



OFFICE OF POLICY, PROCEDURES, AND TRAINING

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Office of Procedures

POLICY BULLETIN #20-54-ELI

(This Policy Bulletin Supplements PB #20-19-ELI, PB #20-28-ELI, PB #20-31-ELI, PB #20-43-ELI and PB #20-49-ELI)

COVID-19 EMERGENCY SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM ALLOTMENTS FOR SEPTEMBER 2020

Date: September 10, 2020	Subtopic(s): COVID-19 SNAP Supplements
	<p>The purpose of this policy bulletin is to inform staff that emergency Supplemental Nutrition Assistance Program (SNAP) benefits will be issued by the Office of Temporary Disability and Assistance (OTDA) to certain households who were issued benefits for September 2020.</p> <p>The benefits will be issued as a result of the March 18, 2020 enactment of the Families First Coronavirus Response Act of 2020.</p> <p>Households who were issued SNAP benefits for September 2020 and whose issuance was less than the maximum allotment for their household size, will be issued a supplement by OTDA for the difference between the maximum allotment and the amount they were issued. This includes SNAP cases that are currently closed.</p> <p>For example, if a SNAP household of two people was issued \$237 for September 2020, the household will be issued a supplement of \$118 because the maximum allotment for two people is \$355.</p> <p>SNAP households are eligible for the supplement even if they only received a pro-rated benefit for September 2020 because they applied for SNAP benefits after September 1st.</p> <p>The SNAP supplements will be issued on a staggered basis from 09/16/2020 through 09/29/2020 based on the toe digit of the case.</p> <p>The SNAP benefit supplements for CA/SNAP cases will be issued using single issuance code 20. The SNAP benefit supplements for NCA SNAP cases will be issued using single issuance code 22.</p> <p>The unique authorization number for these payments is 20200113.</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

OTDA will continue to search for cases that were issued a September 2020 SNAP benefit that was for less than the maximum allotment for their household size. These households are eligible for the supplement even if they were not identified in the initial run. For example, households who were issued a pro-rated September 2020 SNAP benefit after the initial run, are still eligible for the supplement. Once found, these households will be issued a supplement by OTDA.

After September 30, 2020, households who were issued a SNAP benefit for September 2020 that was lower than the maximum allotment for their household size and who have not already been issued a supplement by OTDA for September 2020, can be manually issued the supplement by JOS/Workers. CA/SNAP households should be supplemented using SNAP single issuance code **20** while NCA/SNAP households should be supplemented using SNAP single issuance code **22**.

The maximum SNAP benefit allotments by household size are listed on the attached Guide to Supplemental Nutrition Assistance Program (SNAP) Budgeting (**W-204G**).

An exception report will be sent by OTDA to the Family Independence Administration (FIA) that will list the cases that were unable to be automatically issued the emergency SNAP supplement.

Effective Immediately

References:

GIS 20 TA/DC029
 GIS 20 TA/DC045
 GIS 20 TA/DC062
 GIS 20 TA/DC074
 GIS 20 TA/DC080
 GIS 20 TA/DC088

Related Items:

PB # 20-19-ELI	COVID-19 Emergency SNAP Allotments for March 2020 and April 2020
PB #20-28-ELI	COVID-19 Emergency SNAP Allotments for May 2020
PB #20-31-ELI	COVID-19 Emergency SNAP Allotments for June 2020
PB #20-43-ELI	COVID-19 Emergency SNAP Allotments for July 2020

PB #20-49-ELI

COVID-19 Emergency SNAP Allotments for August 2020

Attachment:

W-204G

Guide to Supplemental Nutrition Assistance Program (SNAP) Budgeting (Rev. 2/14/2020)

Guide to Supplemental Nutrition Assistance Program (SNAP) Budgeting

(Effective January 1, 2020)



Department of Social Services
Human Resources Administration
Department of Homeless Services

Family Independence Administration

W-204G (E) 02/14/2020

130% GROSS INCOME LIMITS (effective 10/01/19)

Households that do not contain an elderly (60 years of age or older) or disabled individual and do not incur out-of-pocket dependent care expenses and do not have earned income are subject to the 130% gross income test.

Household Size	1	2	3	4	5	6	7	8	Each Additional Member
Monthly Household Income	\$1,354	\$1,832	\$2,311	\$2,790	\$3,269	\$3,748	\$4,227	\$4,705	+ \$479

165% GROSS INCOME LIMITS (effective 10/01/19)

An elderly individual (and his/her spouse) who is living with others and who is unable to purchase and prepare meals because he/she suffers from a permanent disability may be a separate food unit if the income of the others with whom the individual resides (excluding the income of the elderly individual and his/her spouse) does not exceed the 165% gross income limit for the household size of the others.

Household Size	1	2	3	4	5	6	7	8	Each Additional Member
Monthly Household Income	\$1,718	\$2,326	\$2,933	\$3,541	\$4,149	\$4,757	\$5,364	\$5,972	+ \$608

200% GROSS INCOME LIMITS (effective 10/01/19)

Households that contain an elderly or disabled individual or that incur out-of-pocket dependent care expenses that pass the 200% gross income test are categorically eligible to participate in SNAP as long as the household does not contain a SNAP-sanctioned or an Intentional Program Violation (IPV) member.

Household Size	1	2	3	4	5	6	7	8	Each Additional Member
Monthly Household Income	\$2,082	\$2,818	\$3,555	\$4,292	\$5,028	\$5,765	\$6,502	\$7,238	+ \$737

150% GROSS INCOME LIMITS (effective 10/01/19)

Households that have earned income that do not contain an elderly or disabled individual and do not incur out-of-pocket dependent care expenses that pass the 150% gross income test are categorically eligible to participate in SNAP as long as the household does not contain a SNAP sanctioned or an IPV member.

Household Size	1	2	3	4	5	6	7	8	Each Additional Member
Monthly Household Income	\$1,562	\$2,114	\$2,667	\$3,219	\$3,772	\$4,324	\$4,877	\$5,429	+ \$553

100% NET INCOME LIMITS (effective 10/01/19)

Households that are not categorically eligible to receive SNAP benefits are subject to the 100% net income test.

Household Size	1	2	3	4	5	6	7	8	Each Additional Member
Monthly Household Income	\$1,041	\$1,410	\$1,778	\$2,146	\$2,515	\$2,883	\$3,251	\$3,620	+ \$369

STANDARD DEDUCTION AMOUNTS (effective 10/01/19)

Household Size	1	2	3	4	5	6+
Standard Deduction	\$167	\$167	\$167	\$178	\$209	\$240

SHELTER DEDUCTIONS/EXCLUSIONS:

- The maximum excess shelter deduction is **\$569** (effective 10/01/19).
- The homeless income deduction is **\$152.06** (effective 10/01/19).
- The boarder/lodger exclusion is **\$194** for one person and **\$355** for two people (effective 10/01/19).

STANDARD UTILITY ALLOWANCE (SUA) LEVELS (effective 10/01/18)

SUA Level 1 = \$800	SUA Level 2 = \$316	SUA Level 3 = \$30
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For information on the SUA Levels, see the SUA Levels Desk Guide (W-205HH).

THRIFTY FOOD PLAN (TFP) (effective 10/01/19)

The maximum SNAP benefit allotment per household size is as follows:

Household Size	1	2	3	4	5	6	7	8	Each Additional Member
Maximum SNAP Allotment	\$194	\$355	\$509	\$646	\$768	\$921	\$1,018	\$1,164	+ \$146

The minimum monthly SNAP benefit allotment for eligible one- and two-person households is **\$16** (effective 10/01/19).

NEW YORK STATE NUTRITION IMPROVEMENT PROJECT (NYSNIP) BENEFIT AMOUNTS (effective 01/01/20)

SHELTER TYPE CODE	SSI ONLY	SSI AND OTHER INCOME
Shelter Type Code 94 Shelter amount greater than \$261 per month and eligible for full SUA.	\$194	\$194
Shelter Type Code 95 Shelter amount of \$261 or less per month and eligible for full SUA.	\$194	\$186
Shelter Type Code 96 Shelter amount greater than \$261 per month and eligible for full SUA with \$21 HEAP.	\$194	\$194
Shelter Type Code 96 Shelter amount greater than \$261 per month and no SUA.	\$16	\$16
Shelter Type Code 97 Shelter amount of \$261 or less per month and eligible for full SUA with \$21 HEAP.	\$194	\$186
Shelter Type Code 97 Shelter amount of \$261 or less per month and no SUA.	\$16	\$16
Shelter Type Code 98 Shelter amount and SUA eligibility unknown.	\$16	\$16