writing. **Note**: The complaint may be made anonymously.

1430 RACIAL AND ETHNIC DATA COLLECTION

The Division obtains racial and ethnic information about all clients. The ethnic categories include Hispanic or non-Hispanic. The racial categories are: American Indian or Alaskan Native, Black or African American, Asian, Native Hawaiian or Other Pacific Islander and White. Clients are asked to voluntarily identify their race and/or ethnicity on the, Application for Assistance. If this information is not voluntarily provided on the application form, the case manager will determine the category by observation and record it on each individual's MEMB screen in the system.

1440 TOLL-FREE PHONE ACCESS

The Division provides a toll-free phone number during normal office hours. The SNAP and TANF complaint number is **1-800-992-0900**.

The number allows Central Office to:

- provide information to clients about their rights and responsibilities,
- provide addresses and telephone numbers of the local office,
- respond to program policy inquiries from clients and explain local office procedures,
- refer complaints to appropriate staff (includes federal staff),
- refer clients who request other Division services to other agencies/programs,
- refer callers to local agencies for emergency food assistance.

1450 INTERPRETIVE SERVICES REQUESTS

The Division provides interpretive services for both foreign and sign languages. If you recognize or may have any reason to believe that a person or companion is deaf or hearing impaired you must advise the person that appropriate auxiliary aids and services, such as sign language and oral interpreters, TTYs, note takers, written materials, assistive listening devices and systems, and telephones compatible with hearing aids, may be provided free of charge. If you are the case manager, you must ensure that such aids and services are provided when appropriate.

1450.1 Sign Language Interpreter Request

To request a sign language interpreter for a scheduled appointment, the case manager must e-mail the request to Welfare – Interpretive Services under Welfare Groups in the Outlook address book at least two working days prior to the date of the interview/appointment. The request must include the type of interpretive services needed, the date and time of the interview/appointment, the name of the client, the office in which the interview/appointment will be held, estimated length of the interview/appointment, name of the employee who will be conducting the interview/appointment and the direct telephone number of the employee.

The Eligibility and Payments unit clerk will contact the appropriate interpreter and confirm the appointment with the case manager. Once the request is received and processed, the case manager will receive a confirmation. If the case manager does not receive a confirmation within one working day, a second request should be sent.

Once the in-person interview has been conducted, the case manager **must** complete Section I of Form 2034-WG and have the interpreter complete Section II. Once Sections I and II are completed, both the case manager and the interpreter must acknowledge the information provided by signing the bottom of the form. A photocopy of this form must be given to the interpreter for submission with their invoice for payment AND the ORIGINAL mailed to Eligibility and Payments in Central Office to verify the services of the interpreter.

If a confirmed interpreter does not show for the appointment, notify Welfare – Interpretive Services the same day via email. If the applicant cancels the appointment, notify the Eligibility and Payments unit clerk at (775) 684-0615 of the cancellation as soon as possible.

1450.1.1 NON-DWSS EMPLOYEES PROVIDING INTERPRETIVE SERVICES

All non-DWSS employees who provide in-person interpretive services must attest to their status as an employee of the State of Nevada. At each interview, the case manager must inquire if the non-DWSS employee is currently an employee of the State of Nevada. Any interpreter providing in-person interpretive services for the first time must complete page 2 of Form 2034-WG verifying current State of Nevada employment status. Failure to complete and submit page 2 of Form 2034-WG will result in non-payment for the services provided.

1450.2 Non-English Speaking Interpretive Requests

All interpretive services needed for clients who speak a language other than English, will be conducted using CTS LanguageLink through a telephone conference or by using DWSS employees assigned to an office, who are bi-lingual, whenever possible. This applies to all pre-scheduled appointments as well as those circumstances where immediate interpretive services are needed. CTS LanguageLink will assist in setting up conference calls for interviews conducted on the telephone.

To access CTS LanguageLink services, follow the procedures located at G:\WILLCALL\Interpretive Services\CTSLanguageLink Procedures.

Once the call is completed with CTS LanguageLink, all areas of Section I of Form 2034-WG must be completed and the employee/case manager must sign the form. Section II and page 2 do not need to be completed when CTS LanguageLink is used. Once the form is completed, it must be forwarded to the District Office designee the same business day the service is used.

It is imperative that **any** employee/case manager of DWSS accessing the CTS LanguageLink services, for any length of time, complete the Confirmation of Interpretive Services form including the program which the household is applying for or receiving. It is also imperative that staff become familiar with the procedures for CTS LanguageLink including the use of DWSS's account number and the appropriate access code for each office and any associated units.