



FAMILY INDEPENDENCE ADMINISTRATION


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POLICY BULLETIN #14-30-ELI

REPLACEMENT OF FOOD PURCHASED WITH SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM BENEFITS

Date: March 13, 2014	Subtopic(s): Disaster Assistance
<p> This procedure can now be accessed on the FIAweb.</p>	<p>The purpose of this policy bulletin is to provide instructions to all Job Center and Non Cash Assistance Supplemental Nutrition Assistance Program (NCA SNAP) Center staff regarding the replacement of food which was purchased with SNAP benefits and was subsequently destroyed in a household misfortune such as a fire, flood, explosion, extended power outage, or an equipment (refrigerator or freezer) failure.</p> <p>In order to be eligible for a SNAP benefit replacement, the household must report the loss of food purchased with SNAP benefits within 10 days of the loss and return a signed and completed Request for Replacement of Food Purchased with Supplemental Nutrition Assistance Program (SNAP) Benefits (LDSS-2291) within 10 days of the date that the household reported the loss.</p> <p>If the food replacement request is due to a disaster that was apparent or widespread, documentation of the disaster is not required and the request for replacement of food lost as a result of the disaster must not be denied for failing to verify the disaster.</p> <p>However, If there is reason to believe that a request for replacement benefits is questionable, an evaluation may be made of the household's circumstances before issuing benefits. Verification from, but not limited to, utility companies, government officials, community emergency response organization (e.g., Red Cross), police, fire, and public safety organizations, and other community based organizations can be used to corroborate the claim. Other collateral contacts can be used as well, such as contact with the landlord. Documentation of the monetary value of the lost food is not required.</p>

HAVE QUESTIONS ABOUT THIS PROCEDURE?
Call 718-557-1313 then press 3 at the prompt followed by 1 or
send an e-mail to *FIA Call Center Fax* or fax to: (917) 639-0298

All submitted documentation including a completed and signed **LDSS-2291** must be scanned and indexed into the electronic case record.

Issuing Benefits

If the household is determined eligible for a replacement, the SNAP benefit replacement will be provided in the amount of the loss to the household, but not more than the amount of the month's allotment most recently issued to the household prior to the onset of the disaster.

If the most recent issuance was a combined expedited issuance for two months, then the replacement issuance may not exceed the full amount of the combined expedited issuance.

For households determined eligible for a replacement, JOS/Workers must use the following issuance codes:

PA/SNAP households Code **18** – Disaster related issuance
NPA/SNAP households Code **19** – Disaster related issuance

If determined eligible for a replacement benefit, the household must be issued the benefit within 10 days after receiving the household's report of the misfortune or within two working days of receipt of a completed and signed **LDSS-2291**, whichever is later.

Households Not Currently Active for SNAP

Households whose cases are currently closed are not eligible for a replacement of food purchased with SNAP benefits. Replacement benefits can only be issued on cases that are active at the time the replacement benefit is being issued.

Denials of Replacement of Food Purchased with SNAP Benefits

JOS/Workers will determine eligibility for the SNAP replacement benefit. If the request for replacement SNAP benefits was for food that was purchased with SNAP benefits and was lost due to a power outage, flood, or other emergency that cannot be verified or is questionable (e.g., outage was less than four hours; outage did not occur in participant's building, request could not be corroborated), the request must be denied.

Households Not in Receipt of SNAP Benefits Claiming Lost Food

There are no special provisions for applicants not in receipt of SNAP benefits, including those households that applied in the month of the disaster and have not been issued SNAP benefit. Households that are not in receipt of SNAP benefits may apply for SNAP benefits per normal SNAP eligibility rules and are to be screened for expedited SNAP service according to current procedure.

SNAP issuance codes **10** and **12** must not be used for applicant households claiming a loss of food due to a household misfortune if the food was not purchased with SNAP benefits.

If a non SNAP household submits a request for food replacement and is determined ineligible, a denial notice is not required.

Effective Immediately

References:

[SNAP Source Book](#), Section 11, Page 236-237

[91 ADM-41](#)


18 NYCRR Part 387.16(n)

7 CFR 274.6

Attachment:

LDSS-2291

Request for Replacement of Food Purchased with Supplemental Nutrition Assistance Program (SNAP) Benefits (Rev. 8/12)

 Please use Print on Demand to obtain copies of forms.

REQUEST FOR REPLACEMENT OF FOOD PURCHASED WITH SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) BENEFITS

NEW YORK STATE

OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE

CASE NAME	COUNTY
CASE NUMBER	

I _____, am the head of household or an adult household member for the above named case and wish to report the following to the agency representative:

My household experienced a household misfortune and \$ _____ in food purchased with Supplemental Nutrition Assistance Program (SNAP) benefits were destroyed

Worker Comments: _____

SAMPLE

CERTIFICATION

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THE STATEMENTS BELOW

I am aware that offering a false instrument for filing as described in Article 175 of the Penal Law is a crime that may have a maximum penalty of four (4) year's imprisonment. If I do so, I will be subject to prosecution under the Civil and Criminal Laws of the United States and New York State and under the regulations of the New York State Office of Temporary and Disability Assistance.

I understand I have a right to a fair hearing to contest the denial or delay of a replacement issuance for my household. Replacements would not be issued pending the fair hearing decision.

I understand that if I do not sign and return this statement to the agency within ten (10) days of the date the loss was reported, the agency will not replace the SNAP benefits.

Signature

Date

SOLICITUD DE REEMPLAZO DE ALIMENTOS ADQUIRIDOS CON EL SUBSIDIO DEL PROGRAMA DE ASISTENCIA NUTRICIONAL SUPLEMENTARIA - SNAP

New York State Office of Temporary and Disability Assistance
Oficina de Asistencia Temporal y Asistencia para Incapacitados del Estado de Nueva York

NOMBRE DEL CASO	CONDADO
NUMERO DEL CASO	

Yo, _____, siendo el jefe del hogar o integrante adulto del hogar correspondiente al caso mencionado arriba, deseo informar lo siguiente al representante de la agencia.

Mi hogar sufrió una desgracia y como resultado se dañaron los alimentos comprados con el subsidio del Programa de Asistencia Nutricional Suplementaria - SNAP por un valor de \$ _____

Comentarios del trabajador(a) social: _____

SAMPLE

CERTIFICACIÓN

NO FIRME HASTA QUE HAYA LEIDO Y COMPRENDIDO LAS DECLARACIONES SIGUIENTES

Estoy consciente que el proveer un instrumento falso para ser archivado en mi caso, tal como lo describe el Artículo 175 de la Ley Penal, es un delito que puede acarrear una pena máxima de cuatro (4) años en prisión. Si lo hago, estaré sujeto(a) a enjuiciamiento bajo las Leyes Civiles y Penales de Estados Unidos y del Estado de Nueva York como también bajo las regulaciones de la Oficina de Asistencia Temporal y Asistencia para Incapacitados del Estado de Nueva York.

Yo comprendo que tengo el derecho a una audiencia imparcial para cuestionar la negación o el retraso de la emisión de reemplazo de beneficios para mi hogar. Los reemplazos no se emitirán si la decisión de la audiencia imparcial está pendiente.

Yo comprendo que si yo no firmo y devuelvo esta declaración a la agencia dentro de diez (10) días a partir de la fecha en que se informó la pérdida de mis beneficios de Cupones para Alimentos, la agencia no reemplazará mis beneficios de Cupones para Alimentos.

Firma

Fecha