



# FAMILY INDEPENDENCE ADMINISTRATION

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## POLICY DIRECTIVE #14-13-OPE

*(This Policy Directive Obsoletes PD #11-12-OPE)*

### EXPEDITED SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) PROCESSING RULES

<b>Date:</b> June 18, 2014	<b>Subtopic(s):</b> SNAP
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**AUDIENCE** The instructions in this policy directive are for all Job Center and Non Cash Assistance Supplemental Nutrition Assistance Program (NCA SNAP) Center staff.

#### REVISIONS TO THE PRIOR DIRECTIVE

This policy directive has been revised to:

- Replace all references to Food Stamps (FS) with SNAP, and Expedited Food Stamps (EFS) with ESNAP in the policy directive and on form Expedited Supplemental Nutrition Assistance Program (SNAP) Processing and Application Timelines Desk Aid (**W-200D**).
- SNAP applicants are no longer subject to Automated Finger Imaging System (AFIS) requirements and all references to AFIS have been removed.
- Add a statement that applicants/participants must be notified if he/she fails to appear for a scheduled interview.
- Removal of Notice of Denial of Expedited Supplemental Nutrition Assistance Program (SNAP) Service or Inability to Issue SNAP Benefits form (**M-40k**) for NCA SNAP only. Removed the note stating that all references to FS will be changed to SNAP.
- Added **Attachments A** and **B** to highlight in detail the ESNAP screening instructions in POS for NCA SNAP and Job Centers.
- Add the Supplemental Nutrition Assistance Program (SNAP) Request for Contact/Missed Interview (**LDSS-4753**) form used to notify applicants/participants of a missed interview.
- Modify the Expedited Supplemental Nutrition Assistance Program (SNAP) Processing and Application Timelines Desk Aid (**W-200D**) to add a statement indicating that the **LDSS-4753** must be sent to an applicant/participant who missed a scheduled interview.

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

- Modify the Supplemental Nutrition Assistance Program (SNAP) Benefits Application Attestation Signature (**W-129B**) and the **W-129B (S)** Forms by changing all references from Food Stamps to SNAP.

## POLICY

All SNAP applications must be screened on the day the application is filed to determine if the household qualifies for expedited SNAP (ESNAP) processing. This includes applications from households whose SNAP cases were closed for failure to recertify and who re-apply after their certification period expired.

Individuals who are applying for a “one-shot deal” only in Job Centers and select the “Emergency Payment Only (EMRG)” option on the Statewide Application ([LDSS-2921](#)) form are not to be screened for ESNAP processing. However, if the applicant expresses a concern about not having enough food or money to buy food, he/she should be encouraged to apply for SNAP benefits.

In order to qualify for ESNAP processing, a SNAP household must meet at least one of the following criteria:

- Have a monthly gross income under \$150 and liquid resources not exceeding \$100 in the month of application;
- Consist of a destitute migrant and/or seasonal farm worker whose liquid resources do not exceed \$100;
- In the month of application, have a combined monthly gross income and liquid resources that are less than the sum of the household’s monthly shelter costs (shelter costs include rent or mortgage plus the Standard Utility Allowance [SUA] applicable for the household).

See [SNAP Source Book](#) (FSSB) Section 5.

See pages 8-9 for details

When the screening process shows that a household qualifies for ESNAP processing, an initial (“I”) eligibility interview must be conducted within five calendar days to determine the household’s eligibility and benefit level for SNAP.

If a household is found eligible for SNAP benefits under the ESNAP processing rules, the SNAP benefits must be provided according to the ESNAP processing guidelines outlined in this directive.

## BACKGROUND

ESNAP has four components:

- Screening
- Interviewing
- Determining Eligibility
- Processing

## Screening

All SNAP applications must be screened using the Supplemental Nutrition Assistance Program Eligibility Determination (SNAP) Application Expedited Processing Summary Sheet ([LDSS-3938 NYC](#)) on the day the application is filed to determine if the household qualifies for ESNAP processing.

In order to consider a SNAP application as filed, it must contain at least the applicant's name, address (if he/she has one), and signature. The signature can be on the first or last page of the [LDSS-2921](#), page 1 or 5 of the Supplemental Nutrition Assistance Program Benefits Application / Recertification ([LDSS-4826](#)) form or on the Supplemental Nutrition Assistance Program (SNAP) Benefits Application Signature Form ([W-120](#)). However, SNAP benefits may not be issued until the last page of [LDSS-2921](#), page 5 of the [LDSS-4826](#), or the last page of the SNAP Benefits Application Attestation Signature ([W-129B](#)) Form has been signed.

**Note:** For SNAP applications that are submitted on-line, the signature is obtained electronically.

In Job Centers and NCA SNAP Centers, responses to SNAP-related questions in the Paperless Office System (POS) are used to electronically complete Form [LDSS-3938 NYC](#).

For households that have been determined not qualified for ESNAP processing, the reason the household is not qualified for ESNAP processing must be entered into POS when electronically completing Form [LDSS-3938 NYC](#). Additionally, for SNAP households that have been determined qualified for ESNAP processing but ineligible for a SNAP benefit, the reason the household is ineligible for a SNAP benefit will be entered electronically by POS onto Form [LDSS-3938 NYC](#).

## Interviewing

An "I" eligibility interview must be conducted for Cash Assistance (CA)/SNAP and NCA SNAP applicants determined qualified for ESNAP processing. The "I" eligibility interview can be conducted in person, with an authorized representative, or by telephone for NCA SNAP only applicants.

## New Information

Refer to [PD #13-29-ELI](#) for details

CA/SNAP and NCA SNAP applicants and participants are responsible for contacting the Center to reschedule a missed interview. This responsibility is also reinforced by the Supplemental Nutrition Assistance Program (SNAP) Request for Contact/Missed Interview ([LDSS-4753](#)) form sent to persons who fail, for whatever reason, to be interviewed on their scheduled interview date and time. Failure to contact the Center and complete an eligibility interview in a timely manner (within 30 days of the application file date) may result in the denial of a CA/SNAP or NCA SNAP application.

## Determining Eligibility

An eligibility determination for SNAP benefits must be made based on information the applicant provides on the application, the content of the interview, and whatever documentation he/she may have available or collateral contacts that can be made on the day of the interview. If the household is determined eligible for SNAP benefits under the ESNAP processing criteria, only the applicant's identity must be verified. Verification of all other eligibility factors (e.g., income, alien status, household composition, etc.) can be pended (deferred) if the documentation is not readily available.

The TA/SNAP Documentation/Verification Desk Guide ([LDSS-3666](#)) provides a listing of suggested documentation sources for verifying eligibility factors and also lists which eligibility factors must be verified and which can be pended under the ESNAP processing rules.

Households that have been determined qualified for ESNAP processing are not automatically eligible to receive SNAP benefits. The following two scenarios provide examples of households that are qualified for ESNAP processing but are ineligible to receive SNAP benefits.

**Example 1:** A 52-year-old non-disabled applicant has applied for SNAP for himself. His monthly gross income is \$1,400 and he has \$200 in liquid resources. His monthly rent is \$850. Since his combined monthly gross income of \$1,400 plus his liquid resources of \$200 (for a sum of \$1,600) is less than the sum of his \$850 monthly rent plus the applicable SUA of \$753 (for a sum of \$1,603), he is qualified for ESNAP processing. However, since his \$1,400 monthly gross income exceeds the 130% gross income level of \$1,245 (as of October 1, 2013), he is ineligible to receive SNAP benefits even though he qualified for ESNAP processing.

**Example 2:** A 42 year-old non-disabled legal permanent resident who has resided in the United States for three years in a qualified alien status (without any qualifying work quarters) has applied for SNAP benefits for herself. Her monthly income in the month of application is \$100 and she has \$40 of liquid resources. Since the sum of her monthly gross income of \$100 plus her liquid resources of \$40 (for a sum of \$140) is less than \$150, she is qualified for ESNAP processing. However, since she does not meet the alien eligibility criteria to receive SNAP, she is ineligible for SNAP benefits even though she qualified for ESNAP processing.

In Job Centers, when an applicant is ineligible for ESNAP but claims a No Food Emergency, the JOS/Worker must evaluate the applicant's eligibility for an Immediate Needs Grant, Code **44**.

In instances like the two previous examples (households that are qualified for ESNAP processing but are ineligible to receive SNAP benefits), the reason the household is ineligible for SNAP benefits will be entered electronically by POS onto Form **LDSS-3938 NYC**.

**Note:** If a household's statements indicate that a member of the household has an eligible alien status, SNAP benefits may be issued for that individual (if the household is otherwise eligible for SNAP) under the ESNAP processing rules of pended verification, even if the household is unable to provide verification of the individual's alien status within the ESNAP processing timeframe.

Processing

If a household is determined eligible for SNAP benefits based on available documents and the information provided at the "I" eligibility interview, and the identity of the applicant has been verified, New York State (NYS) social services regulations require that SNAP benefits be provided no later than five calendar days following the date the CA/SNAP or NCA SNAP application was filed.

SNAP benefits may be issued under the ESNAP processing criteria to households that contain SNAP eligible household members even if the casehead is an ineligible alien.

**Example:** An applicant has applied for SNAP benefits for herself and her two children. The applicant is an ineligible alien, but her two children both meet the alien/citizenship criteria to receive SNAP benefits. If the household has met the criteria for ESNAP processing and has been determined eligible for SNAP benefits, the SNAP ineligible casehead is to be issued SNAP benefits for her two eligible children within the ESNAP processing timeframe.

To ensure that households eligible for SNAP benefits under the ESNAP processing criteria receive their benefits in a timely manner, the Family Independence Administration (FIA) requires that Workers issue the initial SNAP benefit within the following timeframes:

**Job Centers** – SNAP benefits must be issued on the same day the "I" eligibility interview is held.

**NCA SNAP Centers** – SNAP benefits must be issued no later than five calendar days following the day the application was filed.

Special situations

Exceptions to the ESNAP processing rules

There are some situations that will cause Job Centers and NCA SNAP Centers to make exceptions to the ESNAP processing rules regarding the screening, interviewing, and processing of a SNAP application. These include the following:

Inability to determine if an application is eligible for ESNAP processing on the same day the application is received by the Agency.

- An application is submitted by mail or fax, dropped off in person, or completed online, but the applicant cannot wait for the screening and the application does not contain enough information to complete the ESNAP screening (for example, only the applicant’s name, address, and signature appear on the form). In this case, the reason why the Worker was unable to determine if the application qualifies for ESNAP processing will be entered electronically by POS onto the **LDSS-3938 NYC**.

Determination of ESNAP eligibility at “I” eligibility interview.

- Initially, a Household could not be determined eligible for ESNAP processing and receipt of SNAP benefits. Subsequently, if the household is considered qualified for ESNAP processing and eligible for SNAP benefits after the “I” eligibility interview determination, a SNAP benefit must be made available no later than five calendar days after the date of the “I” eligibility interview, regardless of when the interview took place.

Incorrect initial determination of eligibility for ESNAP processing.

- If, at the initial screening the Agency incorrectly determines the household is not qualified for ESNAP processing but subsequently finds that the household was qualified for ESNAP processing and is eligible for SNAP benefits, a SNAP benefit must be made available no later than five calendar days after the date it is discovered that the household qualifies for ESNAP processing.

Revised  
Unavailable in person, telephone, or through authorized representative

If the applicant is eligible for ESNAP processing, but unavailable for an “I” eligibility interview within five calendar days, he/she may have an “I” eligibility interview on the sixth or seventh calendar day and still be eligible for a SNAP benefit under the ESNAP processing criteria. In this instance, the SNAP benefit must be provided on the same day to ensure compliance with the standard federal ESNAP processing timeframe.

**Note:** SNAP benefits issued on the sixth or seventh calendar day following the filing of the application, although considered timely by federal standards, are not timely by State standards. The Agency will be held accountable, unless the SNAP issuance on the sixth or seventh day was due to delays caused by the applicant. In this instance, the case will be excluded from the SNAP Timeliness Report.

Unable to comply with an “I” eligibility interview within seven days.

Applicants that do not make themselves available for an “I” eligibility interview by the seventh day following the filing of the application lose eligibility for ESNAP processing. The application will be processed according to the standard 30-day rule which requires all necessary verification/documentation be submitted prior to issuing a SNAP benefit.

#### Verification of identity

Identity of the casehead must be verified before SNAP can be issued.

In order to issue SNAP benefits under the ESNAP processing rules, the identity of the applicant must be verified. Verification may be obtained through readily available documentary evidence (see [LDSS-3666](#) for suggested sources) or a collateral contact. In the absence of all other attempts to verify the identity of the applicant, a notarized statement from the applicant may be used.

See [PD #12-09-ELI](#) for SSN validation in WMS and [PB #14-31-SYS](#) for SOLQ information.

A validated SSN may be used to verify identity for the purpose of ESNAP. A SSN can be validated by the WMS validation process or by the State On-Line Query (SOLQ) system.

Workers should assist applicants in obtaining missing documentation.

If the applicant has no documentation to verify his/her identity and identity cannot be verified through collateral contacts, the household cannot be issued SNAP until his/her identity has been verified.

Documents cannot be delivered to TIPS locations. Verification must be delivered to an applicant’s home center or faxed to the TIPS location.

When the “I” eligibility interview is conducted over the telephone, if the household is qualified for ESNAP processing and determined eligible for SNAP benefits, the applicant must be informed that a SNAP benefit cannot be released until verification of his/her identity is provided. Verification can be faxed or delivered to the SNAP Center.

#### Benefit issuance for ESNAP-eligible applicants

When a household is qualified for ESNAP processing and determined eligible for SNAP benefits, the period covered by the initial SNAP benefit will be based on the day of the month that the SNAP application is filed.

Applications filed on or before the 15th of the month

If the application is filed on or before the 15th of the month, the initial SNAP benefit will cover the period from the day the application is filed through the end of the same month. For example, a household that files on 8/10 would receive SNAP benefits from 8/10 to 8/31.

Applications filed after the 15th of the month

If the application is filed after the 15th of the month, the initial SNAP benefit will cover the period from the day the application is filed through the end of the month following the month of application. For example, a household that files on 8/17 would receive SNAP benefits from 8/17 to 9/30.

Certification period for ESNAP-eligible applicants

Households which qualify for ESNAP processing and are determined eligible for SNAP benefits shall be assigned a six-month certification period. For example, a household that files on 12/16/13 would be assigned a certification period of 12/16/13 through 5/31/14.

Unresolved Resource File Integration (RFI) Data

Reminder

See [PD #09-43-SYS](#) for RFI information.

An application case cannot be activated for ongoing SNAP benefits (even if all documentation has been submitted) until all unresolved RFI data has been investigated and resolved.

Time period for submission of pended verification

Households issued a SNAP benefit under the ESNAP pended verification rule have until the end of the calendar month following the end of the period covered by the initial benefit issuance to comply with the submission of the outstanding verification without loss of benefit or having to submit a new application.

NCA SNAP Centers

In the NCA SNAP Centers, these cases remain in Single Issue (**SI**) status until compliance or the end of the allowed time period for submission of pended verification, whichever comes first. A closing will be processed for cases where the household fails to submit the pended verification by the first day of the second calendar month following the end of the period covered by the initial benefit issuance.

**Example:** If a household was issued SNAP benefits for the period 3/18 through 4/30 with pended verification, the household has until 5/31 to submit the pended verification in order to receive ongoing SNAP benefits (including for the full month of May) without being required to reapply or incur a loss of SNAP benefits. The NCA SNAP case is placed in **SI** status until documentation is submitted or until 5/31, whichever comes first. If documentation is not provided by 5/31, on 6/1, the case will be closed using closing code **Y29** (Failure to Provide Verification Expedited SNAP [No Notice]).

In the Job Centers, a waiver was granted that allows the closing of a CA/SNAP case for any household that fails to submit pended verification (without good cause) within ten calendar days following the day of the initial eligibility interview and determination. However, if the household submits the outstanding verification by the end of the calendar month following the end of the period covered by the initial benefit issuance, a new SNAP case must be opened as a separate determination case using the original SNAP application file date, and any missed benefit issued.

Revised



**Example:** If a household was issued SNAP benefits for the period 5/18 through 6/30 with pended verification, the household has until 7/31 to submit the pended verification in order to receive ongoing SNAP benefits (including for the full month of July) without being required to reapply or incur a loss of SNAP benefits.

Staff should utilize the Expedited Supplemental Nutrition Assistance Program (SNAP) Processing and Application Timelines Desk Aid (**W-200D**) for information on the expedited processing of SNAP applications.

**REQUIRED ACTION**

Refer to **Attachment B** for POS instructions.

Refer to **Attachment A** for POS instructions.

**In-Person Applicants *Who Meet* the ESNAP Processing Criteria**

Job Centers – the “I” eligibility interview must be conducted on the same day.

NCA SNAP Centers – an “I” eligibility interview must be scheduled within two calendar days (48 hours) of the application file date. If the applicant indicates that he/she will be unavailable for an interview within two calendar days, additional time may be given. However, the interview must be scheduled no later than five calendar days from the application file date. Applicants who indicate that they are not available for an interview within seven calendar days from the application file date must be informed that they will lose eligibility for ESNAP processing.

**In-Person Applicants/Authorized Representatives Who Do Not Meet the ESNAP Processing Criteria**

Job Centers – the “I” eligibility interview will be conducted on the same day.

NCA SNAP Centers – the “I” eligibility interview must be scheduled no later than five calendar days after the application file date.

See [PD #09-28-ELI](#) for information on mailed and faxed applications. Revised

**Application Not Present At Time of EFS Pre-Screening**

All applications whether submitted by mail, fax, online or in person (applicant does not wait to be seen) must be screened on the day it is received to determine if the household is qualified for ESNAP processing.

Revises

Eligibility for ESNAP Processing

If the household meets the ESNAP processing criteria, Workers must attempt to contact the household by telephone on the day the application is received to schedule an “I” eligibility interview within two calendar days (48 hours) of the application file date and must document the attempt.

If the household cannot be contacted by telephone, the Worker must schedule an “I” eligibility interview within seven days of the date the application was filed and send the Request for Contact on a Supplemental Nutrition Assistance Program (SNAP) Application (**W-119**) form which informs the applicant of his/her scheduled “I” eligibility interview.

In addition to Form **W-119**, the Eligibility Factors and Suggested Documentation Guide (**W-119D**) must also be sent.

Unable to Determine Eligibility for ESNAP Processing

If the application does not contain enough information to allow the Agency to determine eligibility for ESNAP processing and contact by telephone cannot be made, the Job Center/NCA SNAP Center Worker must schedule an “I” eligibility interview within seven calendar days following the date the application was filed and mail the applicant the forms, **W-119** and **W-119D**.

The reason why the Worker was unable to determine eligibility for ESNAP processing will be entered electronically by POS onto Form **LDSS-3938 NYC**.

Homebound Applicants

The process for CA/SNAP and NCA SNAP applicants who request homebound status appears in [PB #14-29-OPE](#).

Revised

**Qualifies for ESNAP Processing Available for an “I” Eligibility Interview After Five Calendar Days**

Revised

When SNAP benefits for an individual eligible for SNAP under the ESNAP processing criteria are not issued by the fifth calendar day following the filing of the application because the applicant did not make himself/herself available for an “I” eligibility interview until the sixth or seventh calendar day, the JOS/Workers must enter a case comment in POS to indicate the reason for the late issuance in the electronic case record.

Job Center only

- If an applicant makes himself/herself available for the “I” eligibility interview after seven calendar days following the filing of the application, they are ineligible for ESNAP processing.
  - Prepare and issue the Notice of Denial of Expedited Supplemental Nutrition Assistance Program (SNAP) Service or Inability to Issue SNAP Benefits form (**M-40k**).
  - Check the boxes “We have determined your household is not eligible for Expedited SNAP service because” and “You failed to comply with an initial eligibility interview within seven days after filing of application.”
  - Scan and index Form **M-40k** into POS. Process the case per standard 30-day rules.

Form **M-40k** was revised to include the most current HRA logo. Revised

Applicants qualified for ESNAP processing should only be issued an **M-40k** for failure to make themselves available for an “I” eligibility interview within seven calendar days if they come in for an “I” eligibility interview while the case is still in **AP** status.

### Households Determined Eligible for SNAP Benefits Under the ESNAP Processing Criteria

#### SNAP Eligibility is Fully Documented

Applicant submits all documentation to verify SNAP eligibility.

After the “I” eligibility interview is conducted, if the applicant household is determined eligible for SNAP benefits under ESNAP processing criteria and has provided all documentation to verify identity and eligibility (including the resolution of any unresolved RFI data) at the time of the interview use the appropriate opening code to activate (**AC**) the SNAP case.

#### Job Centers

Refer to [PD #08-08-SYS](#) for details on ESNAP determinations in POS.

- Complete the **IN/EFS Eligibility Determination** window in POS.
- On the **Grants Data Entry** window the Issuance code is prefilled using Code **52** (Expedited Service – Verified for PA/SNAP Cases) to issue the initial SNAP benefits.
- The Supervisor clicks the **XMIT** button in the **ESNAP Approval** activity and POS transmits the TAD and the Prepare a Supplemental Nutrition Assistance Program (SNAP) Issuance Authorization Form ([LDSS-3574](#)) through the Same Day Issuance transaction.

Refer to **Attachment A** for POS instructions.

See [Workers Guide to Codes](#) page 1.3-5 and [NPA SNAP Desk Guide to Codes](#), page 8, for appropriate SNAP case reason opening codes.

NCA SNAP Centers

- Complete ESNAP issuance in POS and send to Supervisor.
- The Supervisor clicks the **XMIT** button in the **ESNAP Approval** activity and POS transmits the TAD and the ([LDSS-3574](#)) through the Same Day Issuance transaction.
- Activate the SNAP case using the appropriate SNAP opening code.

**Note:** Although WMS is programmed to automatically issue initial SNAP benefits when the status of an NCA SNAP case is changed from **AP** to **AC**, the benefit issuance would be under non-expedited issuance codes. Therefore, in order to be able to demonstrate when an applicant is determined eligible under the ESNAP criteria with no pended documentation, the initial benefit must be issued using Code **53 on the LDSS-3574**.

Revised

**Eligible for ESNAP Processing Pending Verification**

Additional documentation required to establish ongoing SNAP eligibility

If the applicant household is determined eligible for SNAP benefits under ESNAP processing criteria but is missing required documentation to verify continued eligibility at the time of the “I” eligibility interview:

Refer to **Attachment B** for POS instructions.

Job Centers

Refer to [PD #08-08-SYS](#) for details on ESNAP determinations in POS.

- Place the SNAP case in **SI** status using Opening Code **Q23** (Expedited – Pending Verification).
- Prepare an [LDSS-3574](#) using Code **54** (Expedited Service – Not Verified for PA/SNAP Cases) to issue the initial SNAP benefits.
- Complete and issue the applicant the Documentation Requirements and/or Assessment Follow-Up form (**W-113K**) listing all the eligibility factors that need to be verified, and allow a minimum of ten calendar days for the submission of verification.

Refer to **Attachment A** for POS instructions.

Issuance Code **55** must be used any time Opening Code **Q22** is used.

Under no circumstances should Issuance Code **53** be used when using Opening Code **Q22**.  
Revised

NCA SNAP Centers

- Place the SNAP case in **SI** status using Opening Code **Q22** (Expedited – Pended Verification).
- Prepare an **LDSS-3574** using Code **55** (Expedited Service – Not Verified for NPA/SNAP Cases) to issue the initial SNAP benefits.
- Complete and issue the applicant Form **W-113K** listing all the eligibility factors that need to be verified, and allow a minimum of ten calendar days for the submission of verification.

If the household is missing documentation to verify expenses (e.g., shelter or dependent care) at the time of the “I” eligibility interview, but is determined eligible for SNAP benefits under ESNAP processing criteria, place the SNAP case in **SI** status and calculate the initial SNAP benefit including the unverified expenses. If the household subsequently fails to verify expenses, determine the eligibility and benefit level without the unverified expense.

Identity Not Verified

Revised  
Eligible for SNAP under ESNAP processing rules, but does not have verification of identity

Prepare and issue Form **W-113K** listing the eligibility factors that must be verified allowing ten calendar days for submission.

If the applicant verifies his/her identity but still has outstanding required documents, the SNAP case must be placed in **SI** status and benefits issued using the relevant benefit issuance codes.

If the applicant verifies his/her identity and provides all documentation to verify eligibility, the SNAP case must be placed in **AC** status.

If the applicant fails to provide verification of identity, benefits under ESNAP processing cannot be issued until identity is verified.

### Household Previously Received SNAP Benefits Under the ESNAP Criteria (Code 54 – Job Centers Or 55 – NCA SNAP Centers) With Pended Verification and Subsequently Failed to Comply

If a household that appears eligible for SNAP with pended verification has previously received SNAP with pended verification and subsequently failed to comply (and has not been certified for ongoing benefits since that time), proceed as follows:

- Explain to the applicant that he/she is not eligible to receive SNAP under the ESNAP processing criteria because he/she previously received SNAP under the ESNAP processing criteria and failed to submit required documentation. SNAP cannot be issued until all documentation needed to determine eligibility has been provided.
- Prepare and issue the applicant Form **W-113K**, listing all of the eligibility factors that must be verified, and allow ten calendar days for submission.

Removed **M-40K** for NCA/SNAP only

If the applicant submits all documentation to verify eligibility within ten calendar days, benefits must be made available to the household as soon as possible, but no later than five calendar days after receipt of the verification.

### Failure to Submit Pended Verification After SNAP Benefits are Issued Under ESNAP Processing Rules

Refer to **Attachment B** for POS instructions.

#### Job Centers

Refer to [PD #08-08-SYS](#) for details on ESNAP determinations in POS.

SNAP case Closing Code **Y29** may not be used if CA case is denied or closed prior to ten days.

See the [Food Stamp Separate Determination Manual](#).

- If the applicant fails to submit pended documentation within ten calendar days of an “I” eligibility interview, close the SNAP case using Code **Y29** (Failure to Provide Verification – Expedited SNAP), which will prevent the inappropriate establishment of a NCA SNAP case.
- If, however, because of CA rules it becomes necessary to reject the CA portion of a CA/SNAP case prior to the end of the ten calendar days, close the SNAP case using Code **Y99** (Other), which will allow for a separate SNAP determination. For example, if the applicant fails to keep an employment-related appointment, reject the CA case using Code **E69** (Failed to Complete Public Assistance Eligibility Process) and close the SNAP portion of the case using Code **Y99**. An NCA SNAP case will be automatically established in **SI** status.

Refer to **Attachment A** for POS instructions

### NCA SNAP Centers

Prepare a **TAD** to close the SNAP case using Code **Y29** and forward to the Control Unit for processing.

The Control Unit will hold the action until the end of the calendar month following the end of the initial benefit issuance. If, by then, the household has not complied, the closing will be processed for the first day of the second calendar month following the end of the initial benefit issuance. The following example illustrates the process:

Failure to submit pended verification within allowed time period

**Example:** Ms. Jones applies for NCA SNAP on July 6. She is determined eligible for SNAP benefits under the ESNAP processing criteria and is issued SNAP benefits for the period July 6 through July 31. Ms. Jones is only able to verify her identity at the eligibility interview. She is instructed to submit verification of other eligibility requirements such as household composition by July 16. Her NCA SNAP case is placed in **SI** status.

Ms. Jones fails to submit the outstanding required documentation. On July 17, the Worker prepares a **TAD** to close the SNAP case using Code **Y29**. The **TAD** is forwarded to the Control Unit where it will be held until August 31. If Ms. Jones does not submit the verification by August 31, the **TAD** will be processed to close the case.

Submission of pended verification beyond the ten days after eligibility interview but within allowed time period

On August 10, Ms. Jones submits all the SNAP documentation that was previously required and which supports the initial determination of eligibility. Since the information reported on her July 6 application is now verified, the case must be processed as follows:

Refer to **Attachment A** for POS instructions.

- Pull the closing **TAD** from POS.
- Prepare a new **TAD** and budget to **AC** the case
- Issue a SNAP benefit for the full month of August using SNAP issuance Code **16** (Single Issuance – Full Month)

### **ESNAP for Households Whose SNAP Case was Closed for Failure to Recertify**

See [PB #06-46-ELI](#) for more information on reapplying for SNAP.

As indicated in the Policy section of this Directive, households whose SNAP case was closed for failure to recertify and subsequently reapplied within 30 days of the end of their certification period must be screened for ESNAP eligibility, even though these applications are processed using recertification procedures.

In these instances, if a household is qualified for ESNAP processing and a subsequent recertification interview indicates the household continues to be eligible for SNAP benefits and the household:

- has all the required documents to verify eligibility, follow the instructions on page 11.
- does not have all the required documents to verify eligibility, follow the instructions listed on page 12 for applicant households determined qualified for ESNAP processing and eligible for SNAP benefits with pended verification.

## **PROGRAM IMPLICATIONS**

Paperless Office  
System (POS)  
Implications

See [PD #08-08-SYS](#) for POS instructions on ESNAP processing.

Medicaid  
Implications

There are no Medicaid implications.

## **LIMITED ENGLISH PROFICIENT (LEP) AND HEARING IMPAIRED IMPLICATIONS**

For Limited English Proficient (LEP) and hearing-impaired applicants/participants, make sure to obtain appropriate interpreter services in accordance with [PD #11-33-OPE](#) and [PD #08-20-OPE](#).

## **FAIR HEARING IMPLICATIONS**

Avoidance/  
Resolution

Ensure that all case actions are processed in accordance with current procedures and that electronic case files are kept up to date. Remember that applicants/participants must receive either adequate or timely and adequate notification of all actions taken on their case.



Conferences at Job Centers	<p>An applicant/participant can request and receive a conference with a Fair Hearing and Conference (FH&amp;C) AJOS/Supervisor I at any time. If an applicant/participant comes to the Job Center requesting a conference, the Receptionist must alert the FH&amp;C Unit that the individual is waiting to be seen. In Model Offices, the Receptionist at Main Reception will issue an FH&amp;C ticket to the applicant/participant to route him/her to the FH&amp;C Unit and does not need to verbally alert the FH&amp;C Unit staff.</p> <p>The FH&amp;C AJOS/Supervisor I will listen to and evaluate any material presented by the applicant/participant, review the case file and discuss the issue(s) with the JOS/Worker responsible for the case and/or the JOS/Worker's Supervisor. The AJOS/Supervisor I will explain the reason for the Agency's action(s) to the applicant/participant.</p> <p>Should the applicant/participant elect to continue his/her appeal by requesting or proceeding to a Fair Hearing already requested, the FH&amp;C AJOS/Supervisor I is responsible for ensuring that further appeal is properly controlled and that appropriate follow-up action is taken in all phases of the Fair Hearing process.</p>
Conferences at SNAP Centers	<p>If an applicant/participant comes to the NCA SNAP Center and requests a conference, the Receptionist must alert the Center Director's designee that the applicant/participant is to be seen. If the applicant/participant contacts the Eligibility Specialist directly, advise the applicant/participant to call the Center Manager's designee.</p> <p>In Model Offices, the Receptionist at Main Reception will issue a SNAP Conf/Appt/Problem ticket to the applicant/participant to route him/her to the NCA SNAP Reception area and does not need to verbally alert the Center Director. The NCA SNAP Receptionist will alert the Center Director once the applicant/participant is called to the NCA SNAP Reception desk.</p> <p>The designee will listen to and evaluate the applicant/participant's complaint regarding the SNAP case. The Center Director's designee is responsible for ensuring that further appeal by the applicant/participant through a Fair Hearing request is properly controlled and that appropriate follow-up action is taken in all phases of the Fair Hearing process.</p>
Evidence Packets	<p>For Fair Hearing purposes, all evidence packets must include complete and relevant documentation</p>

**REFERENCES**

SNAP Source Book, Section 4, page 35;  
 Section 5, page 133; Section 14, page 316  
 7 CFR 273.2(i) (4) (iii) (A)/(B)  
 18 NYCRR 387.8, 387.9  
 05-ADM-13  
 05-INF-18  
 03-INF-14  
 03-INF-10  
 Expedited Service Summary of Policy for NERO's Conference

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**RELATED ITEMS**

[PB #06-46-ELI](#)  
[PB #14-29-OPE](#)  
[PB #14-31-SYS](#)  
[PD #08-08-SYS](#)  
[PD #09-28-ELI](#)  
[PD #09-43-SYS](#)  
[PD #12-09-ELI](#)  
[PD #13-29-ELI](#)

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**ATTACHMENTS**

<b>Attachment A</b>	ESNAP Screening for SNAP Application Interview in POS
<b>Attachment B</b>	ESNAP Screening for CA Application Interview in POS
<b>W-129B</b>	Supplemental Nutrition Assistance Program (SNAP) Benefits Application Attestation Signature (Rev. 6/18/14)
<b>W-129B (S)</b>	Supplemental Nutrition Assistance Program (SNAP) Benefits Application Attestation Signature (Spanish) (Rev. 6/18/14)
<b>W-200D</b>	Expedited Supplemental Nutrition Assistance Program (SNAP) Processing and Application Timelines Desk Aid (Rev. 6/18/14)
<b>LDSS-3666</b>	TA/Supplemental Nutrition Assistance Program (SNAP) Documentation/Verification Desk Guide (Rev. 8/12)
<b>LDSS-3938 NYC</b>	Supplemental Nutrition Assistance Program (SNAP) Application Expedited Processing Summary Sheet (Rev. 8/12)
<b>LDSS-4753</b>	Supplemental Nutrition Assistance Program (SNAP) Request for Contact/Missed Interview
<b>M-40k</b>	Notice of Denial of Expedited Supplemental Nutrition Assistance Program (SNAP) Service or Inability to Issue SNAP Benefits (Rev. 6/18/14)

 Please use Print on Demand to obtain copies of forms.

**M-40k (S)**

Notice of Denial of Expedited Supplemental Nutrition Assistance Program SNAP Service or Inability to Issue SNAP Benefits (Spanish) (Rev. 6/18/14).

### Expedited Processing Pre-Screening Window

Follow the instructions in POS below for ESNAP prescreening of a SNAP application. The prescreening is completed at the time of the application intake.

**Note:** For Walk-in applicants/participants additional screens through MONIQ/SNAP intake precede the screens below.

The **Expedited Processing Pre-Screening** window appears in the **SNAP Reception Intake** and **E-App Submission** activities to allow the SNAP Worker to complete the pre-screening:

- POS will search WMS to determine if a SNAP benefit has been issued for the month.
- Enter the necessary information based on the application. The determination for expedited processing is listed in the **Household qualifies for expedited processing?** field.
- Click **Next** to proceed and start the ESNAP interview.
- The **LDSS-3938 NYC** form is saved when the Worker clicks **Next**.

Ticket List Quick Call SNAP Open POS Help Exit

Household qualifies for expedited processing?

Is the household already receiving SNAP benefits this month?

Income for the household this month: \$ 1300

Liquid Resources for the household: \$ 200

Shelter Type for the household: Apartment/Private House

Did the household enter a domestic violence shelter this month?  Yes  No

Rent/Mortgage expense for the household this month: \$ 850

Does the household have a Heat/Air Conditioning expense separate from rent/mortgage this month?  Yes  No

Did the household receive, or does it anticipate receiving HEAP this year?  Yes  No

Does the household have a utility expense separate from rent/mortgage this month?  Yes  No

Does the household pay an additional cost for use of a washer and/or dryer in their home or apartment?  Yes  No

Is this a migrant/seasonal farm worker household?  Yes  No

Was the only income for this household terminated before this month?  Yes  No

Is the only income for this household new and will no more than \$25 gross income be received within ten days after application?  Yes  No

## Expedited SNAP Benefit Eligibility Determination

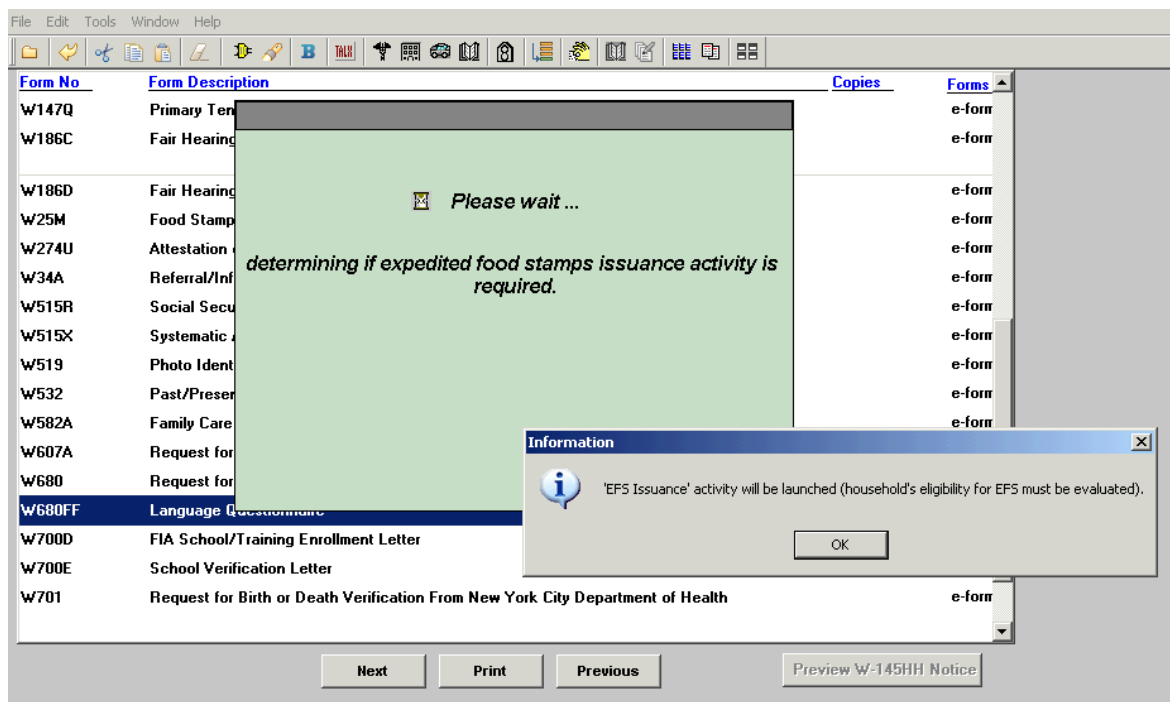
For households meeting the ESNAP criteria, a full eligibility interview must be conducted to determine the household's eligibility for SNAP benefits and to compute the benefit amount. Once the household is determined eligible and identity of the casehead has been verified, benefits must be made available within five (5) days via the Electronic Benefit Transfer (EBT) system. Staff must begin the process of issuing an ESNAP benefit through the ESNAP Issuance activity in POS.

Follow the screen flow and instructions in POS below for ESNAP benefit determination of a SNAP application. The determination is completed at the time of the application interview.

## ESNAP Issuance Activity

The ESNAP Issuance activity automatically begins:

- If the interview date is no later than seven calendar days after the SNAP file date
- After the Worker completes the following steps:
  - Processes the **SNAP Application Interview** activity in POS.
  - Prints the required forms from the **Print Forms** window.
  - Clicks the **Next** button on the **Print Forms** window.



## ESNAP Issuance

POS will complete the expedited processing determination for the case based on the answers recorded during the **SNAP Application Interview** activity. POS will save the SNAP Application Expedited Processing Summary Sheet form (**LDSS-3938 NYC**) in the electronic record when the Supervisor approves the **Previewing LDSS-3938** window button at the end of the **Approve ESNAP Issuance** activity. The **LDSS-3938** will be completed based on the answers in the **SNAP Application Interview** and the **Expedited Processing** windows.

The following section highlights specific elements of the **ESNAP Issuance** activity.

- When the **ESNAP Issuance** activity starts, the **Household** window appears.

### Household window

The screenshot shows a software window titled "Household" with a menu bar (File, Edit, Tools, Window, Help) and a toolbar. The main content area is divided into several sections:

- Control Information:** District: 64, Center: Melrose SNAP Center, Worker: F5F05, Case Number: 1
- Present Address:** Street Number, Direction, Name, Trunk, Apt #, City (BRONX), State: NY, Zip Code: 104510000, Phone: 718-564-1210
- Suffix Information:** Active (unchecked), Applying (checked), No PS IPV or Sanction Found (checked), Working Families: No. SNAP File Date: 02/18/2014, SNAP Suffix: 1, SNAP Status: AP, SNAP RAP: 1. Suffix: 1, Case Name: [REDACTED]
- Case Member Information:** A table with columns: Suffix, Ln, CIN, Name, Relation, DDB, SSN, Vol, Sex, Citizen / National, SNAP. Row 1: 1, 1, [REDACTED], [REDACTED], Cashead, 10/25/1961, [REDACTED], 1, M, [REDACTED], NA, NA, AP.

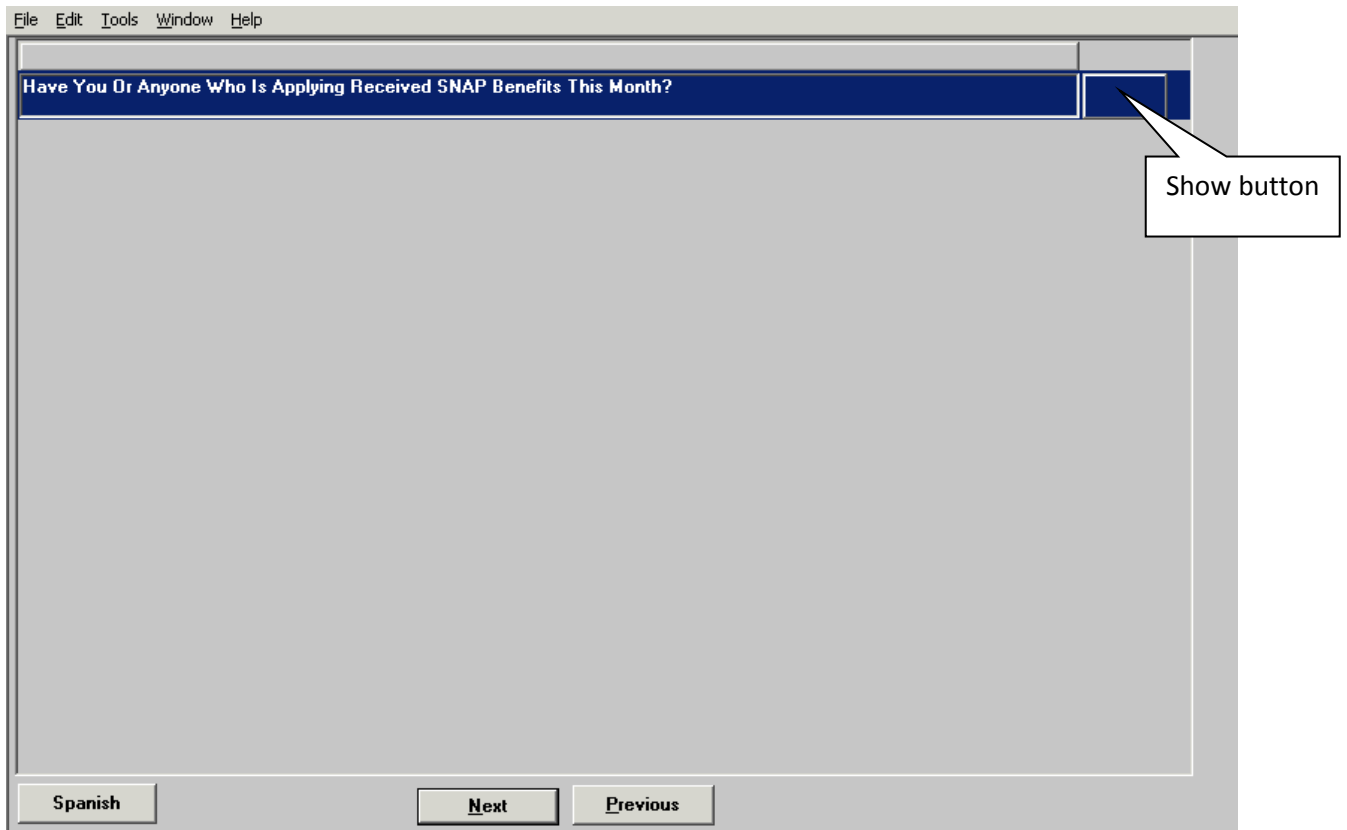
Buttons for "Next" and "Previous" are located at the bottom of the window.

- Click **Next** and the **Expedited SNAP Questions** window appears.

### Expedited SNAP Questions Window

The **Expedited SNAP Questions** window displays the question “Have You or Anyone Who is Applying Received SNAP Benefits This Month?”

- Click the **Show** button and POS will search WMS to determine if a SNAP benefit has been issued for the month.



### Have You Or Anyone Who Is Applying Received SNAP Benefits This Month?

When POS opens the **Response to Question** window, the following fields appear:

- Result of SNAP Benefit Lookup in WMS.
- Were the benefits issued under an application registration number? (Benefits do not appear in WMS benefit issuance history)
- Were the benefits issued for a case closed more than six months?
- Where were the benefits received (Outside NYC or In NYC)?
- Case Number Where Benefits Received:
- The question “Did anyone who is applying receive SNAP benefits this month?”
  - If answered “Yes,” the message “The household is not eligible to receive a second Food Stamp grant this month” appears if the applicant is not a resident of a domestic violence (DV) shelter in the **Outcome** field.
  - If answered “No,” the message “Proceed with ESNAP interview” appears in the **Outcome** field.
- Shelter code from the application interview (e.g. 01 [Apartment/Private House], 13 [Domestic Violence Shelter]).
- The question “Has the applicant entered a domestic violence shelter this month?”

**Note:** This question is disabled if the shelter code from the interview indicates that the applicant is not in a domestic violence shelter.

### SNAP Benefits This Month Response Window – Benefit Found

The screenshot shows a software window titled "SNAP Benefits This Month Response Window". It contains several input fields and radio button options. The "Results of SNAP Benefit Lookup in WMS" field contains the text "SNAP benefits were issued in NYC this month." The question "Did anyone who is applying receive SNAP benefits this month?" has the "Yes" radio button selected. The question "Were the benefits issued under an application registration number? (Benefits do not appear in WMS benefit issuance history)" has the "No" radio button selected. The question "Were the benefits issued for a case closed more than 6 months?" has the "No" radio button selected. The question "Where were the benefits received?" has the "In NYC" radio button selected. The "Case Number Where Benefits Received:" field is empty. The "Shelter code from interview:" field contains the text "Not a domestic violence shelter". The question "Has the household entered a domestic violence shelter this month?" has the "No" radio button selected. The "Outcome" field contains the text "The household is not eligible to receive a second SNAP grant this month." At the bottom of the window are "OK" and "Cancel" buttons.



### **Benefit Lookup Results: Benefits Found by POS Lookup in WMS**

If benefits are found for the current month by the automated POS lookup to WMS, POS sets the questions:

- “Did anyone who is applying receive SNAP benefits this month?” to **Yes**.
- “Where were the benefits received?” to **In NYC** and
  - saves the case number under which the benefits were received in the field **Case Number Where Benefits Received**.

The question **Where the benefits issued under an application registration number?** Is set to **Yes** when the benefits are found under an application registration number and no longer appear in WMS benefit issuance history.

The question **Where the benefits issued for a case closed more than 6 months?** Is set to **Yes** when the benefits are found under a case that was closed more than six months ago.

The message “The household is not eligible to receive a second SNAP grant this month” appears if the applicant is not a resident of a domestic violence (DV) shelter.

### **Benefit Lookup Results: Benefits Found, Entered Domestic Violence Shelter**

The **Shelter code from interview** field indicates whether the household is in a domestic violence shelter. If the household already received SNAP benefits in the month of application and is in a domestic shelter, the question **Has the household entered a domestic violence shelter this month?** is enabled. If the household has entered a Domestic Violence shelter in the current month, they may be eligible for a second SNAP benefit.

### **Benefit Lookup Results: Benefits Found In Interview or Through Manual Review**

If no benefits are found for the current month, POS sets the question “Did anyone who is applying receive SNAP benefits this month?” to **No**.

- If the Worker finds through a manual WMS review, in the Statewide Clearance or from the applicant’s statements that the applicant received SNAP benefits this month, s/he is able to change the answer for the question “Did anyone who is applying receive SNAP benefits this month?” from **No** to **Yes**. The Worker must indicate whether the benefits were received in NYC or outside of NYC.

The message “The household is not eligible to receive a second SNAP grant this month” appears if the applicant is not a resident of a domestic violence (DV) shelter.

### **Benefit Lookup Results: No Benefits Found**

If no benefits are found for the current month, POS sets the question “Did anyone who is applying receive SNAP benefits this month?” to **No**.

### SNAP Benefits This Month Response Window – No Benefit Found

The screenshot shows a software window titled "SNAP Benefits This Month Response Window". At the top, a text box displays "No SNAP benefit issuance found for this month." in red. Below this are several questions with radio button options:

- Did anyone who is applying receive SNAP benefits this month? (Yes/No) - No is selected.
- Were the benefits issued under an application registration number? (Benefits do not appear in WMS benefit issuance history) (Yes/No) - No is selected.
- Were the benefits issued for a case closed more than 6 months? (Yes/No) - No is selected.
- Where were the benefits received? (Outside NYC/In NYC) - Outside NYC is selected.
- Case Number Where Benefits Received: (text input field)
- Shelter code from interview: (text input field containing "Not a domestic violence shelter")
- Has the household entered a domestic violence shelter this month? (Yes/No) - No is selected.

At the bottom, an "Outcome" text box displays "Proceed with ESNAP interview" in red. Below the window are "OK" and "Cancel" buttons.

### SNAP Benefits This Month Response Outcomes

The **SNAP Benefits This Month Response** window includes an outcome based on the POS lookup, the manual review and Worker's entries. The field indicates one of the following outcomes:

- The household is not eligible to receive a second SNAP benefit grant this month.
- Proceed with ESNAP Interview.
- The Worker must click **OK** to continue, and the following outcomes can occur:

#### Outcome: Household is not eligible to receive second SNAP benefit grant

- If the outcome is that the household is not eligible to receive a second SNAP benefit grant this month, POS returns to the **Expedited SNAP Questions** window.
- The Worker must click **Next** to proceed to **Checklist** window and the **ESNAP Eligibility Determination** window to process the ESNAP denial.

**Outcome: Received SNAP This Month and Entered Domestic Violence Shelter**

- If the applicant received SNAP benefits in the current month, but entered a domestic violence shelter during the current month, the following questions will appear in the **Expedited SNAP Questions** window:
  - “Has the SNAP household received Expedited SNAP benefits in the past?” (The display field will indicate all cases in which the applying household previously received SNAP benefits in NYC.)
  - “Has anyone who is applying for SNAP benefits previously had income from any source (such as employment, SSA, SSI, UIB or contribution) this month?” (POS will automatically prefill all income entered during the initial interview.)

**Outcome: No SNAP Benefits Received This Month**

- If the applicant received SNAP benefits in the current month, but entered a domestic violence shelter during the current month, the following questions will appear in the **Expedited SNAP Questions** window:
  - “Has the SNAP household received Expedited SNAP benefits in the past?” (The display field will indicate all cases in which the applying household previously received SNAP benefits in NYC.)
  - “Has anyone who is applying for SNAP benefits previously had income from any source (such as employment, SSA, SSI, UIB or contribution) this month?” (POS will automatically prefill all income entered during the initial interview.)

## Has the SNAP Household Received Expedited SNAP Benefits in the Past?

File Edit Tools Window Help

Have You Or Anyone Who Is Applying Received SNAP Benefits This Month?

Has The SNAP Household Received Expedited SNAP Benefits In The Past?

Has Anyone Who Is Applying For SNAP Had Income or Expect to Receive Income From Any Sources (Such As Employment, SSA, SSI, UIB, Or Contribution) This Month?

Show button

Spanish Next Previous

- Click the **Show** button for the question **Has the SNAP Household Received Expedited SNAP Benefits in the Past?**

POS will search to determine if an unverified ESNAP benefit has been issued in the past, and if so, has the applicant been approved for recurring SNAP benefits after the issuance of expedited benefits in the past. POS will use this data to determine the level of documentation required for the case.

Response to Question

Instructions

The information presented below is for informational purposes only. POS will use this data to determine the level of documentation required for this case.

Case Number	Did the client receive a grant code 54 or 55 in the past	No	Date Issued	00.00.0000
	Have recurring Food Stamp benefits been authorized since the last EFS issuance	No	Begin Date	00.00.0000

Case Number	Did the client receive a grant code 54 or 55 in the past	No	Date Issued	00.00.0000
	Have recurring Food Stamp benefits been authorized since the last EFS issuance	No	Begin Date	00.00.0000

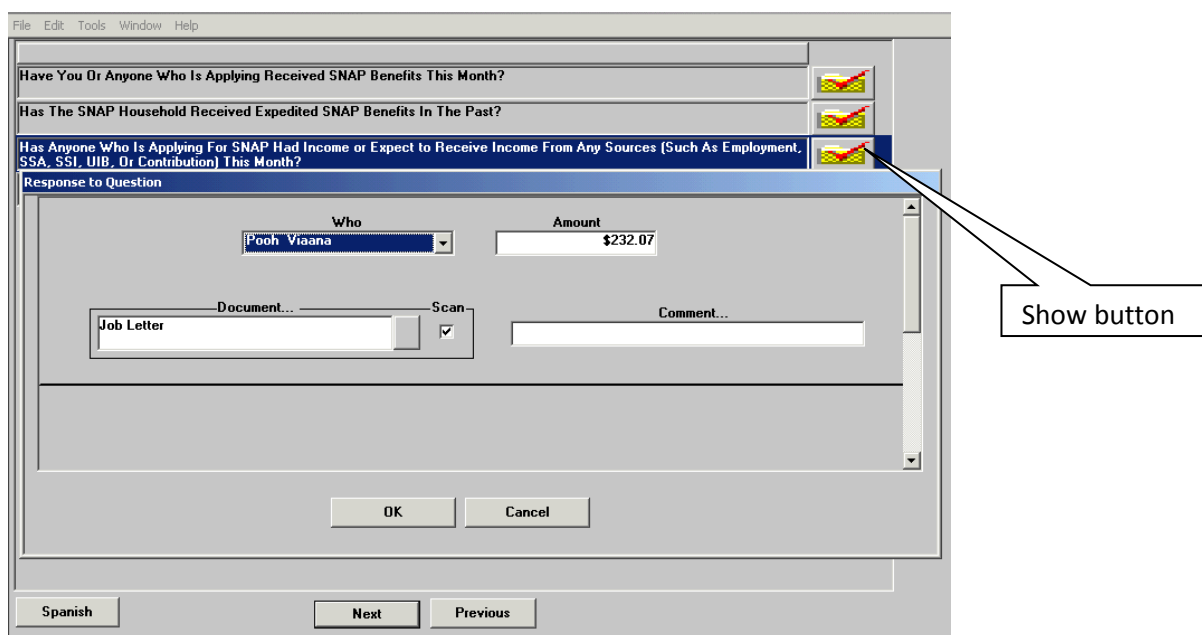
OK Cancel

- Click **OK** and the **Expedited SNAP Questions** window returns for additional processing.

### Has Anyone Who Is Applying for SNAP Had Income or Expect to Receive Income From Any Sources (Such As Employment, SSA, SSI, UIB or Contribution) This Month?

- Click the **Show** button for the question “Has Anyone Who Is Applying for SNAP Had Income or Expect to Receive Income From Any Sources (Such As Employment, SSA, SSI, UIB or Contribution) This Month?”

POS retrieves the income entered during the interview and pre-fill the **Response to Question** window with the name of the individual who received the income and the amount received in the current month. If the amount received or expected to be received is different from the amount calculated by POS, the Worker can change the value in the **Response to Question** window.



To add additional income received this month:

- Click the down arrow in scroll bar.
- Click the **Who** down-arrow and select household members who received income or expect to receive income this month, if applicable.
- Select **Document** type if applicable.
- Click **OK** to close the response window.
- Click **Next** and the **Checklist** window appears.

## Checklist Window

File Edit Tools Window Help

Interview

- Expedited SNAP Benefits
- Identity
- Citizenship
- Residency
- Social Security Numbers

External Clearance

- Building Clearance
- DMV
- Board Of Education
- WRS
- UIB
- Vital Records

Next Previous

- Click **Next** and the **ESNAP Eligibility Determination** window appears.

## Eligibility Determination: Decision, Financial Eligibility Section

The **Decision, Financial Eligibility** tab of the **Eligibility Determination** window informs the Worker of the applicant's eligibility for ESNAP.

The **Financial Eligibility** status will be determined by the system as Eligible, Ineligible or Pending. An Eligibility Reason will also be provided to correspond with the Financial Eligibility status.

File Edit Tools Window Help

Decision, Financial Eligibility Document Completeness EFS Program Status

Case No. Case Name PLAIN BRAD

Expedited Food Stamps Financial Eligibility Eligibility Reason

Income and liquid resources are less than shelter plus utility allowance

Management Override - Reason Action to be Taken by Worker

Full Month Grant [If reopening within one month of closing]

Pro-rated Grant [Cannot issue if amount is less than \$10]

Next Previous

## Eligibility Determination: Document Completeness Section

The **Document Completeness** tab of the **Eligibility Determination** window allows the Worker to track the verification of eligibility factors and to record collateral contact made, if any.

The screenshot shows a software interface with a menu bar (File, Edit, Tools, Window, Help) and a toolbar. The main window has three tabs: "Decision, Financial Eligibility", "Document Completeness EFS" (which is selected), and "Program Status". Below the tabs, the text "EFS Verification Completeness" is followed by a green box containing the word "COMPLETE". A tooltip points to this box with the text "Document Completeness". Below this, a note states: "To view and note alternate verification, click on the 'Down' arrow of the scroll bar on the right." Underneath is the heading "Expedited Food Stamps Verification". The form contains several fields: "Who" with the value "Plain Brad", "Eligibility Factor" with the value "RFI", "Collateral Contact Attempted" with a dropdown menu showing a period ".", "Action Taken" with a dropdown menu showing a period ".", and a "Details" text box. A tooltip points to the "Action Taken" dropdown with the text "Alternative verification method". At the bottom of the window are "Next" and "Previous" buttons.

- Click **Document Completeness EFS** and review the **EFS Verification Completeness** field.
- Click the down-arrow for **Collateral Contact Attempted, if applicable**. For collateral contact attempted or alternate verification, the action taken must be recorded and a detailed comment must be entered in the **Details** comment box.

### **Eligibility Determination: Program Status Section**

On the **Program Status** tab of the **Eligibility Determination** window (shown on following page):

**Active** is prefilled for the SNAP status when the following conditions exist:

- The applicant is eligible for ESNAP.
- The identity, citizenship/alien status, residence, and Social Security number or application for Social Security number are fully documented and ready to scan (as indicated during the **SNAP Application Interview** activity on the **Individual Detail** window) for all individuals applying for SNAP on the case.
- Income, resources and expenses are fully verified.
  - The following types of expenses will be considered for full verification determination:
    - Rent/mortgage/shelter, utilities, fuel or air conditioning, medical, child/dependent care and child support.
    - There are no pending RFI computer matches or all RFI matches are resolved.

**Single Issue** is prefilled for the SNAP status when the following conditions exist:

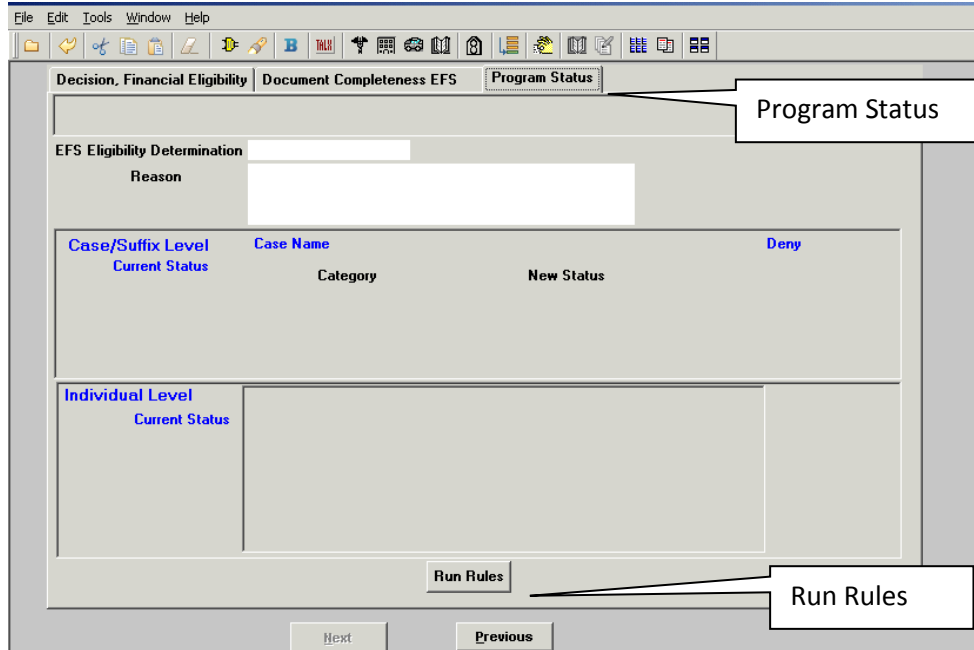
- The applicant is eligible for ESNAP. The identity, citizenship/alien status, residence, and Social Security number or application for Social Security number are fully documented and ready to scan (as indicated during the **SNAP Application Interview** activity on the **Individual Detail** window) for all individuals applying for SNAP on the case. Income, resources and expenses are fully verified.
- There are pending RFI computer matches or the results of the computer matches have not been received.

**Single Issue** is prefilled for the SNAP status when the applicant is eligible for ESNAP, identity of the casehead has been documented and ready to scan (as indicated during the **SNAP Application Interview** activity on the **Individual Detail** window), but one or more of the following eligibility factors has not been fully documented:

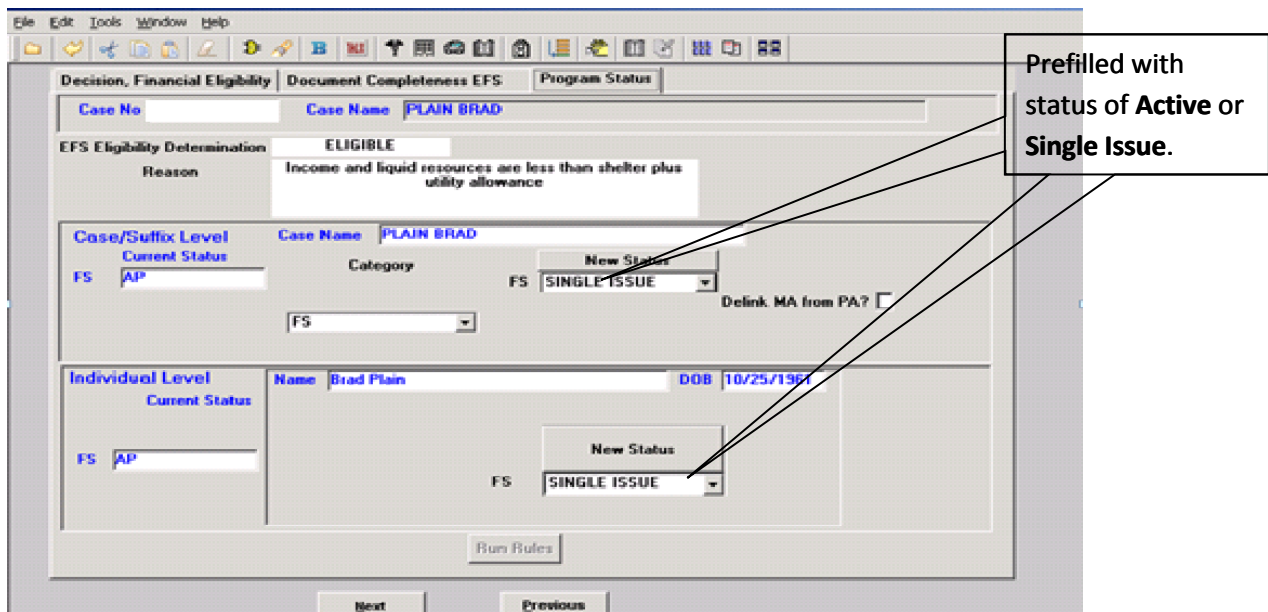
- Identity of other SNAP household members
- Citizenship/alien status
- Residence
- Social Security number (SSN) or application for SSN
- Income
- Resources
- Expenses



## Eligibility Determination: Program Status Section



- Click **Run Rules**.



POS will determine ESNAP eligibility based on the information entered, and update the case status as needed.

- Click **Next** and the **ESNAP Summary** window will appear.

## ESNAP Summary Window

The screenshot shows a software window titled "Case Acceptance" with a menu bar (File, Edit, Tools, Window, Help) and a toolbar. The main area contains the following fields and text:

- Instructions:** The EFS Summary window shows the expedited processing determination made at the time of the intake and the expedited processing determination made during the EFS Issuance. If the determinations are different, you must select the reason for the difference.
- EFS Eligibility Determination :** ELIGIBLE
- Does the case qualify for fully verified FS benefits?** No
- Expedited processing determination at Intake :** ELIGIBLE
- Expedited processing determination in EFS Issuance :** ELIGIBLE
- Does the determination made at the time of the interview differ from the determination made during the intake?** NO
- Reason for difference** (empty field)

At the bottom are "Next" and "Previous" buttons. A callout box on the right points to the window and is labeled "ESNAP Summary".

- Review the **ESNAP Summary** window. The window includes the following fields:
  - EFS Eligibility Determination
  - Does the case qualify for fully verified FS benefits?
  - Expedited processing determination at Intake
  - Expedited processing determination in EFS Issuance
  - Does the determination made at the time of the interview differ from the determination made during the intake?
    - If, at the initial screening the Agency incorrectly determines the household is not qualified for ESNAP processing but subsequently finds that the household was qualified for ESNAP processing and is determined eligible for SNAP benefits, a SNAP benefit must be made available no later than five calendar days after the date it is discovered that the household qualifies for ESNAP processing. The Worker must select **Agency Error** in the **Reason for difference** field.
  - Reason for difference

### Screen Flow: Ineligible for ESNAP Benefit

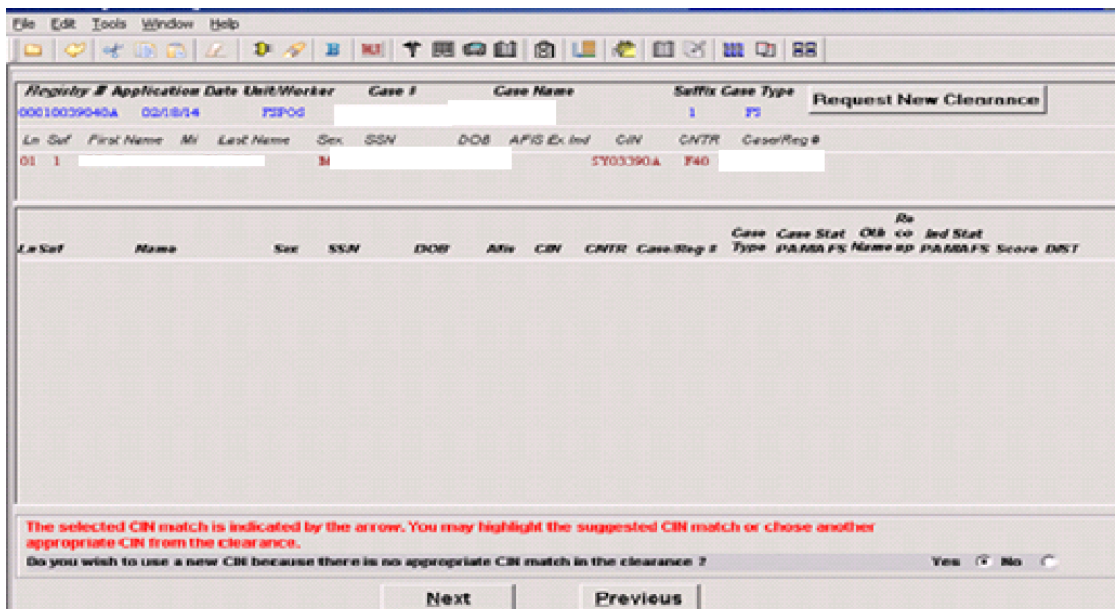
The SNAP status remains in Applying (**AP**) status when the applicant is not eligible for ESNAP or the household is qualified for ESNAP processing but is ineligible to receive SNAP benefits.

- Review the **ESNAP Summary** and click **Next** to proceed and the following windows will appear:
  - The **Case Number Re-Use** window appears. Complete the case number reuse and click **Next** to proceed.
  - The **Form Data Entry** window appears. Complete any required data entry as needed. Click **Next** to proceed.
  - The **Notice Data Entry** window appears. Complete any required data entry as needed. Click **Next** to proceed.
  - The **Print Forms** window appears. Print any required forms as needed. Click **Next** to proceed.
  - The **Approval Status** window appears. Click **Next** and **Complete Activity** to send the case to the Supervisor.

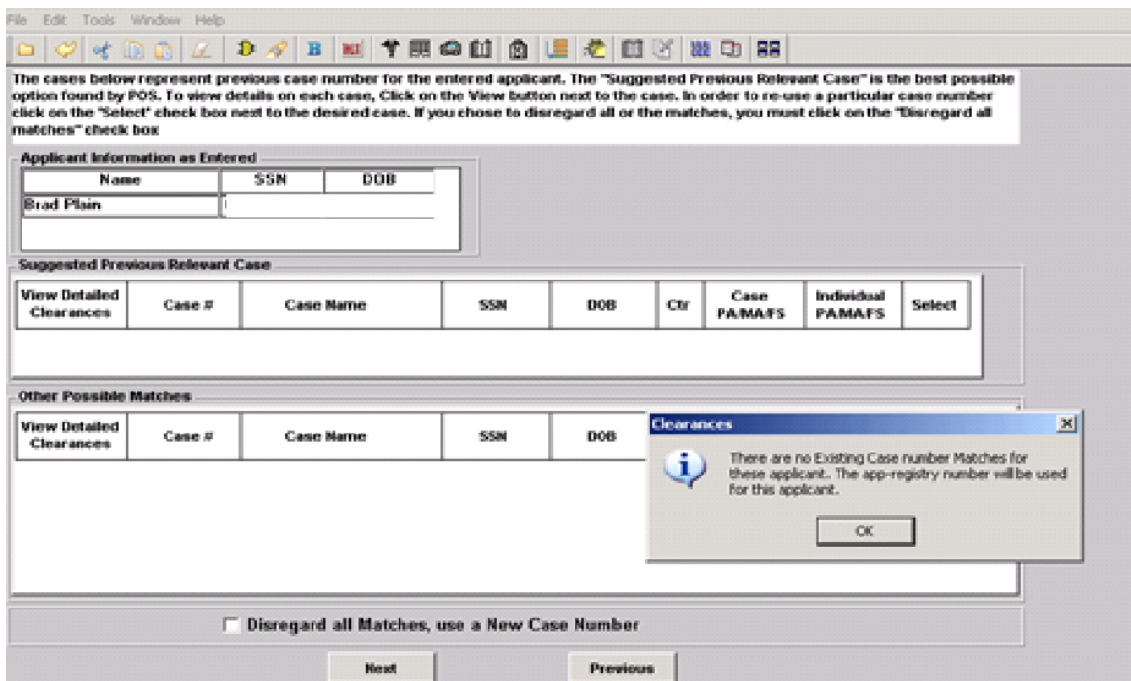
### Screen Flow After ESNAP Summary Window: Eligible for ESNAP Benefit

- Review the **ESNAP Summary** and click **Next** to proceed, and the following windows will appear:
  - CIN Reuse
  - Case Number Reuse
  - Existing Budgets
  - WMS Budget Selection
  - TAD
  - Grant Data Entry
  - CBIC Payee Status
  - Form Data Entry
  - Notice Data Entry
  - Print Forms
  - Approval Status

### CIN Reuse Window

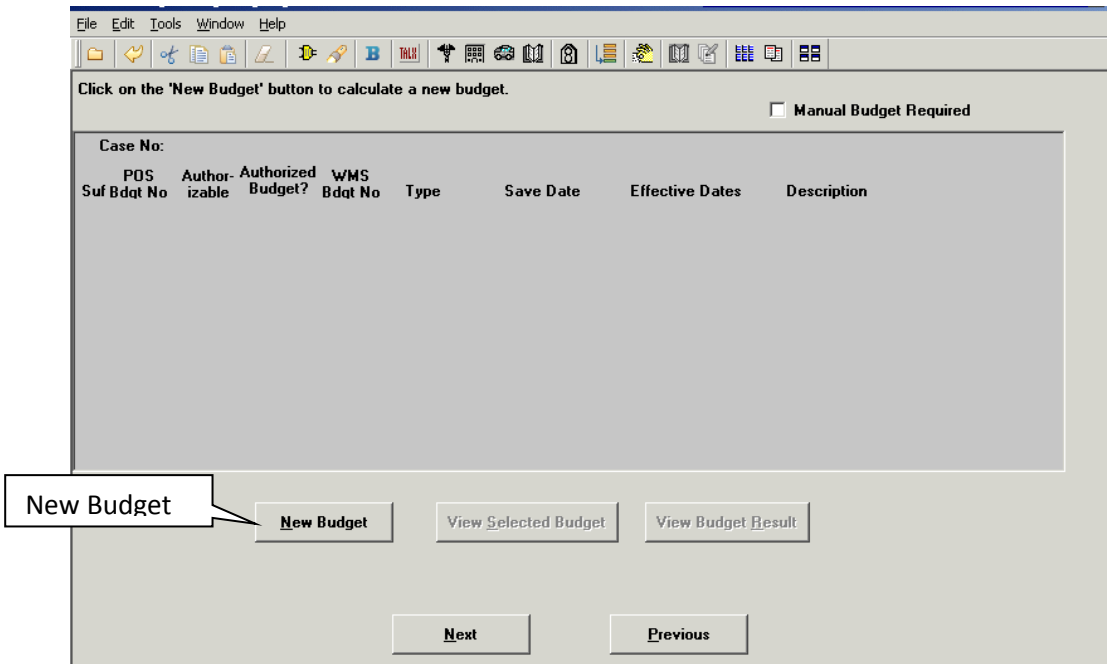


- Review and click **Next**, and the **Case Number Re-Use** window will appear.

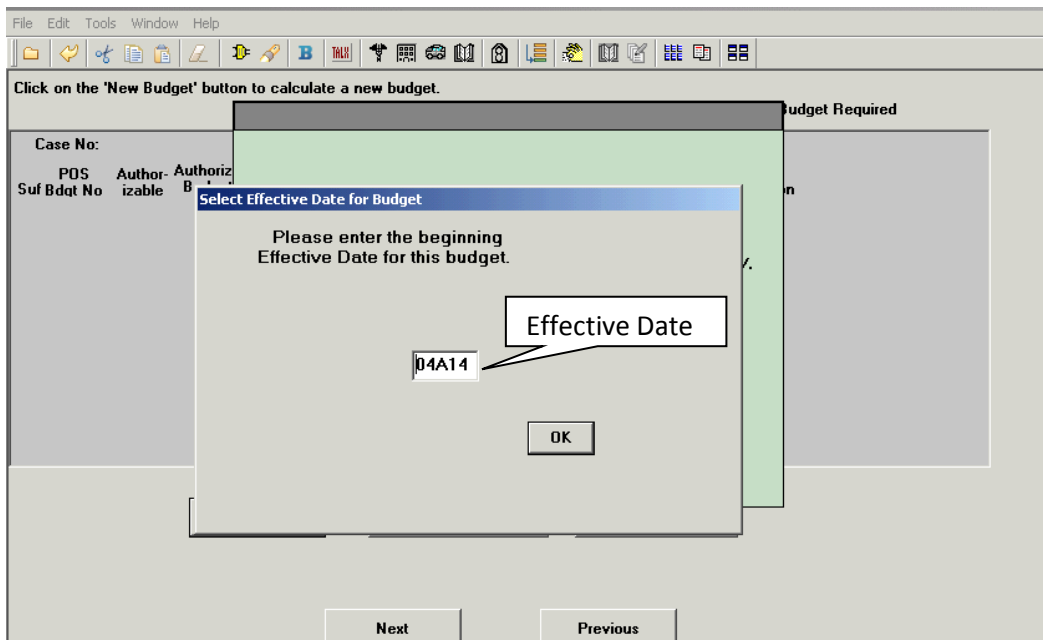


- Complete the case number reuse determination.
- Click **Next** and the **Existing Budgets** window will appear for processing.

### Existing Budgets Window

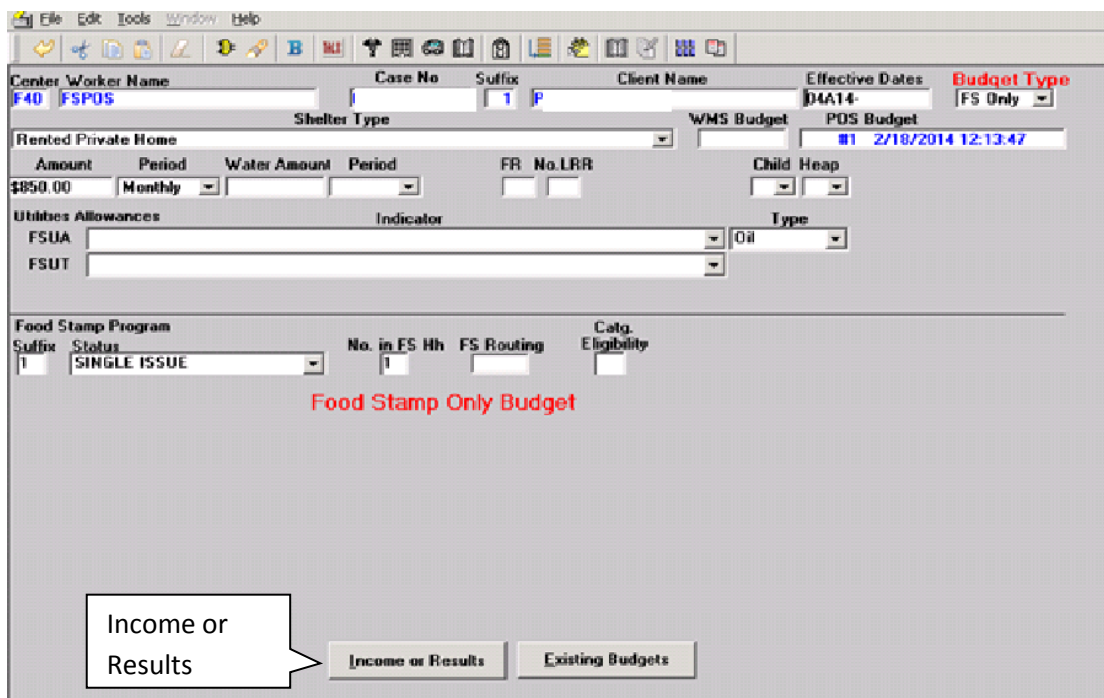


- Click **New Budget**.

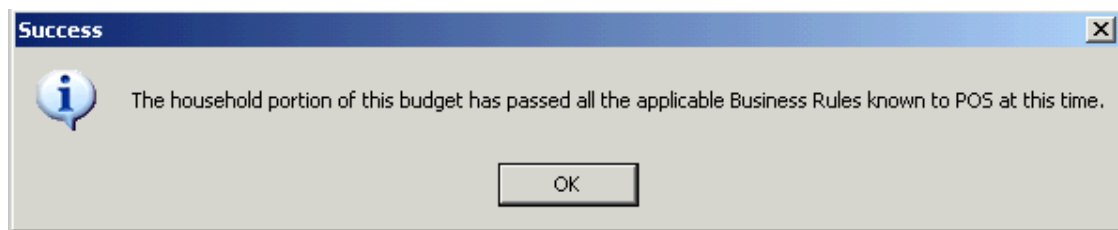


- Enter the effective date of the new budget, press **OK**, and then **Next**, and the **Household/Suffix Financial Needs** window will appear.

### Household/Suffix Financial Needs Window



- Review the households financial information and click **Income or Results**.



POS indicates that the budget has passed the business rules.

- Click **OK** and the **Individual Income/Needs** window will appear.

### Individual Income/Needs Window

Case No & Suffix	Line No.	Bdgt No.	Client Name	Hours Worked
	1	1		

Employability Status: NOT APPLYING | PA Status: | FS Status: APPLYING | Date of Birth: 10/25/1961 | Involvement: CIN | CIN: SY03390A

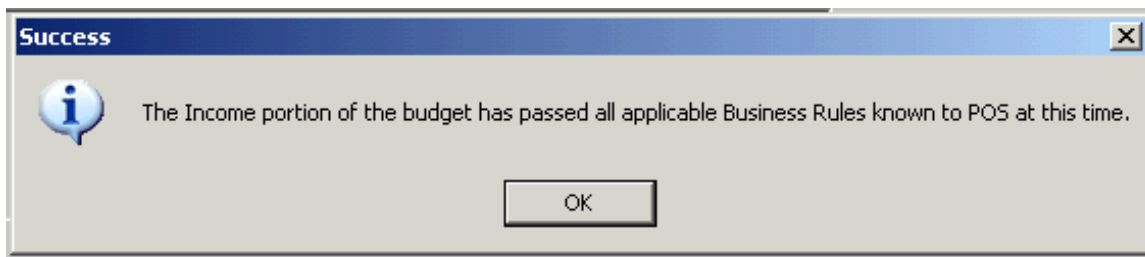
Income	Line	Source	Frequency	Gross	Program	Usage	Inc.	Exemption	PA	FS
	1									
	1									
	1									

Deductions and Medical Bills	Line	Type	Amount
	1		
	1		

Daycare Needs	Line	Type	Amount	Date of Birth	Disabled?
	1			00/00/0000	
	1			00/00/0000	
	1			00/00/0000	
	1			00/00/0000	

Buttons: Calculate Budget, Household Needs, Existing Budgets

- Review the information on the window.
- Click **Calculate Budget**.

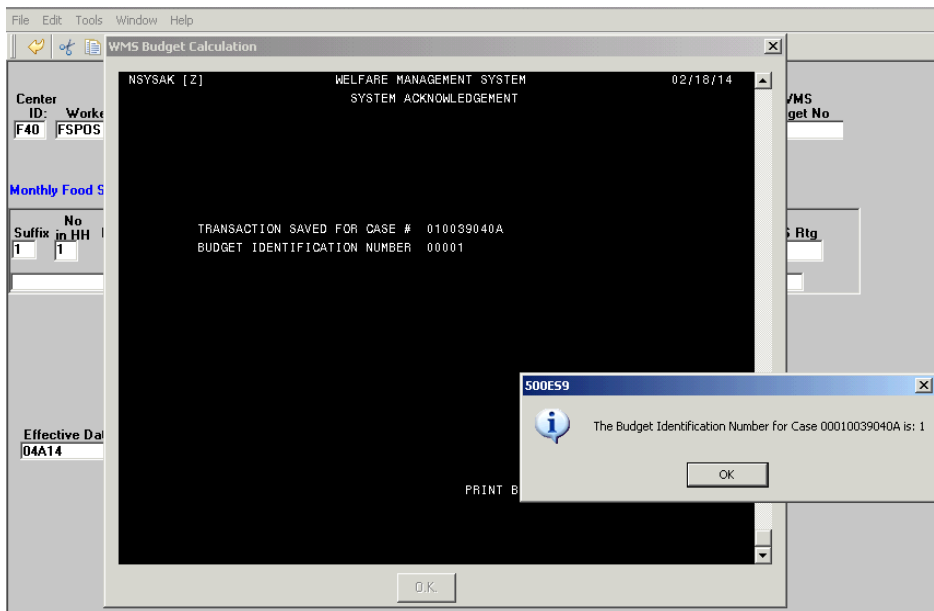


- Click **OK** to launch WMS, and the **WMS Budget Calculation** window appears.

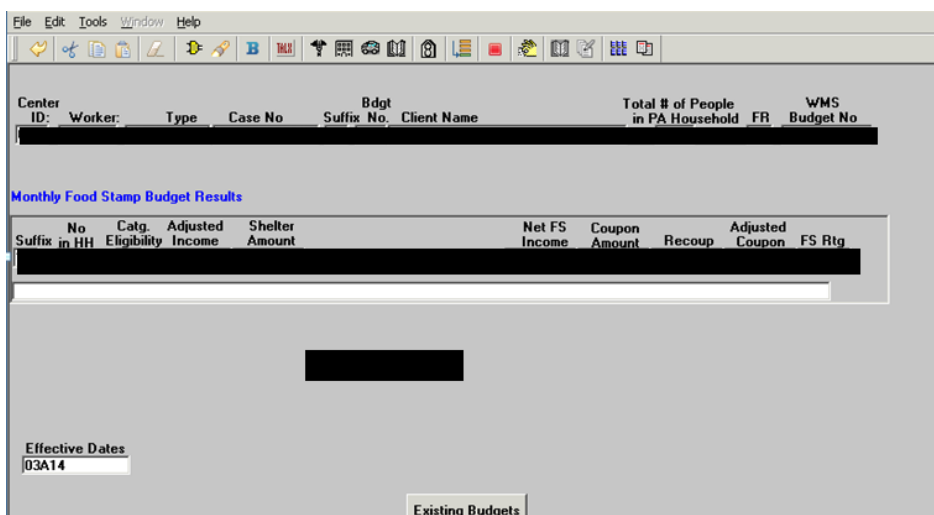
## WMS Budget Calculation Window

POS inputs the budget entries into WMS.

- Save the budget in WMS.
- The budget number for the case is displayed.
- Click **OK** and the **Budget Results** window will appear.



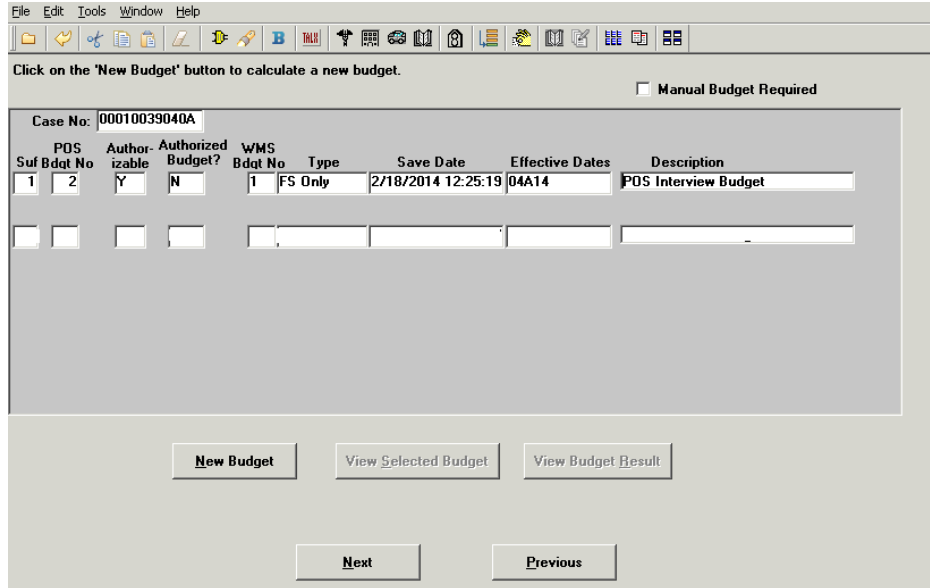
## Budget Results Window



- Review the budget results on the window, and click the **Existing Budgets** button.

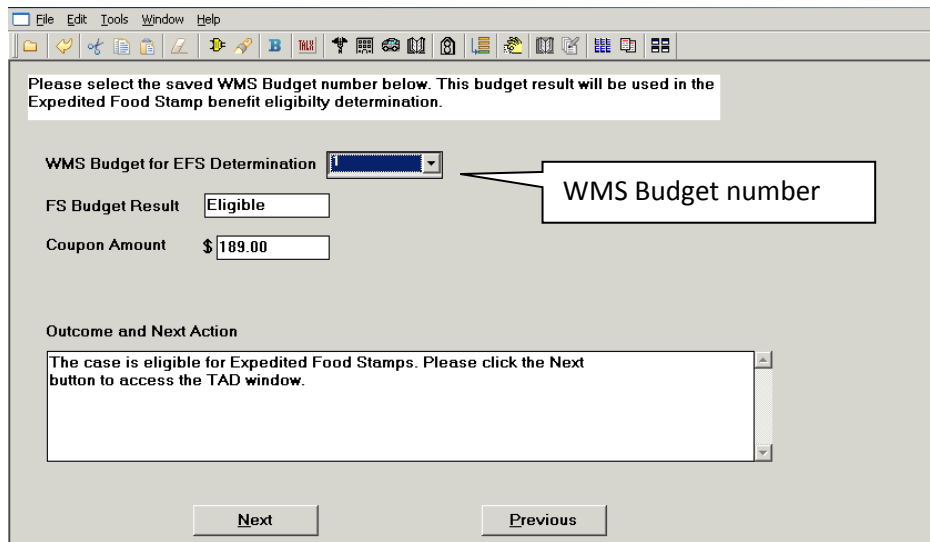


### Existing Budgets Window



- Click **Next** to proceed to the **WMS Budget Selection for EFS Determination** window, or click **New Budget** to recalculate one.

### WMS Budget Selection for EFS Determination Window



- Select a WMS Budget Number from the **WMS Budget for ESNAP Determination** drop-down.
- Click **Next** to proceed to the TAD.

Note: If the WMS budget returns an outcome of ineligible, POS returns the Worker to the **Eligibility Determination** window to process the **ESNAP Denial**. Otherwise, POS displays the TAD window.

### TAD Eligibility Window

The screenshot shows the 'TAD Eligibility' window with the 'POS Data' tab selected. The window title is 'ELIGIBILITY'. The 'WMS Data' section includes the following fields:

Case No	Suf	Center	Unit Worker	RCRT-SRC	Proj. No	Acct. No	Case Name	APP SRC
	1	F40	FSPPOS					

Below these are fields for Language, M3E Indicator, Notice Language, FSINTW, Notice Bdt #, LFLM, ABBR-CNS, Lang Read, Homebound Ind, and WFFSI.

The 'Category Prg' section contains:

Category	Prg	Status	Status Reason	From Date	To Date
FS	FS	AP		00/00/0000	00/00/0000

The 'Individual Name' section contains:

Individual Name	Line#	CIN	Prg	Status	Status Reason	Date
	01		FS	AP		02/18/2014

At the bottom, there are buttons for 'Next', 'Previous', 'Ignore Errors', 'Show Individual Data', 'Run Rules', and 'Create CNS'. A callout box labeled 'POS Data tab' points to the 'POS Data' tab in the 'WMS Data' section.

- Click the **POS Data** tab.

## TAD - POS Data

The screenshot shows the 'ELIGIBILITY' window in the POS system. The window is titled 'Food Stamp Tad Window' and contains several sections of data entry fields. The 'Case Number' is 1, and the 'Center' is 'Melrose SNAP Center'. The 'Unit Worker' is 'FSP05'. The 'Status Reason' field is highlighted with a callout box and contains the text 'A33-1st Month Prorate - Applied After the 15th'. Below the main form is a table with columns for 'Individual Name', 'Line#', 'CIN', 'Prg', 'Status', 'Deny?', 'Status Reason', and 'Date'. The table contains one row with values: [redacted], 1, [redacted], FS, [redacted], [redacted], [redacted], 02/18/2014. At the bottom of the window are buttons for 'Next', 'Previous', 'Ignore Errors', 'Show Individual Data', 'Run Rules', and 'Create CNS'.

POS will prefill the **Status Reason** with the Opening Code.

- If Case Status is Active, Opening Code **A30** (Same Benefit Each Month) is used when the application was filed on the 1<sup>st</sup> of the month, Opening Code **A32** (1st Month Prorate - Applied Before the 16<sup>th</sup>) is used when the application was filed before the 16<sup>th</sup> day of the month and Opening Code **A33** (1st Month Prorate - Applied Before the 15<sup>th</sup>) is used when the application was filed after the 15<sup>th</sup> day of the month.
- If Case Status is Single Issue, Opening Code **A30** is used when the application was filed on the 1<sup>st</sup> of the month, no documentation is missing and RFI is pending.
- If Case Status is Single Issue, Opening Code **A32** is used when the application was filed before the 16<sup>th</sup> day of the month, no documentation is missing and RFI is pending.
- If Case Status is Single Issue, Opening Code **A33** is used when the application was filed after the 15<sup>th</sup> day of the month, no documentation is missing and RFI is pending.
- If Case Status is Single Issue, Opening Code **Q22** (Expedited – Pending Verification) is used when documentation is missing.
- Click **Create CNS** to create the CNS Notice Number.
  - If the CNS notice cannot be created, the Worker must connect to WMS and create the CNS Notice. POS will connect to CNS and retrieve the CNS Notice Number.
  - If POS cannot retrieve the CNS notice number, the Worker must enter the CNS number in the **Notice #** field.
- Click **Show Individual Data**.

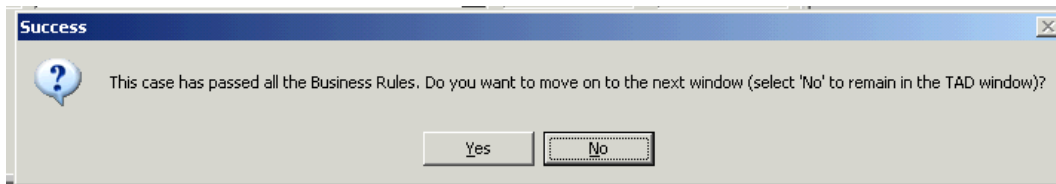
### TAD – Show Individual Data

The screenshot shows the 'ELIGIBILITY' window in the POS system. The window is titled 'WMS Data' and 'POS Data'. It contains several sections of data entry fields:

- Personal Information:** First Name, Last Name, Middle Name, Sex (M), Marital Status (Single/Never Married).
- Ethnicity:** Hispanic/Latino (Yes/No), Asian (Yes/No), American Indian/Alaska Native (Yes/No), Black or African American (Yes/No), Native Hawaiian/Other Pacific Islander (Yes/No), White (Yes/No).
- Identification:** Birth Date (10/25/1961), SSN, Student ID.
- Case Information:** Casehead, Relation to Casehead, Birth Date, CHT, TPHI.
- Employment and Status:** Emp Code (WA-NCA SNAP Work Registration Required/ABAWD Exem), SSI, VET (Non-Veteran), Citizen/Alien Status (Citizen), Alien Type, Alien No, Date of Status (00/00/0000), Date Entered (00/00/0000).
- Waivers:** D/A, IVD, LF, TL, Oth.
- Exemption Indicator:** AFIS-EX.

At the bottom of the window, there are several buttons: 'Next', 'Previous', 'Ignore Errors', 'Return to Case level Data', 'Run Rules', and 'Create CBS'.

- Review individual information for accuracy and completeness.
- Click **Run Rules**.



- Click **Yes** to proceed, and the **CBIC Payee Status** Window will appear.

### CBIC Payee Status Window

The **CBIC Payee Status** window only appears if the applicant is eligible for an ESNAP benefits and the Worker completed the **Grants Data Entry** window to issue a benefit. The following information will be displayed:

- Re-Use Case Number
- Suffix
- Category
- FS Status of Re-Use Case Number
- Casehead/Payee Name
- Relationship Code
- Client Identification Number (CIN)

The screenshot shows a software window titled "CBIC Payee Status" with a menu bar (File, Edit, Tools, Window, Help) and a toolbar. The main area contains several input fields and a message section.

Re-use Case Number:  Suffix:  Category:  FS Status:

Casehead/Payee name:  Relationship Code:

Casehead/Payee CIN:  CBIC Payee CIN:

Is the "Casehead/Payee CIN" listed above the same as the "CBIC Payee Cin"?  Yes  No

If Open TI is down, go to WMS Screen WIDCCH (Case Number PA/FS Payee Inquiry) using the case number selected in the Case Number Re-Use window or the application registration number if no case number was reused and retrieve the CBIC Payee CIN and answer the question above.

**MESSAGE**

The SDI Grant should pass the WMS SDI Payee edit.

Next Previous

## Manual CBIC Review

- In the event the CBIC Look-up fails in WMS, the Worker is instructed (in the middle of the **CBIC Payee Status** window) to go to the **Case # PA/FS Payee Inquiry** window (**WIDCCH**) in WMS to determine if the CIN of the payee shown in WMS in the **PA/FS Payee CIN** field is identical to the casehead or payee's CIN displayed on the **POS Case Number Re-Use** window.

To view the **WMS CBIC Inquiry** windows in order to determine the last payee:

- Access WMS by clicking the yellow plug at the top of the POS window or minimize POS and double-click the WMS icon located on the desktop of the personal computer.
- Log on to WMS using your User ID and Password.
- Enter **09** (Common Benefit ID Card Subsystem) in the **Selection #** field on the WMS Host System Menu (**NWMM00**).
- Enter **09** (Case # PA/FS Payee Inquiry [WIDCCH]) for case number inquiry or **07** (Individual PA/FS Payee Inquiry [WIDICH]) for CIN inquiry in the Function field on the WMS ID Card Menu (**WIDMNU**).
- After comparing the CIN in WMS with the CIN on the **CBIC Payee Status** window, exit WMS and return to POS. On the **CBIC Payee Status** window respond **Yes** or **No** to the question “Is the Payee CIN listed under ‘Casehead/Payee CIN’ the same as the Case Head or Payee CIN listed on the ‘Reuse’ case number window?”
- Click **Yes** and the following message is displayed: “The SDI SNAP grant should pass the WMS SDI payee edit.” Click the OK button to continue.
- Click **No** and the following message is displayed: “You must prepare a CBIC Update form to change the Payee in CBIC to match the Casehead/Payee on the case number being used.”
- If no response is entered, the Worker will be unable to proceed. The system displays the message “You must answer the question ‘Is the Payee CIN listed under ‘CBIC Payee’ the same as the Casehead or Payee CIN listed on the ‘Reuse’ case number window?’”
- Once the **Yes** or **No** response is selected, click the **Next** button to continue.
- Complete the **CBIC Payee Status** window, and click **Next** to proceed, and the **Single Issuance Benefit** window will appear.

### Single Issuance Benefit Window

The screenshot shows a software window titled "Single Issuance Benefit" with a menu bar (File, Edit, Tools, Window, Help) and a toolbar. The main area contains the following fields and table:

Case Name	Case Number	Reuse Case Number	Suffix	Date Form Prepared
			1	02/18/2014

Issuance Code	Amount	From	To	Check/CD#	Routing Location	Replaces Benefit	Authorization Number	Pages
1 Code 55 - Expedited Service-Eligibility	\$81	02/18/2014	02/28/2014					
2	\$189	00/00/0000	00/00/0000					
Total Amount		\$270						

At the bottom of the window, there are "Next" and "Previous" buttons.

On the **Single Issuance Benefit** window, the **Issuance Code** field is prefilled with the following code:

- **53** (Expedited SNAP Benefits – Fully Verified) for applicants eligible for ESNAP that provide all documents to verify identity, provided full verification of SNAP eligibility, and have no pending RFI.
- **55** (Expedited SNAP Benefits – Not Verified) for applicants eligible for ESNAP that provide verification of casehead identity, but do not provide full verification of SNAP eligibility or have pending RFI.
- Review the information on the window and click **Next** to proceed, and the **Form Data Entry** window will appear.

### Form Data Entry Window

- If a CBIC payee updated is required, when the **Forms** window appears, click **Yes** in response to the item “Request for Identification Card/Temporary Medicaid Authorization/Update Existing CBIC” (**W-607A**), if necessary.

The screenshot shows a software window titled "POS 8.1 - [Form Data-Entry]" with a menu bar (File, Edit, Tools, Window, Help) and a status bar (12:49:57 PM, Tuesday, February 18, 2014). The main area contains a table with the following items:

	Yes	No
Social Security Administration - Consent for Release of Information (Form W515R)	<input checked="" type="radio"/>	<input type="radio"/>
Request for Birth or Death Verification from Agencies Outside New York City (Form W680)	<input type="radio"/>	<input type="radio"/>
Request for Identification Card/Temporary Medicaid Authorization (Form W607A)	<input type="radio"/>	<input type="radio"/>
School Verification Letter (Form W-700E)	<input type="radio"/>	<input type="radio"/>
Request for Contact on a SNAP Application (Form DSS4753)	<input type="radio"/>	<input type="radio"/>
Request for Contact on a SNAP Application (Form W-119)	<input type="radio"/>	<input type="radio"/>
Systematic Alien Verification for Entitlement (SAVE) Referral (Form W-515X)	<input type="radio"/>	<input type="radio"/>
Documentation Requirements (Form W-113K)	<input type="radio"/>	<input type="radio"/>
Notice of SNAP Recertification Appointment (Form W-129RR)	<input type="radio"/>	<input type="radio"/>
FIA School/Training Enrollment Letter (Form W-700D)	<input type="radio"/>	<input type="radio"/>
Family Care Assessment (Form W-582A)	<input type="radio"/>	<input type="radio"/>
Declaration of Application for a Social Security Number (Form EXP-83H)	<input type="radio"/>	<input type="radio"/>
SNAP History Sheet for Center F61 (Form W-25M)	<input type="radio"/>	<input type="radio"/>
Request for Birth or Death Verification from New York City Department of Health (Form W701)	<input type="radio"/>	<input type="radio"/>

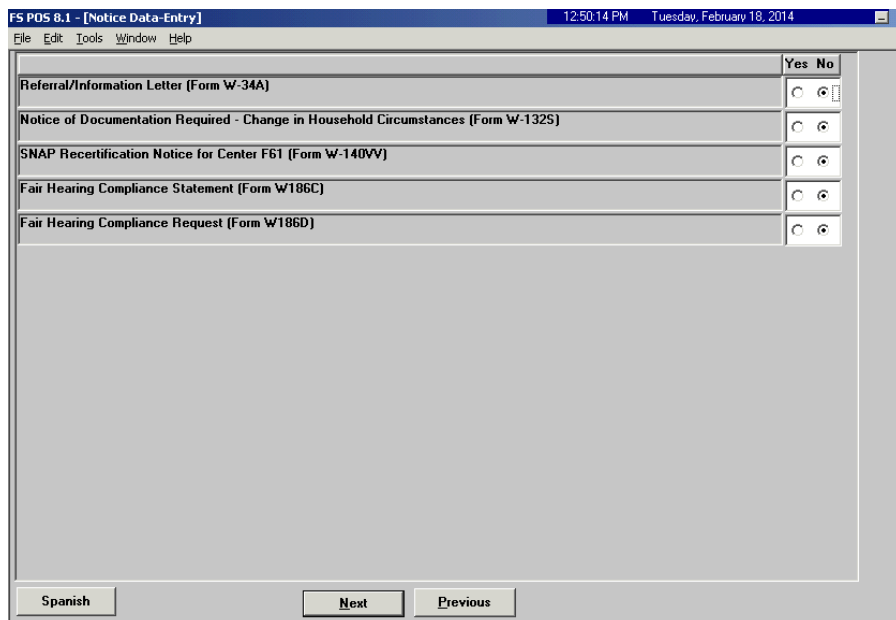
At the bottom of the window, there are three buttons: "Spanish", "Next", and "Previous".

- Click the **Yes** for any required forms, then complete the forms.
  - If documentation is required, complete the **Data Entry** window for “Documentation Requirements (**Form W-113K**)” to indicate the due date.
  - If a CBIC update is required, complete the **Data Entry** window for “Request for Identification Card/Temporary Medicaid Authorization” (**Form W-607A**).
- Click **Next** to proceed and the **Notice Data Entry** window will appear.



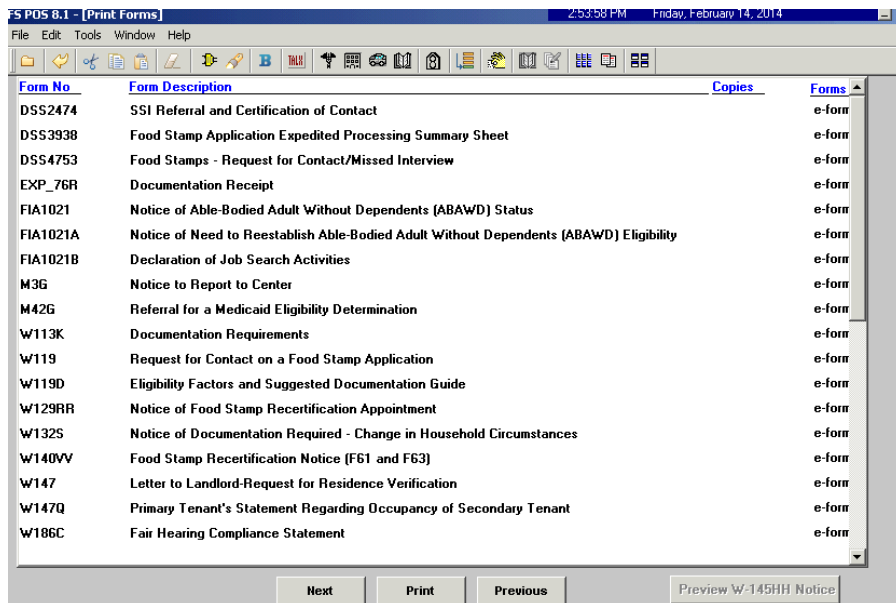
# Attachment A – ESNAP Screening and Determination for SNAP Application in POS

## Notice Data Entry Window



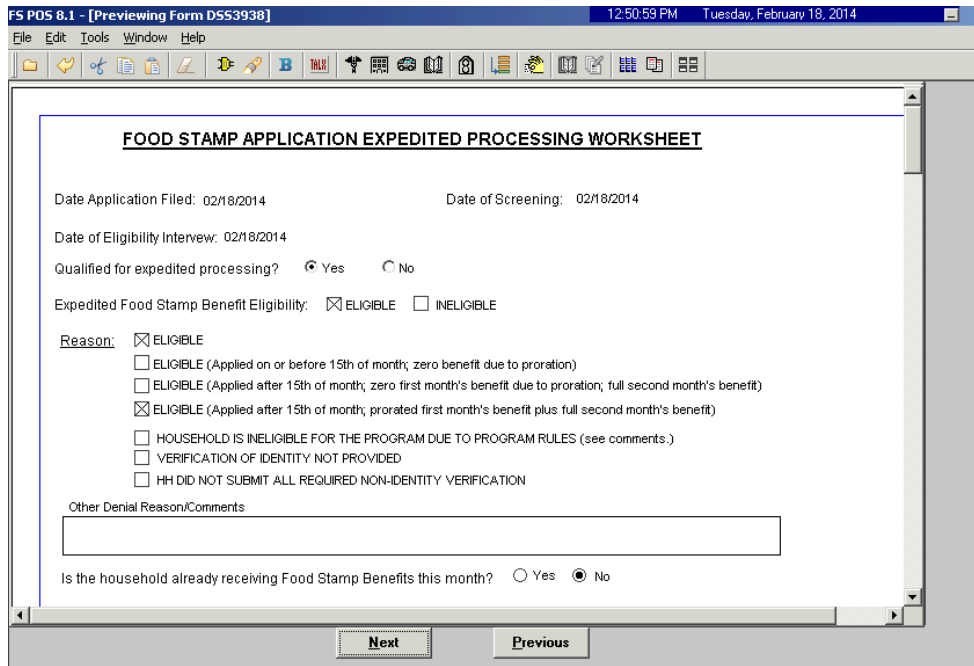
- Click the **Yes** radio button for any required notice, and complete the notice.
- Click **Next** to proceed, and the **Print Forms** window will appear.

## Print Forms Window



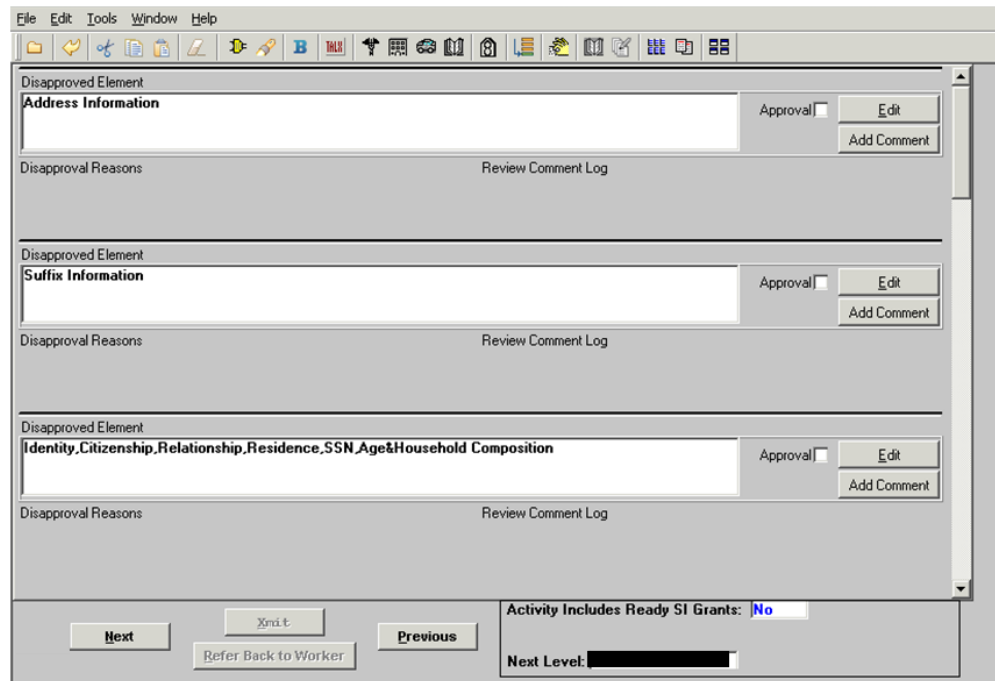
- Select all forms to be printed and click **Print**.
- After forms have printed, click **Next** to proceed, and the **Previewing Form DSS3938** will appear.

### Previewing Form DSS3938 Window

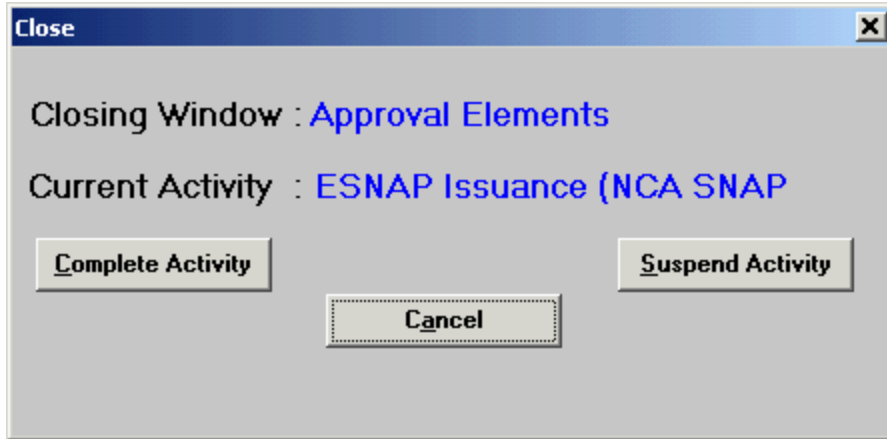


- Review the **LDSS-3938** and click **Next** to proceed, and the **Approved Elements** window will appear.

### Approval Elements Window



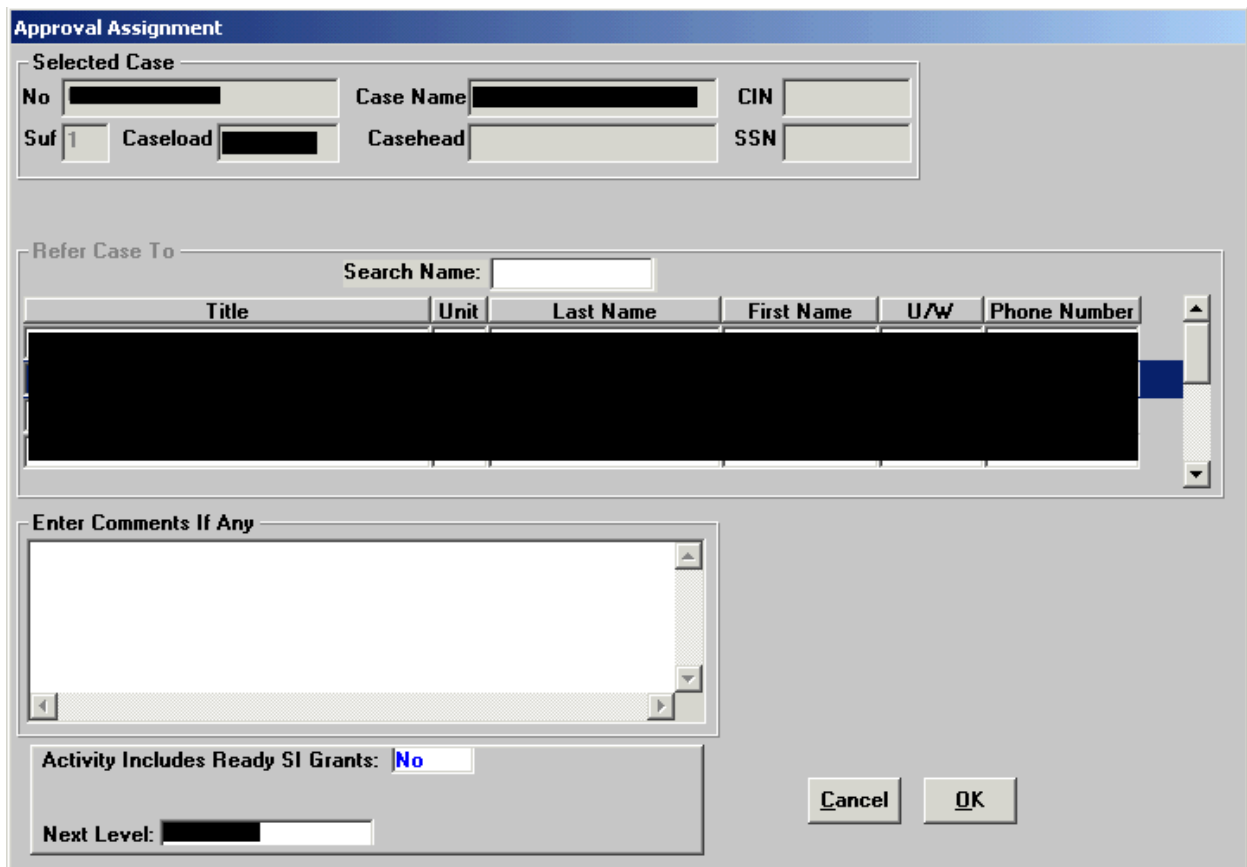
- Click **Next** to proceed.



- Click **Complete Activity** to submit to the Supervisor for approval.
- The **Approval Assignment** window appears.

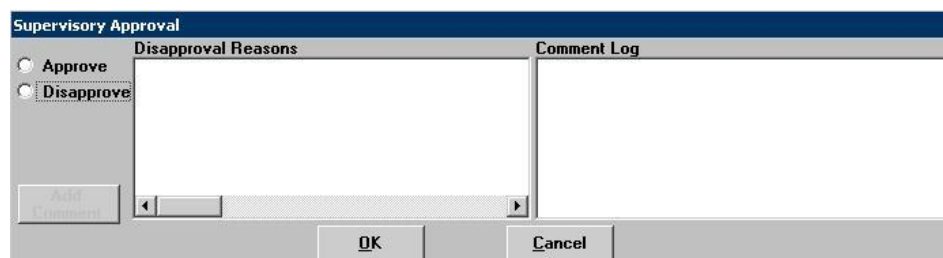
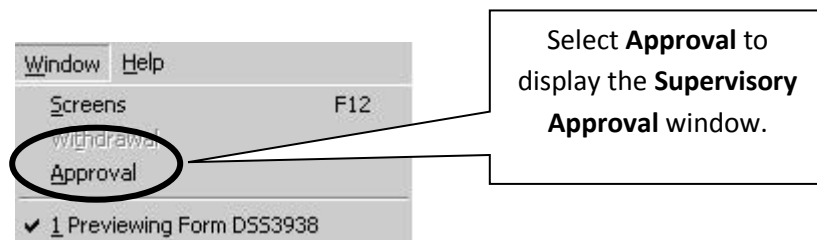
### Approval Assignment Window

- Select the Supervisor, enter a detailed case comment and click **OK** to submit for approval.



## Supervisor

- To complete the processing for the same-day issuance of ESNAP through POS, the Supervisor must approve the following windows in the **Approve ESNAP** activity (by placing a check mark in the **Approval** box for each window):
  - **LDSS-4826 Signatures**
  - **ESNAP Eligibility**
  - **CIN Re-Use**
  - **Case Number Re-Use**
  - **TAD Data**
  - **Grants Data Entry**
  - **Previewing Form LDSS-3938**
  - **ESNAP Decision Form**



The following windows will not appear for applicants that are ineligible for ESNAP or cannot receive FS under the expedited process:

- **CIN Re-Use**
- **Budget**
- **TAD**
- **CBIC Payee**
- **Grant Data Entry**

After the **LDSS-3938** window is approved, the next window to appear is the **ESNAP Decision Form** window.

## Attachment A – ESNAP Screening and Determination for SNAP Application in POS

If the household is eligible for SNAP benefits, the **Previewing Form LDSS-3938** window will appear after the **Grants Data Entry** window.

The **ESNAP Decision Form** window will enable the Supervisor to preview the Action Taken on Your Food Stamp Benefits Case (NYC) form (**LDSS-3152 NYC**) when a CNS notice is not used for the case, approve the window or enter comments on what needs correcting. When approved (i.e., check mark entered in the “Approve” box), the LDSS-3152 NYC will print, if a CNS notice will not be used.

The last window in the **Approve ESNAP Issuance** activity is **Approval Elements** as seen on page 31.

- The Supervisor must click the **Xmit** (Transmit) button to send the ESNAP grant and TAD to WMS if all windows have been approved and the household is eligible for ESNAP.

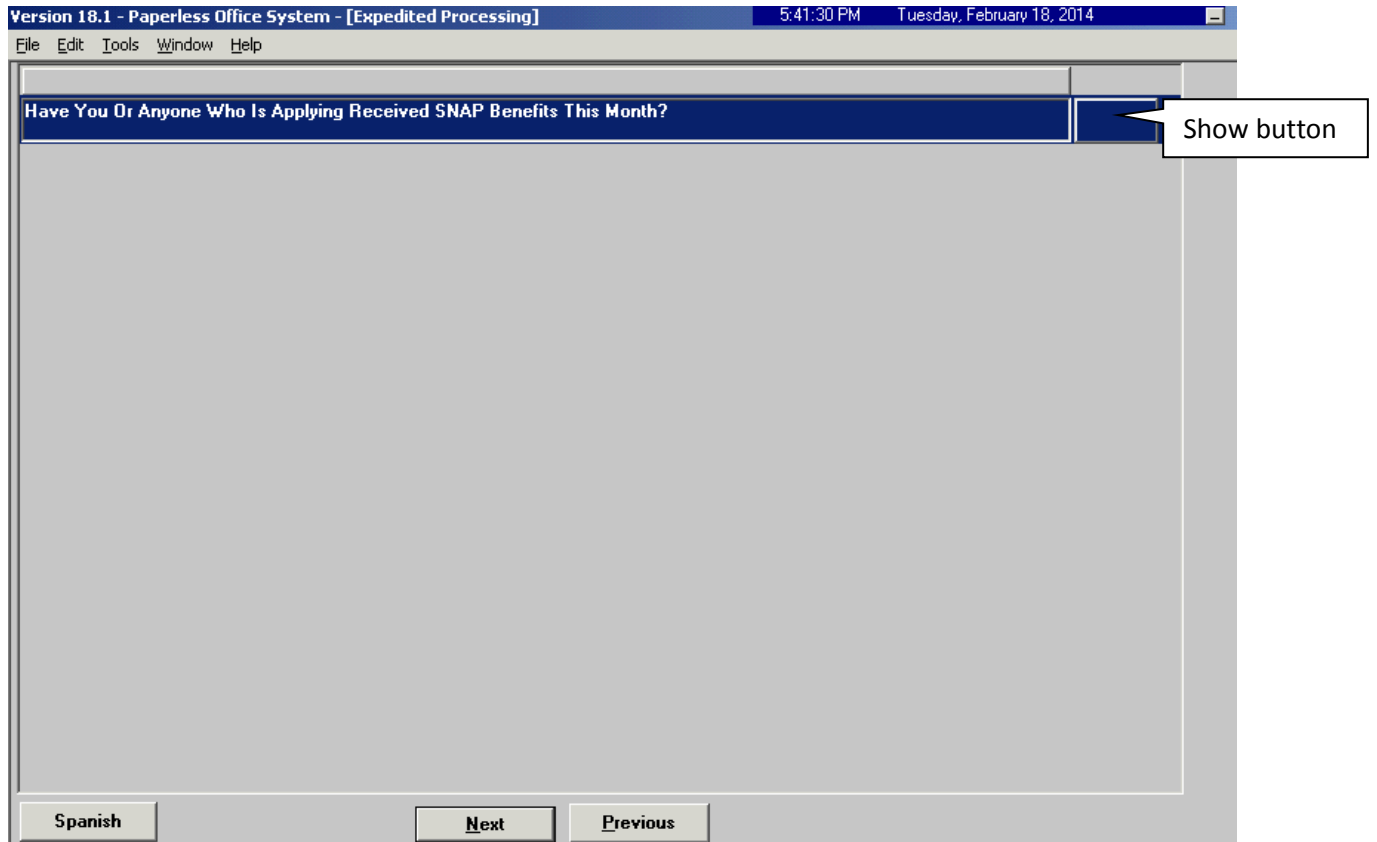
The **Refer Back to Worker** button at the bottom of the **Approval Status** window will enable the Supervisor to send the case back to a Worker for completion when a window activity has been disapproved. To return the case, the Supervisor must:

- Click the **Refer Back to Worker** button to display the list of available Workers within the Job Center. The display will highlight the Worker who completed the interview, but the Supervisor will have the option to select any Worker from the list.
- Click the **OK** button to send the case back to the highlighted Worker’s Queue.

## Attachment B - ESNAP Screening for CA Application Interview in POS

Follow the screenflow and instructions in POS below for ESNAP screening of a CA application. When the JOS/Worker completes the **LDSS-2921 Signature Capture** window during the **CA Application Interview** activity in POS, the **Expedited Processing** window appears to allow the JOS/Worker to begin a determination of eligibility for expedited SNAP processing.

### Expedited Processing Window in CA Application Interview



- Click the **Show** button and POS will search WMS to determine if a SNAP benefit has been issued for the month.

### **Expedited Processing** Window in CA Application Interview

If the applicant did not receive SNAP benefits in the current month or received SNAP benefits but entered a domestic violence shelter during the current month, the following questions appear:

- “Has the SNAP household received Expedited SNAP benefits in the past?”
- “Has anyone who is applying for SNAP benefits previously had income from any source (such as employment, SSA, SSI, UIB or contribution) this month?”
- “ATTENTION TO THE INTERVIEWER: Based on the interview conducted is there any indication that the applicant needs any non-food related personal item necessary for health and personal care or a food-related immediate need grant?”

If the applicant received SNAP benefits in the current month and did not enter a domestic violence shelter during the current month, the only additional question that appears is:

- “ATTENTION TO THE INTERVIEWER: Based on the interview conducted is there any indication that the applicant needs any non-food related personal item necessary for health and personal care or a food-related immediate need grant?”

### **Have You Or Anyone Who Is Applying Received SNAP Benefits This Month?**

When POS opens the **Response to Question** window, the following fields appear:

- Result of SNAP Benefit Lookup in WMS.
- Were the benefits issued under an application registration number? (Benefits do not appear in WMS benefit issuance history)
- Were the benefits issued for a case closed more than 6 months?
- Where were the benefits received (Outside NYC or In NYC)?
- Case Number Where Benefits Received:
- The question “Did anyone who is applying receive SNAP benefits this month?”
  - If answered “Yes,” the message “The household is not eligible to receive a second Food Stamp grant this month” appears if the applicant is not a resident of a domestic violence (DV) shelter in the **Outcome** field.
  - If answered “No,” the message “Proceed with ESNAP interview” appears in the **Outcome** field.
- Shelter code from the application interview (e.g. **01** [Apartment/Private House], **13** [Domestic Violence Shelter]).
- The question “Has the applicant entered a domestic violence shelter this month?”
  - Note: This question is disabled if the shelter code from the interview indicates that the applicant is not in a domestic violence shelter.

## SNAP Benefits This Month Response Window - Benefit Found

SNAP Benefits This Month Response Window

Results of SNAP Benefit Lookup in WMS: SNAP benefits were issued in NYC this month.

Did anyone who is applying receive SNAP benefits this month?  Yes  No

Were the benefits issued under an application registration number? (Benefits do not appear in WMS benefit issuance history)  Yes  No

Were the benefits issued for a case closed more than 6 months?  Yes  No

Where were the benefits received?  Outside NYC  In NYC

Case Number Where Benefits Received: [REDACTED]

Shelter code from interview: Not a domestic violence shelter

Has the household entered a domestic violence shelter this month?  Yes  No

Outcome

The household is not eligible to receive a second SNAP grant this month.

OK Cancel

### Benefit Lookup Results: Benefits Found by POS Lookup in WMS

If benefits are found for the current month by the automated POS lookup to WMS, POS sets the questions

- “Did anyone who is applying receive SNAP benefits this month?” to **Yes**.
- “Where were the benefits received?” to **In NYC** and
  - saves the case number under which the benefits were received in the field **Case Number Where Benefits Received**.

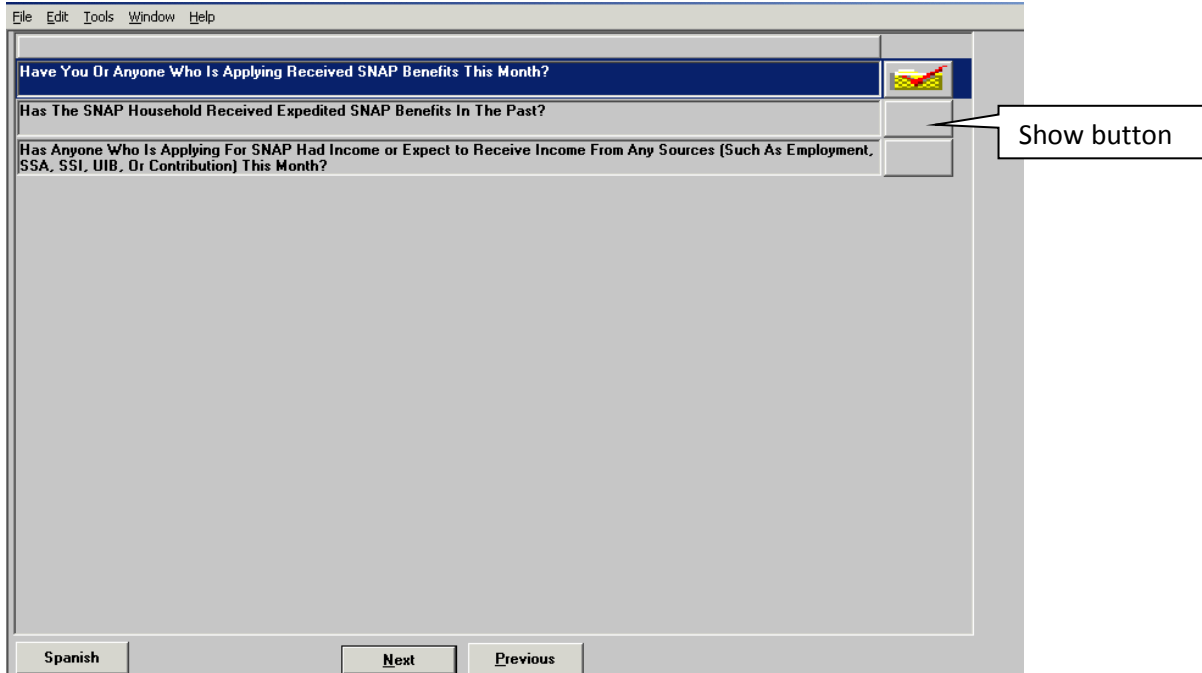
The question “Where the benefits issued under an application registration number?” Is set to **Yes** when the benefits are found under an application registration number and no longer appear in WMS benefit issuance history.

The question “Where the benefits issued for a case closed more than 6 months?” Is set to **Yes** when the benefits are found under a case that was closed more than 6 months ago.

The message “The household is not eligible to receive a second SNAP grant this month” appears if the applicant is not a resident of a domestic violence (DV) shelter.

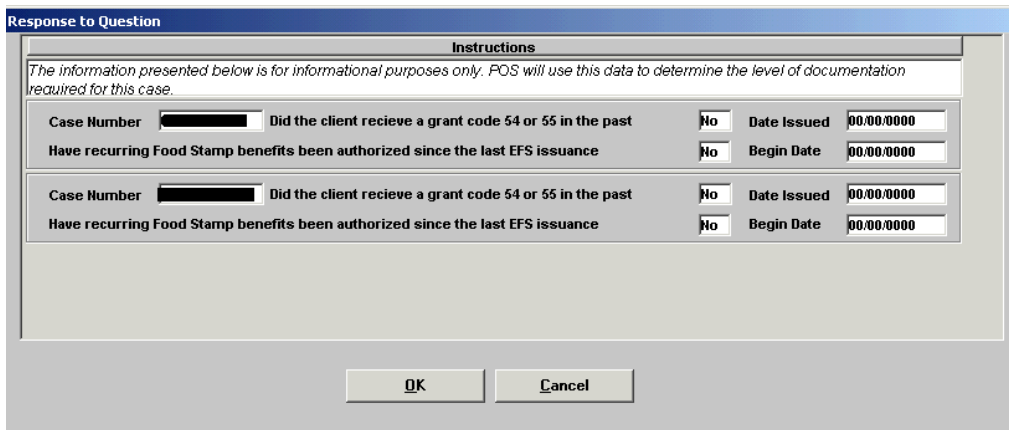


### Has the SNAP Household Received Expedited SNAP Benefits in the Past?



- Click the **Show** button for the question “Has the SNAP Household Received Expedited SNAP Benefits in the Past?”

POS will search to determine if an unverified ESNAP benefit has been issued in the past, and if so, has the applicant been approved for recurring SNAP benefits after the issuance of expedited benefits in the past. POS will use this data to determine the level of documentation required for the case.



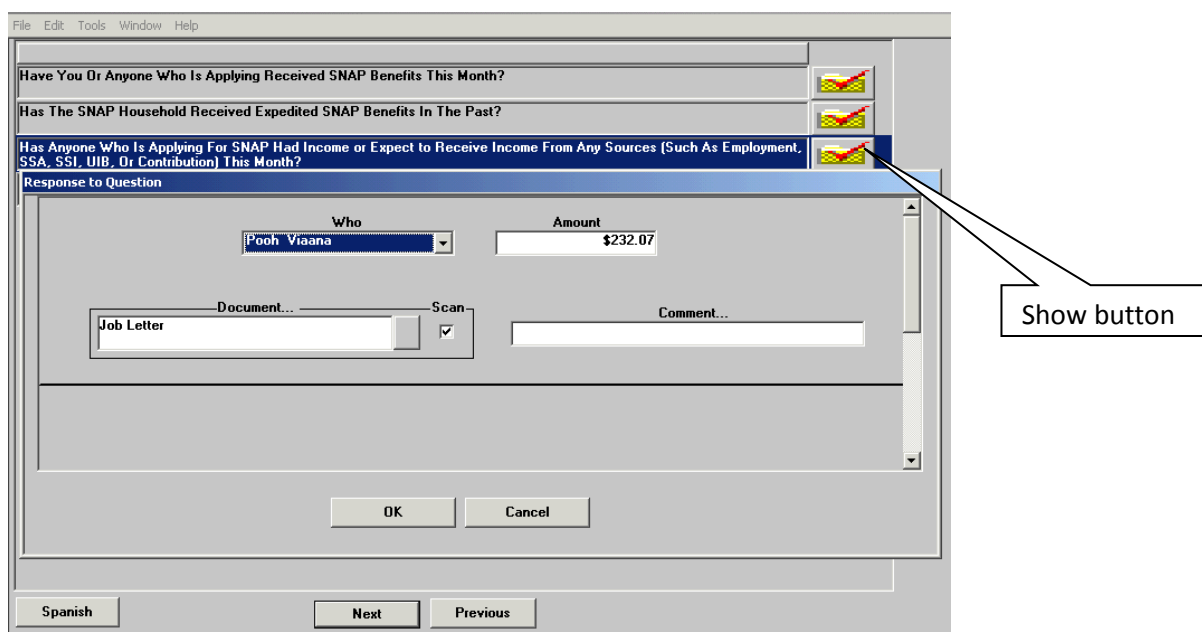
- Click **OK** and the **Expedited SNAP Questions** window returns for additional processing.

### Has Anyone Who Is Applying for SNAP Had Income or Expect to Receive Income From Any Sources (Such As Employment, SSA, SSI, UIB or Contribution) This Month?

- Click the **Show** button for the question “Has Anyone Who Is Applying for SNAP Had Income or Expect to Receive Income From Any Sources (Such As Employment, SSA, SSI, UIB or Contribution) This Month?”

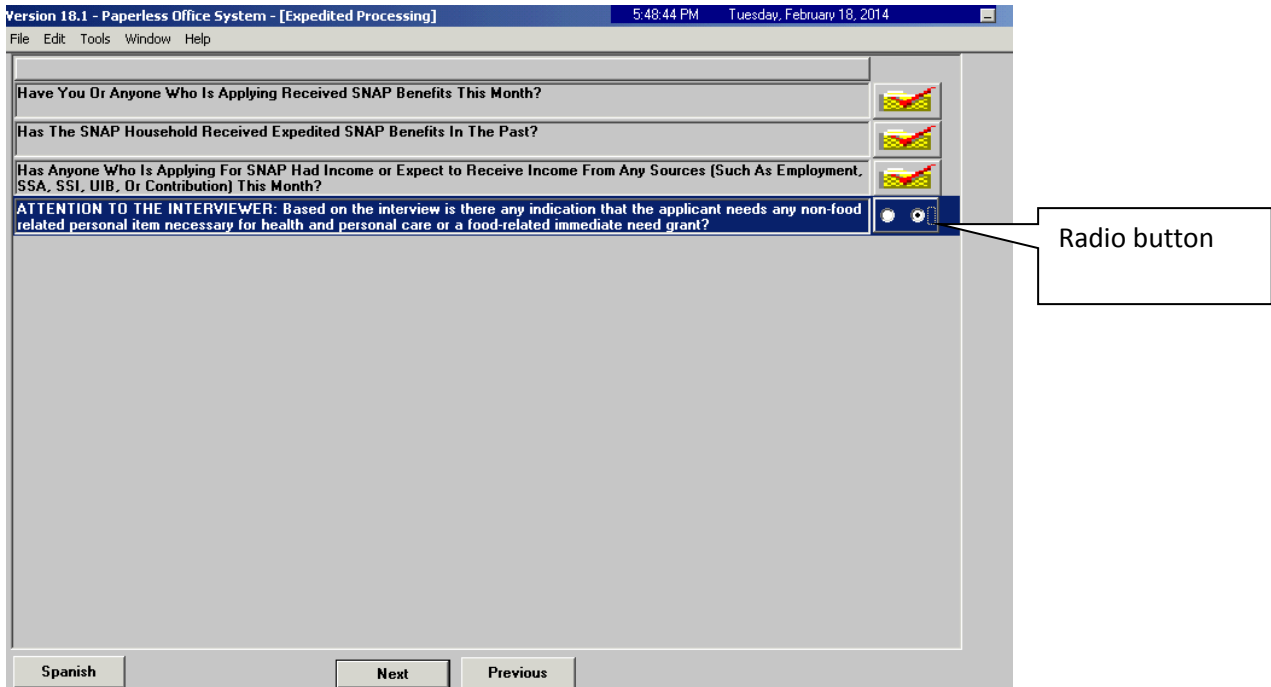
POS retrieves the income entered during the interview and pre-fill the **Response to Question** window with the name of the individual who received the income and the amount received in the current month. If the amount received or expected to be received is different from the amount calculated by POS,

- the JOS/Worker can change the value in the **Response to Question** window.

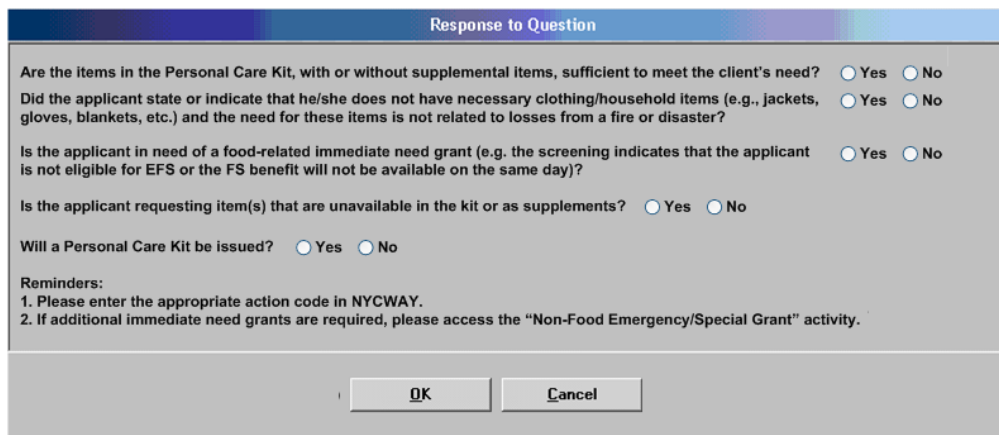


- To add additional income received this month:
  - Click the down arrow in the scroll bar.
  - Click the **Who** down-arrow and select household members who received income or expect to receive income this month, if applicable.
  - Select **Document** type if applicable.
  - Click **OK** to close the response window.

**ATTENTION TO THE INTERVIEWER: Based on the interview conducted is there any indication that the applicant needs any non-food related personal item necessary for health and personal care or a food-related immediate need grant?**



- Click the **Yes** radio button if there is any indication that the applicants needs any non-food related personal item or a food-related immediate grant.



- Click **OK**
- Click **Next** and continue the **CA Application Interview** until the **Print Forms** window.

## Previewing Form DSS 3938 Window

POS will complete the expedited processing determination for the case based on the answers recorded during the **CA Application Interview** activity. POS will save the SNAP Application Expedited Processing Summary Sheet form (**LDSS-3938**) in the electronic record when the JOS/Worker clicks the **Next** button in the **Previewing DSS-3938** window. The **LDSS-3938** will be completed based on the answers in the **CA Application Interview** and the **Expedited Processing** windows.

**FOOD STAMP APPLICATION EXPEDITED PROCESSING WORKSHEET**

Date Application Filed: 02/18/2014                      Date of Screening: 02/18/2014

Date of Eligibility Interview: 02/18/2014

Qualified for expedited processing?  Yes     No

Expedited Food Stamp Benefit Eligibility:     ELIGIBLE     INELIGIBLE

Reason:     ELIGIBLE

ELIGIBLE (Applied on or before 15th of month; zero benefit due to proration)

ELIGIBLE (Applied after 15th of month; zero first month's benefit due to proration; full second month's benefit)

ELIGIBLE (Applied after 15th of month; prorated first month's benefit plus full second month's benefit)

HOUSEHOLD IS INELIGIBLE FOR THE PROGRAM DUE TO PROGRAM RULES (see comments.)

VERIFICATION OF IDENTITY NOT PROVIDED

HH DID NOT SUBMIT ALL REQUIRED NON-IDENTITY VERIFICATION

Other Denial Reason/Comments

Is the household already receiving Food Stamp Benefits this month?     Yes     No

**Next**                      **Previous**

- Review the **LDSS-3938 NYC** form.
- Click **Next**. POS saves the **LDSS-3938 NYC** form to the HRA One Viewer.
- Continue the **CA Application Interview** until the **Print Forms** window.

## Print Forms Screen in CA Application Interview

### Expedited SNAP Benefit Eligibility Determination

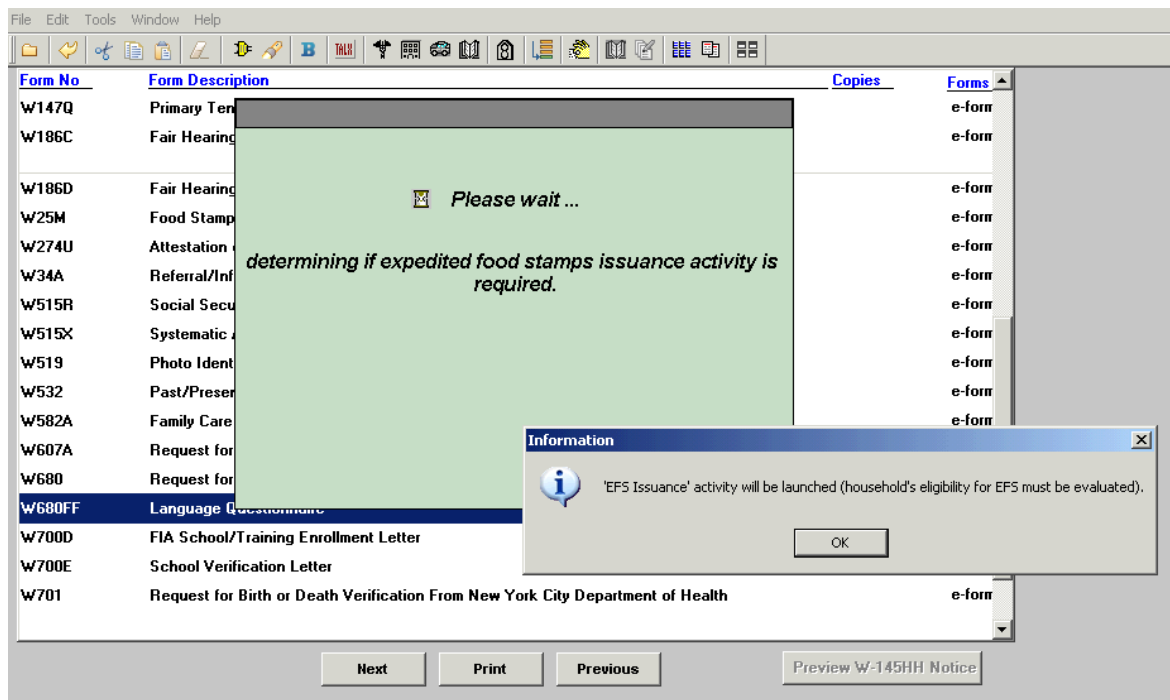
For households meeting the ESNAP criteria, a full eligibility interview must be conducted to determine the household's eligibility for SNAP benefits and to compute the benefit amount. Once the household is determined eligible and identity of the casehead has been verified, benefits must be made available on the day of the interview. Staff must begin the process of issuing an ESNAP benefit through the **IN/ESNAP** Issuance activity in POS.

Follow the screen flow and instructions in POS below for ESNAP benefit determination of a CA/SNAP application. The determination is completed at the time of the application interview.

### ESNAP Issuance Activity

The **IN/ESNAP Issuance** activity automatically begins:

- If the interview date is no later than seven calendar days after the SNAP file date,
- After the JOS/Worker completes the following steps:
  - Processes the **CA Application Interview** activity in POS.
  - Prints the required forms from the **Print Forms** window.
  - Clicks the **Next** button on the **Print Forms** window.



## IN/ESNAP Issuance

POS will complete the expedited processing determination for the case based on the answers recorded during the **CA Application Interview** activity. POS will save the final SNAP Application Expedited Processing Summary Sheet form (**LDSS-3938 NYC**) in the electronic record when the Supervisor approves the **Previewing LDSS-3938** window button at the end of the **Approve IN/ESNAP Issuance** activity. The **LDSS-3938** will be completed based on the answers in the **CA Application Interview** and the **Expedited Processing** windows.

The following section highlights specific elements of the **IN/ESNAP Issuance** activity.

- When the **IN/ESNAP** Issuance activity starts, the **Household** screen appears.

## Household Window

**Suffix/Individual** Inquiry Code WMS Message via OLTP  
NOIN22 F1441 CVB CLIENT RECORD FOR CLIENT NOT FOUND

**Control Information**  
District : 66 Center : Melrose Job Center Worker : ES900 Case Number : [ ]

**Present Address**  
Street Number Direction Name Type Apt # City  
2080 INone Concourse Ave 48 Bronx  
State: NY Zip Code: 104510000 Phone: - -

**Suffix Information**  Active  Applying  No FS IPV or Sanction Found  
SNAP File Date 02/18/2014 CA File Date 02/18/2014 SNAP Suffix [ ] SNAP Status AP SNAP #AP 1

Suff	Case Name	CA	MA	Notice	Hardship Status					
		Stat #	Stat #	Language						
1	Pooh, Vioana	SNCA	AP	1	AP	1	English	English	None	Probs

Next CA Recert date [ ] Last CA Recert date [ ] Last MA Recert date [ ]

**Case Member Information**

Suff Ln	CIN	Name	Relation	DOB	SSN	Val	Sex	Cltz/	HB	CA	MA	SNAP	AFIS/S	
1	1		Casehead				F		<input checked="" type="checkbox"/>	<input type="checkbox"/>	AP	AP	AP	

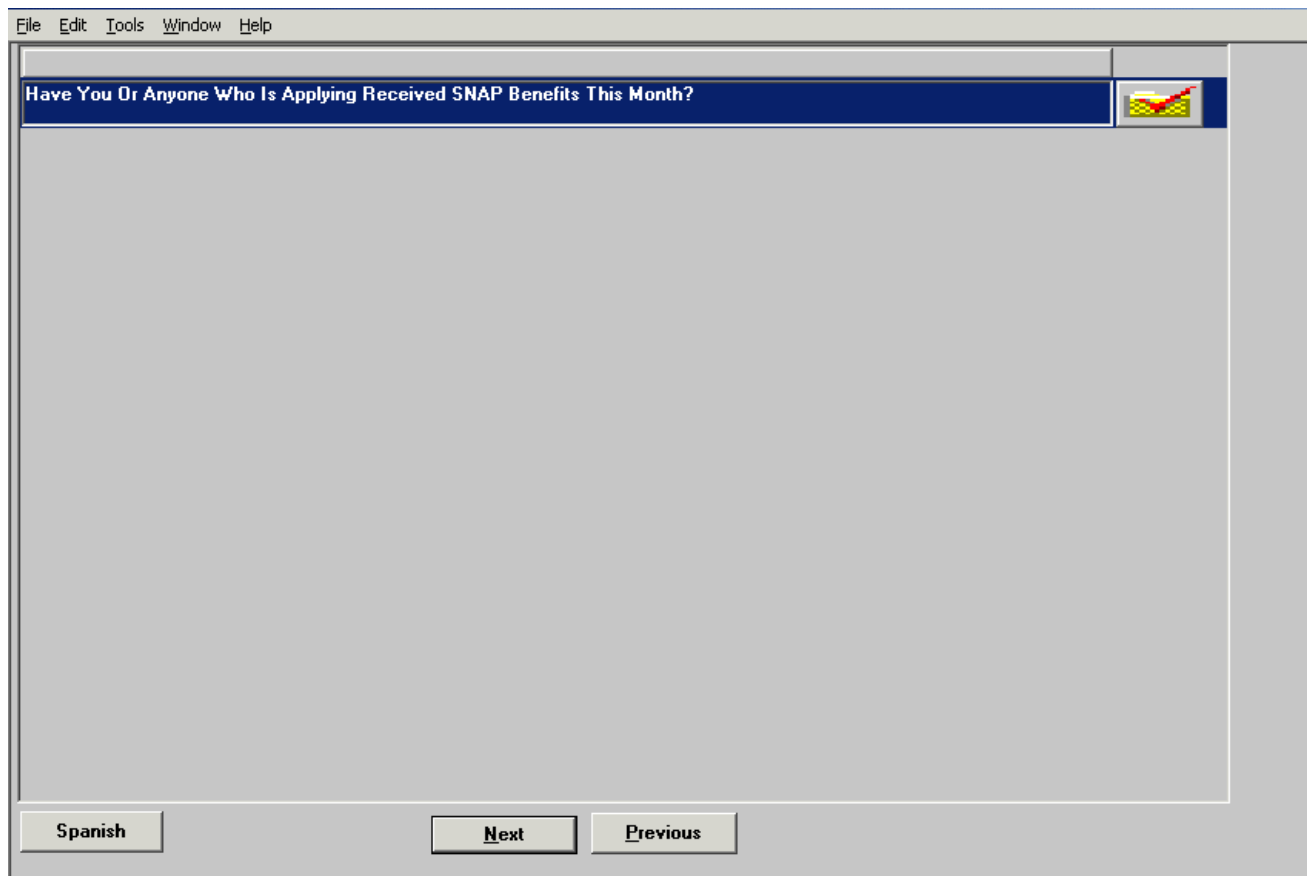
Next Previous

- Click **Next** and the **Expedited SNAP Questions** window appears.

### Expedited SNAP Questions Window

The **Expedited SNAP Questions** window displays the question “Have You or Anyone Who is Applying Received SNAP Benefits This Month?”

- Click the **Show** button and POS will search WMS to determine if a SNAP benefit has been issued for the month.



The answers entered in the **CA Application Interview** are prefilled in the IN/ESNAP Issuance activity.

## Attachment B - ESNAP Screening for CA Application Interview in POS

If the applicant did not receive SNAP benefits in the current month or received SNAP benefits but entered a domestic violence shelter during the current month, the following questions appear after the JOS/Worker clicks **OK** in the **Response** window for **Have You Or Anyone Who Is Applying Received SNAP Benefits This Month?**:

- “Has the SNAP household received Expedited SNAP benefits in the past?”
- “Has anyone who is applying for SNAP benefits previously had income from any source (such as employment, SSA, SSI, UIB or contribution) this month?”
- “ATTENTION TO THE INTERVIEWER: Based on the interview conducted is there any indication that the applicant needs any non-food related personal item necessary for health and personal care or a food-related immediate need grant?”

If the applicant received SNAP benefits in the current month and did not enter a domestic violence shelter during the current month, the only additional question that appears is:

- “ATTENTION TO THE INTERVIEWER: Based on the interview conducted is there any indication that the applicant needs any non-food related personal item necessary for health and personal care or a food-related immediate need grant?”
- Once the **Attention To The Interview** window is completed, click **Next** to continue:
- The **Immediate Needs** window appears after the **Expedited SNAP Questions** window to allow the JOS/Worker to evaluate the applicant’s eligibility for an Immediate Needs Grant (Special Grant Code **44**) when:
  - The interviewer indicates that there is a need for a food-related immediate need grant.
  - An applicant is ineligible for ESNAP but claims a No Food Emergency.
  - Otherwise, the **Checklist** window appears.



## Checklist Screen

Interview	External Clearance	
<input checked="" type="checkbox"/> CBIC Payee Status	<input type="checkbox"/> Building Clearance	
<input checked="" type="checkbox"/> Preview DSS3938	<input type="checkbox"/> DMV	
<input checked="" type="checkbox"/> ESNAP Supervisory Approval	<input type="checkbox"/> Board Of Education	
<input checked="" type="checkbox"/> IN ESNAP Eligibility	<input type="checkbox"/> WRS	
<input checked="" type="checkbox"/> ESNAP Decision	<input type="checkbox"/> UIB	
<input checked="" type="checkbox"/> Expedited SNAP Benefits	<input type="checkbox"/> Vital Records	
<input type="checkbox"/> Immediate Needs		
<input checked="" type="checkbox"/> Identity		
<input checked="" type="checkbox"/> Citizenship		
<input checked="" type="checkbox"/> Social Security Numbers		
<input checked="" type="checkbox"/> Relationship		
<input checked="" type="checkbox"/> Residency		

- Click **Next** and proceed to the **Eligibility Determination** window.

### Eligibility Determination Window

The **Decision, Financial Eligibility** tab of the **Eligibility Determination** window informs the JOS/Worker of the applicant's eligibility for ESNAP and Immediate Needs.

The Financial Eligibility status will be determined by the system as Eligible, Ineligible or Pending. An Eligibility Reason will also be provided to correspond with the Financial Eligibility status.

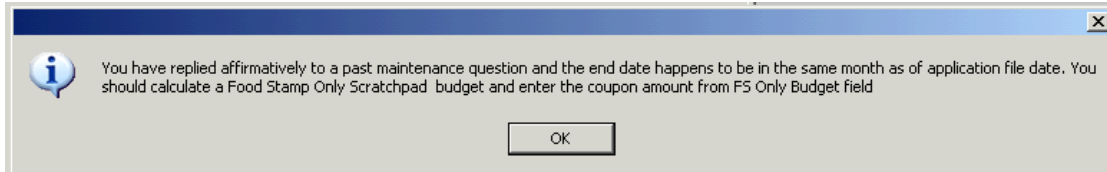
The screenshot displays a software window titled "Eligibility Determination" with a standard Windows-style toolbar at the top. The window is divided into three tabs: "Decision, Financial Eligibility" (which is selected), "Document Completeness EFS", and "Program Status".

Under the "Decision, Financial Eligibility" tab, there are two input fields: "Case No" and "Case Name". Below these, the "Expedited" section includes a "Food Stamps" dropdown menu and a "Coupon Amount from FS Only Budget" input field. The "Financial Eligibility" section contains a "Management Override - Reason" text area. The "Eligibility Reason" section features a large text area for input. The "Action to be Taken by Worker" section has two radio button options: "Full Month Grant (If reopening within one month of closing)" and "Prorated Grant (Cannot issue if amount is less than \$10)".

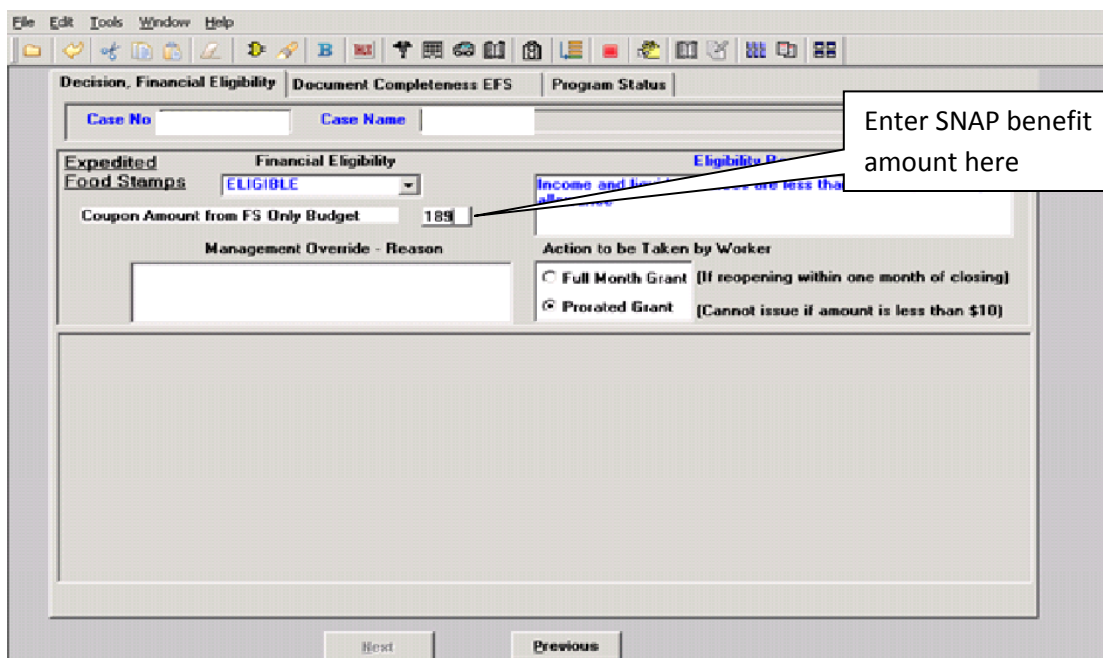
At the bottom of the window, there are two buttons: "Next" and "Previous".

### Past Maintenance Ending in the Current Month

- If past maintenance was reported and the end date was in the same month as the application file date, the following message appears:



- Click **OK** and open WMS using the **WMS plug** to calculate a SNAP only Scratchpad budget to determine the SNAP benefit amount.
- Enter the SNAP benefit amount from the SNAP only budget in the **Coupon Amount from FS Only Budget**.



## Eligibility Determination: Document Completeness section

The **Document Completeness** tab of the **Eligibility Determination** window allows the JOS/Worker to track the verification of eligibility factors and to record collateral contact made, if any.

The screenshot shows a software window titled "Document Completeness" with a menu bar (File, Edit, Tools, Window, Help) and a toolbar. The main content area is divided into several sections:

- Decision, Financial Eligibility** (selected tab)
- Document Completeness EFS** (selected tab)
- Program Status** (selected tab)
- EFS Verification Completeness**: A green bar with the word "COMPLETE" in white text.
- To view and note alternate verification, click on the 'Down' arrow of the scroll bar on the right.**
- Expedited Food Stamps Verification**: A section with a scroll bar on the right.
- Alternate Verification**: A section with a scroll bar on the right.
- Who**: A text input field.
- Eligibility Factor**: A text input field containing "RFI".
- Collateral Contact Attempted**: A dropdown menu.
- Action Taken**: A dropdown menu.
- Details**: A text input field.
- Immediate Needs Verification**: A section with a scroll bar on the right.
- No of People in PA Household**: A text input field containing "1".
- No of People Eligible for IN Grant**: A text input field.
- Alternate Verification**: A section with a scroll bar on the right.

At the bottom of the window are two buttons: "Next" and "Previous".

Two callout boxes are present:

- A box labeled "Document Completeness" pointing to the "Document Completeness EFS" tab.
- A box labeled "Alternative verification method" pointing to the "Alternate Verification" section.

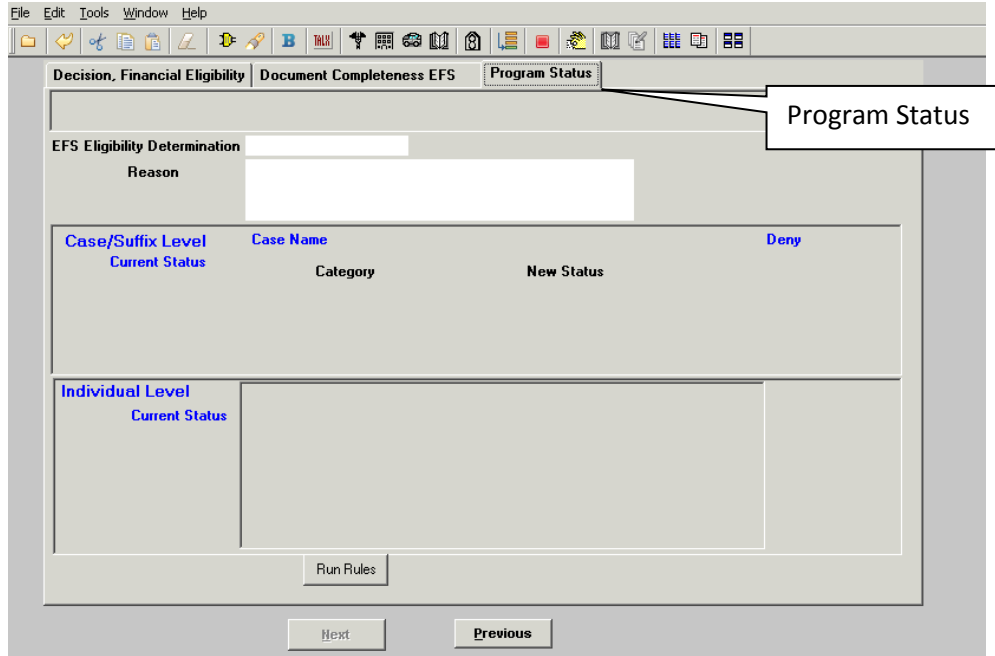
- Click **Document Completeness** and review the **EFS Verification Completeness** field.
- Click down-arrow for **Collateral Contact Attempted**, if applicable. For collateral contact attempted or alternate verification, the action taken must be recorded and a detailed comment must be entered in the **Details** comment box.

## Eligibility Determination: Program Status section

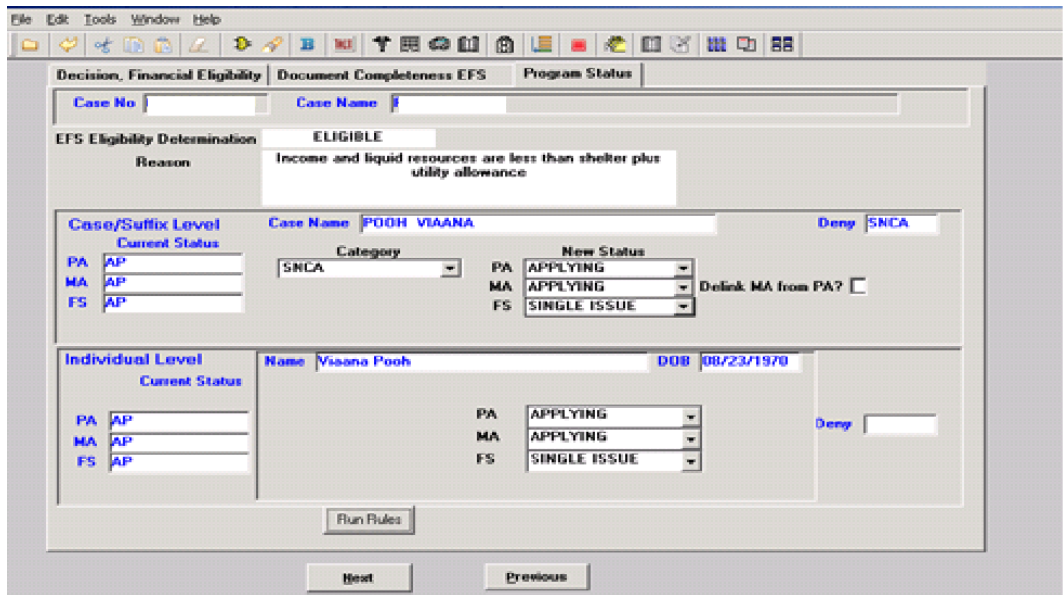
On the **Program Status** tab of the **Eligibility Determination** window (shown on following page):

- **Active** is prefilled for the SNAP status when the following conditions exist:
  - The applicant is eligible for ESNAP.
  - The identity, citizenship/alien status, residence, and Social Security number or application for Social Security number are fully documented and ready to scan (as indicated during the **SNAP Application Interview** activity on the **Individual Detail** window) for all individuals applying for SNAP on the case.
  - Income, resources and expenses are fully verified.
    - The following types of expenses will be considered for full verification determination:
    - Rent/mortgage/shelter, utilities, fuel or air conditioning, medical, child/dependent care and child support.
  - There are no pending RFI computer matches or all RFI matches are resolved.
  
- **Single Issue** is prefilled for the SNAP status when the following conditions exist:
  - The applicant is eligible for ESNAP. The identity, citizenship/alien status, residence, and Social Security number or application for Social Security number are fully documented and ready to scan (as indicated during the **SNAP Application Interview** activity on the **Individual Detail** window) for all individuals applying for SNAP on the case. Income, resources and expenses are fully verified.
  - There are pending RFI computer matches or the results of the computer matches have not been received.
  
- **Single Issue** is prefilled for the SNAP status when the applicant is eligible for ESNAP, identity of the casehead has been documented and ready to scan (as indicated during the **SNAP Application Interview** activity on the **Individual Detail** window), but one or more of the following eligibility factors has not been fully documented:
  - Identity of other SNAP household members
  - Citizenship/alien status
  - Residence
  - Social Security number (SSN) or application for SSN
  - Income
  - Resources
  - Expenses

### Eligibility Determination: Program Status section



- Click the **Program Status** tab, and click **Run Rules**.



POS will determine ESNAP eligibility and update the case and individual line status based on the information entered.

- Click **Next**, and the **Previewing Form DSS 3938** window will appear.
- ### Previewing Form DSS 3938 Window

## Attachment B - ESNAP Screening for CA Application Interview in POS

Version 18.1 - Paperless Office System - [Previewing Form D553938] 8:56:52 AM Wednesday, February 19, 2014

File Edit Tools Window Help

**FOOD STAMP APPLICATION EXPEDITED PROCESSING WORKSHEET**

Date Application Filed: 02/18/2014 Date of Screening: 02/18/2014

Date of Eligibility Interview: 02/18/2014

Qualified for expedited processing?  Yes  No

Expedited Food Stamp Benefit Eligibility:  ELIGIBLE  INELIGIBLE

Reason:  ELIGIBLE

ELIGIBLE (Applied on or before 15th of month; zero benefit due to proration)

ELIGIBLE (Applied after 15th of month; zero first month's benefit due to proration; full second month's benefit)

ELIGIBLE (Applied after 15th of month; prorated first month's benefit plus full second month's benefit)

HOUSEHOLD IS INELIGIBLE FOR THE PROGRAM DUE TO PROGRAM RULES (see comments.)

VERIFICATION OF IDENTITY NOT PROVIDED

HH DID NOT SUBMIT ALL REQUIRED NON-IDENTITY VERIFICATION

Other Denial Reason/Comments

Is the household already receiving Food Stamp Benefits this month?  Yes  No

Next Previous

- Review the **LDSS-3938**, click **Next** to continue.

### Screen Flow: Ineligible for ESNAP Benefits and Immediate Need Grant

The SNAP status remains in Applying (**AP**) status when the applicant is not eligible for ESNAP or the household is qualified for ESNAP processing but is ineligible to receive SNAP benefits.

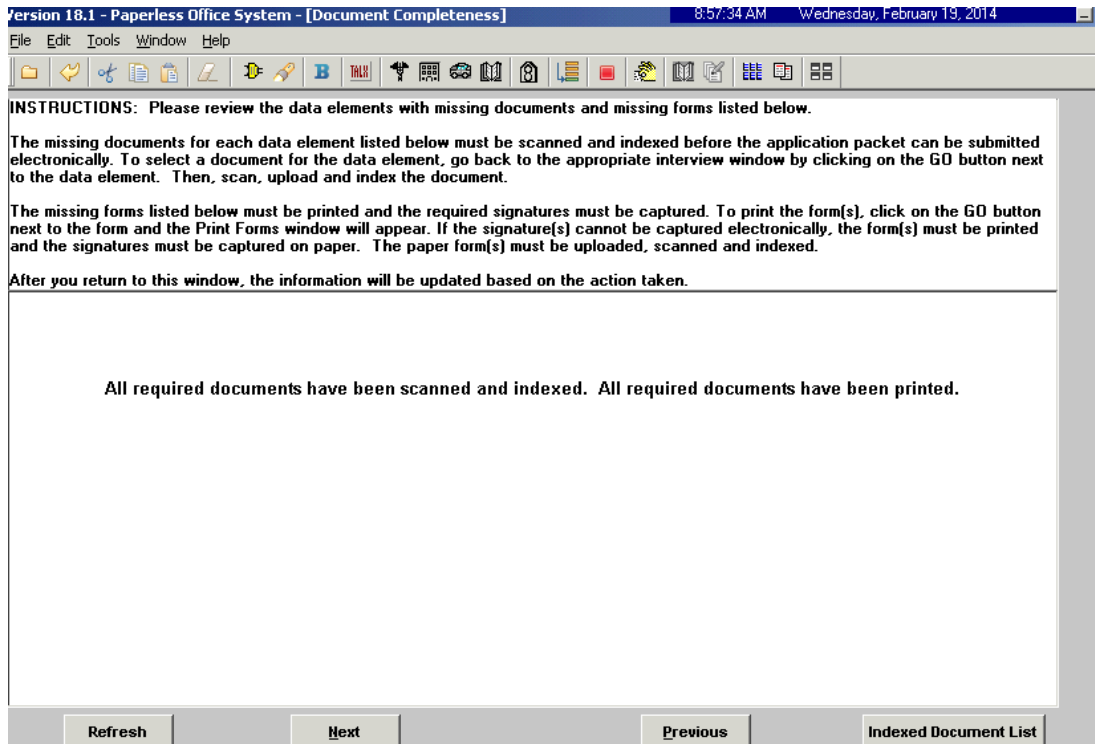
The CA status remains in **AP** status when the applicant is not eligible for an Immediate Needs Grant.

- The following windows will appear for cases that are ineligible for ESNAP benefits and ineligible for an Immediate Needs Grant:
  - The **Case Number Re-Use** window appears. Complete the case number reuse and click **Next** to proceed.
  - The **Form Data Entry** window appears. Complete any required data entry as needed. Click **Next** to proceed.
  - The **Notice Data Entry** window appears. Complete any required data entry as needed. Click **Next** to proceed.
  - The **Notice Selection** window appears for Selective Case Review (SCR) centers. Select forms that should be mailed by MIS or printed in the Notice Print Queue. Click **Next** to continue.
  - The **Print Forms** window appears. Print any required forms as needed. Click **Next** to proceed.
  - The **Approval Status** window appears. Click **Next** and **Complete Activity** to send the case to the Supervisor.

### Screen Flow After ESNAP Summary Window: Eligible for ESNAP Benefit or Immediate Need Grant

- Review the **ESNAP Summary** and click **Next** to proceed, and the following windows will appear:
  - CIN Reuse
  - Case Number Reuse
  - Existing Budgets
  - WMS Budget Selection
  - TAD
  - Grant Data Entry
  - CBIC Payee Status
  - Form Data Entry
  - Notice Data Entry
  - Print Forms
  - Approval Status

### Document Completeness Window



- Review the documentation submitted and ensure that all submitted documents have been scanned and indexed. Click **Next** and the **CIN Re-use** window will appear.



## Attachment B - ESNAP Screening for CA Application Interview in POS

### CIN Re-use Window

Registry #	Application Date	Unit/Worker	Case #	Case Name	Suffix	Case Type	Request New Clearance												
000001086791	02/18/14	ES900			1	SRCA													

Ln	Suf	First Name	MI	Last Name	Sex	SSN	DOB	AFIS Ex. Ind	CIN	CNTR	Case/Reg #
01	1				F					040	

The selected CIN match is indicated by the arrow. You may highlight the suggested CIN match or chose another appropriate CIN from the clearance.

Do you wish to use a new CIN because there is no appropriate CIN match in the clearance? Yes  No

- Complete **CIN** and **Case Number Re-use** windows, and POS navigates to case processing and the **Existing Budgets** window will appear.

### Existing Budgets Window

Click on the 'New Budget' button to calculate a new budget.  Manual Budget Required

Case No:

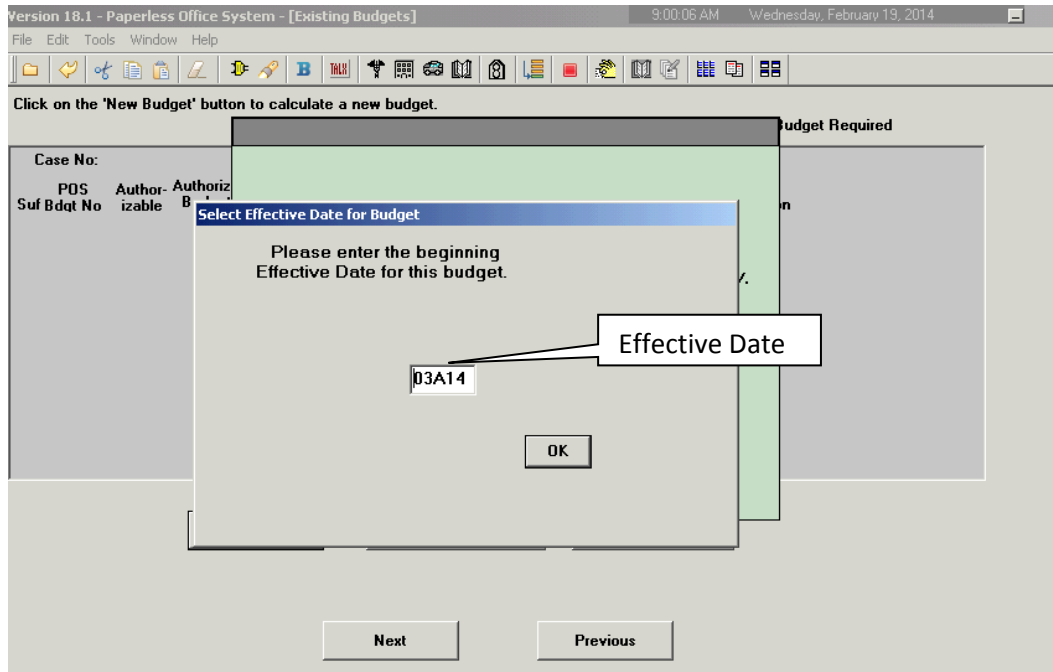
POS Suf Bdqt No	Author-izable	Authorized Budget?	WMS Bdat No	Type	Save Date	Effective Dates	Description
-----------------	---------------	--------------------	-------------	------	-----------	-----------------	-------------

New Budget View Selected Budget View Budget Result

Next Previous

- Click **New Budget**.

## Attachment B - ESNAP Screening for CA Application Interview in POS



- Enter the effective date of the budget, press **Next** and the **Household/Suffix Financial Needs** window will appear.

### Household/Suffix Financial Needs Window

Version 18.1 - Paperless Office System - [Household / Suffix Financial Needs] 9:00:59 AM Wednesday, February 19, 2014

Center Worker Name Case No Suffix Client Name Effective Dates Budget Type

040 [Redacted] 1 [Redacted] 03A14- [Redacted]

Shelter Type WMS Budget POS Budget

Rented Private Home

Amount Period Water Amount Period FR No.LRR Proration Child Heap HAI

\$1,150.00 Monthly [Redacted] [Redacted] [Redacted] [Redacted] [Redacted]

Utilities Allowances Indicator Type

FSUA [Redacted]

FSUT [Redacted]

Food Stamp Program

Suffix Status No. in FS Hh FS Routing Catg. Eligibility

1 SINGLE ISSUE [Redacted] [Redacted]

Public Assistance

Suffix Type Status No. in PA Fuel (absent PA Shelter Total Additional Needs

1 SNCA APPLYING 1 [Redacted] [Redacted] \$215 \$0.00

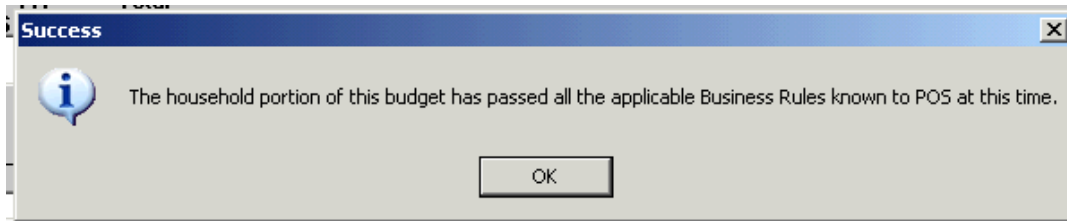
Restrictions: Suffix Type What Sent to:

1 Direct Involuntary (PA L) Shelter [Redacted]

Income or Results Existing Budgets

- Review the information on the window and click **Income or Results**.

## Attachment B - ESNAP Screening for CA Application Interview in POS



- Click **OK**, and the **Individual Income / Needs** window will appear.

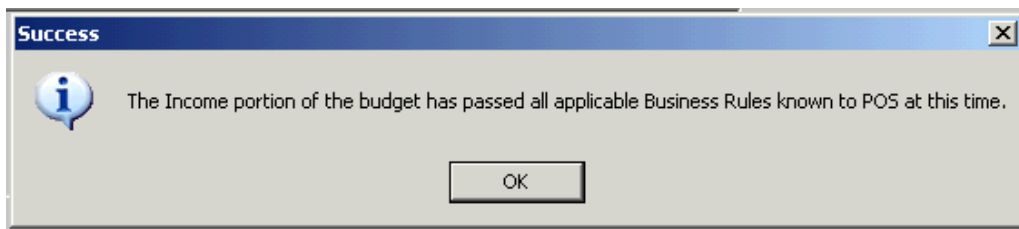
### Individual Income / Needs Window

The screenshot shows the "Individual Income / Needs" window in the "Paperless Office System". The title bar indicates the version is 10.1 and the date is Wednesday, February 13, 2014, at 9:02:14 AM. The window contains several sections:

- Case Information:** Case No & Suffix, Line No., Bdgt No., Client Name, and Hours Worked.
- Employment Status:** PA Status (APPLYING), FS Status (SINGLE ISSUE), Date of Birth, Aged / Disabled, Involvement, and CIN (\$209007B).
- Income Table:** A table with columns: Line, Source, Frequency, Gross, Program, Usage, Inc. Exemption, PA, and FS. It contains three rows, each with a line number of 1.
- Deductions and Medical Bills Table:** A table with columns: Line, Type, and Amount. It contains two rows, each with a line number of 1.
- Daycare Needs Table:** A table with columns: Line, Type, Amount, Date of Birth, and Disabled?. It contains four rows, each with a line number of 1 and a Date of Birth of 00/00/0000.

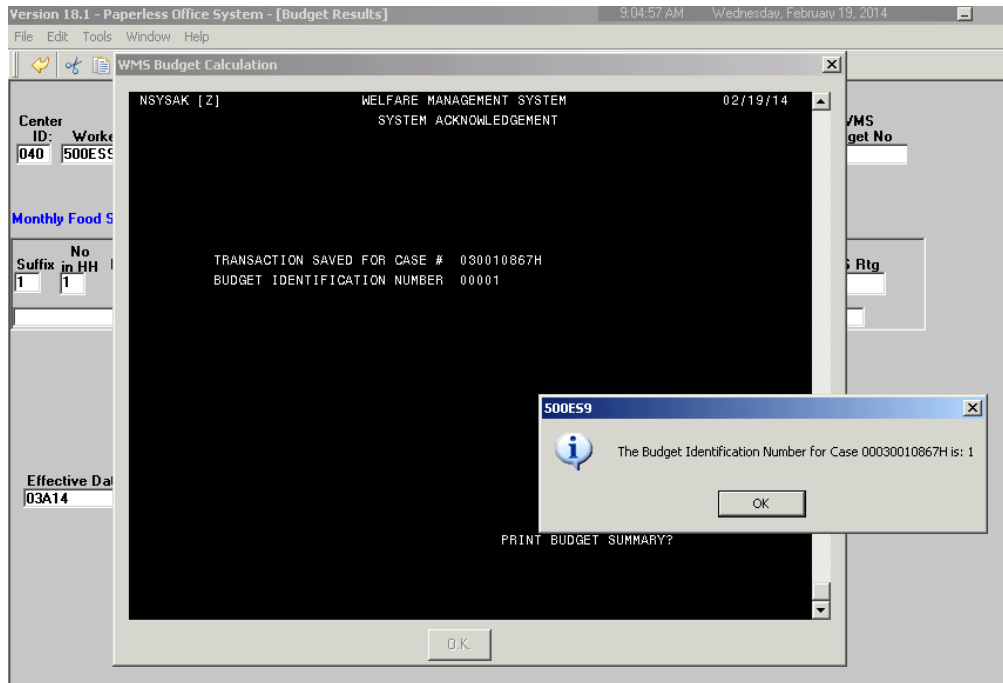
At the bottom of the window are three buttons: "Calculate Budget", "Household Needs", and "Existing Budgets".

- Review the information on the window, click **Calculate Budget** to launch WMS.



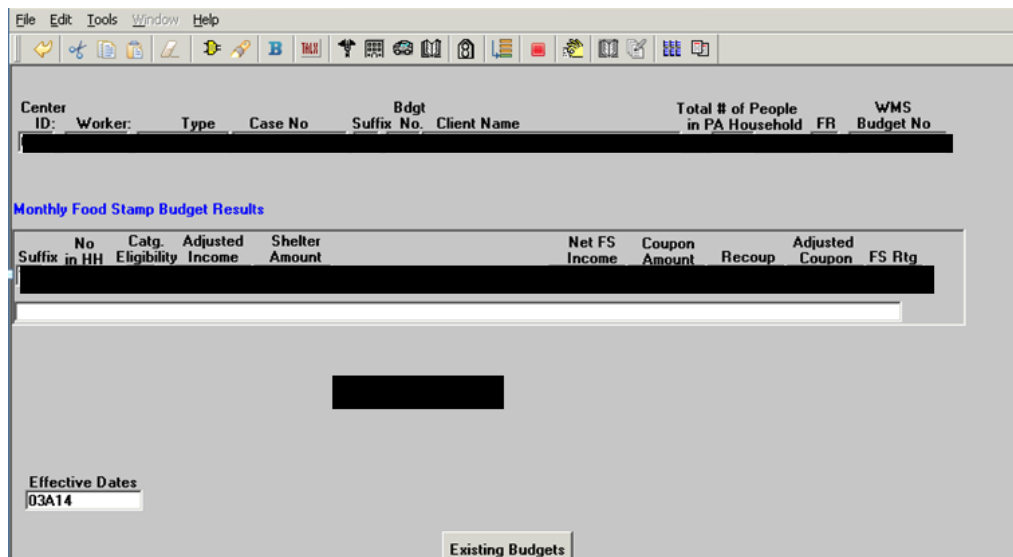
- The **WMS Budget Calculation** window will appear.

### WMS Budget Calculation Window



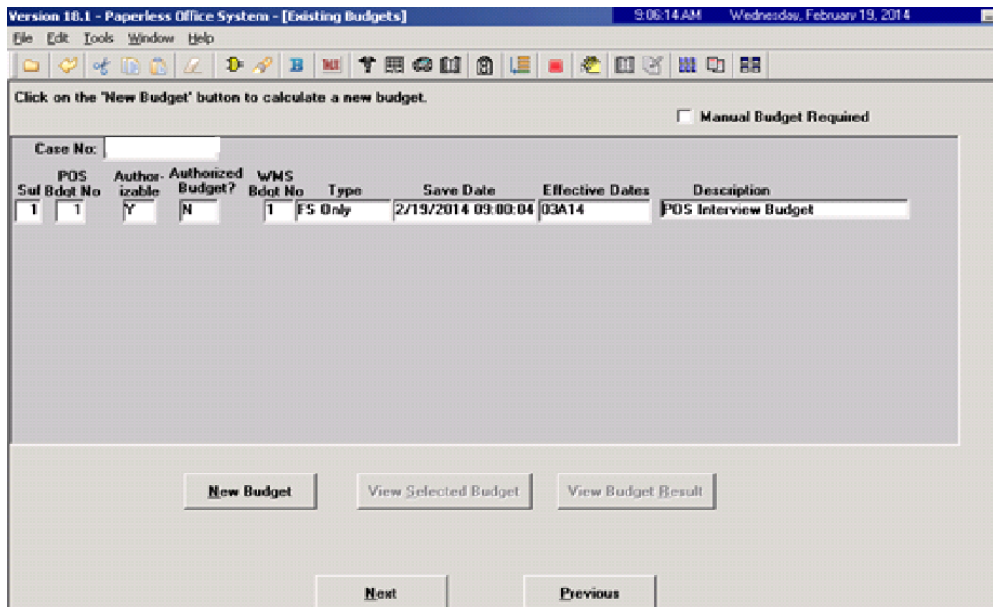
POS inputs the budget entries into WMS.

- Save the budget in WMS.
- The budget number for the case is displayed.
- Click **OK** and the **Budget Results** window will appear.

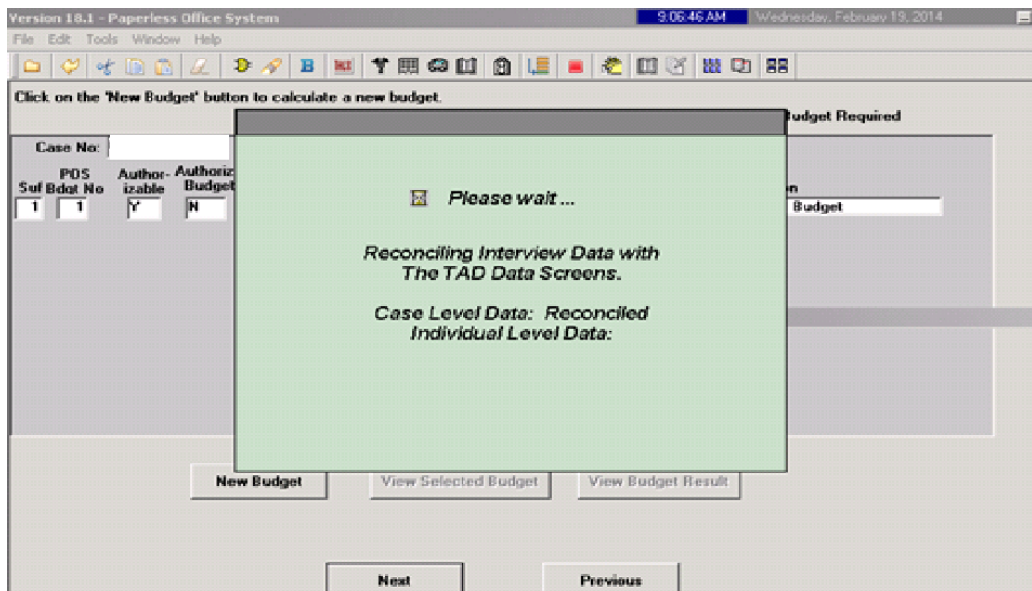


- Review the budget results on the window, and click the **Existing Budgets** button.

### Existing Budgets Window

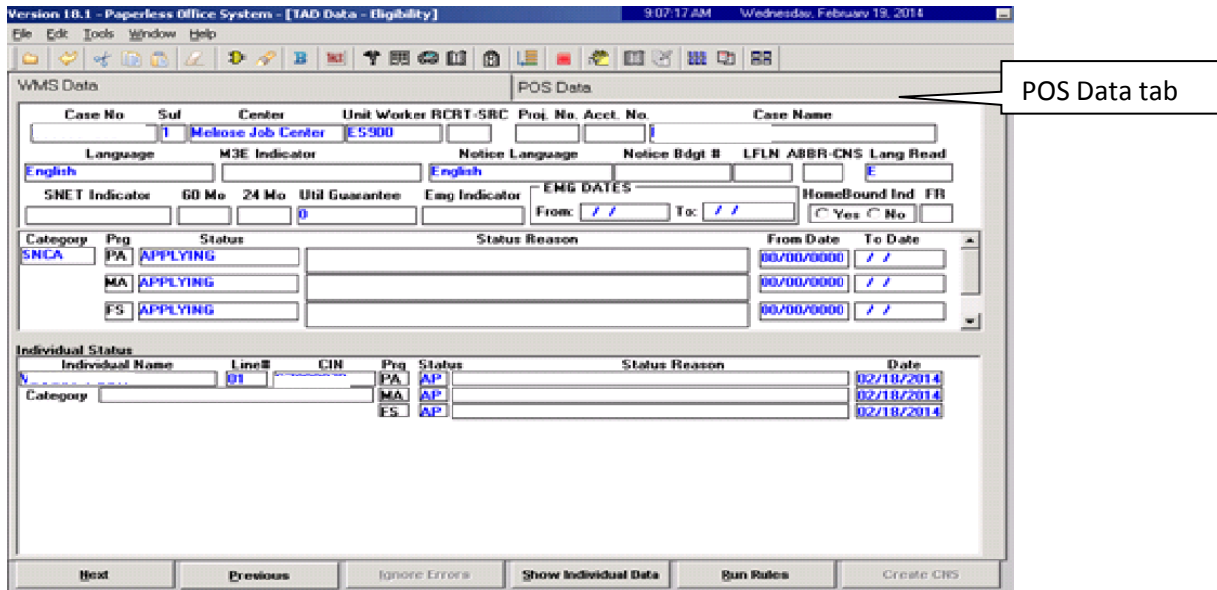


- Click **Next** and the **TAD Data Eligibility** window will appear.
- POS will transfer information from the interview onto the **POS TAD**.



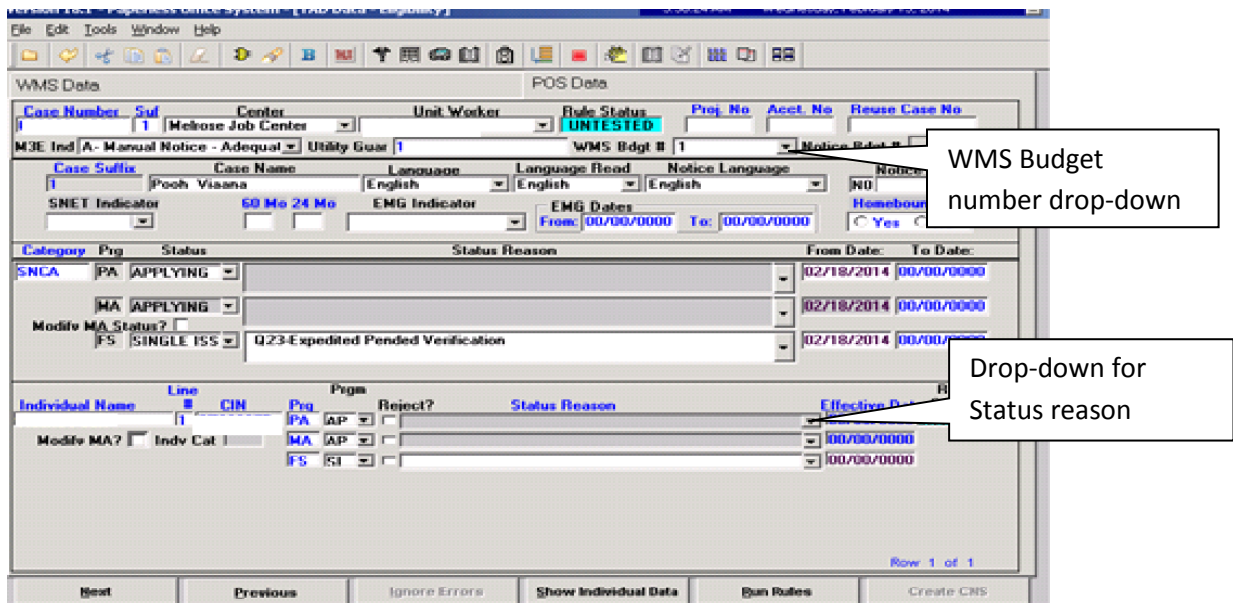
# Attachment B - ESNAP Screening for CA Application Interview in POS

## TAD Data Eligibility Window



- Click **Next** to proceed.

## TAD – POS Data



- Ensure that all required TAD fields are completed and click **Show Individual Data**.

## TAD – Individual Data

Version 18.1 - Paperless Office System - [TAD Data - Eligibility] 10:03:17 AM Wednesday, February 19, 2014

File Edit Tools Window Help

WMS Data POS Data

First Name Last Name Middle Name Sex Marital Status Buy-In Indicator

Hispanic/Latino Asian Native Hawaiian/Other Pacific Islander

American Indian/Alaska Native Black or African American White

Reuse CIN Relation to Casehead DGC BVI Birth Date CHT TPHI AD-EX

STATE/FEDERAL MA Coverage SSN Student ID

Line No CIN Citizen/Alien Status Alien Type Alien No Date of Status Date Entered Country

Emp Code 20 - Mandatory Employable OTM Highest Degree Earned Code Individual Cat Code

No Deprivation Waivers Exemption Indicator

Save Changes

Next Previous Ignore Errors Return to Case level Dat Run Rules Create CHS

- Ensure that all required TAD fields are completed and click **Save Changes**.

Version 18.1 - Paperless Office System - [TAD Data - Eligibility] 10:05:25 AM Wednesday, February 19, 2014

File Edit Tools Window Help

WMS Data POS Data

First Name Last Name Middle Name Sex Marital Status Buy-In Indicator

Hispanic/Latino Asian Native Hawaiian/Other Pacific Islander

American Indian/Alaska Native Black or African American White

Reuse CIN Relation to Casehead DGC BVI Birth Date CHT TPHI AD-EX

STATE/FEDERAL MA Coverage SSN Student ID

Line No CIN Citizen/Alien Status Alien Type Alien No Date of Status Date Entered Country

Emp Code 20 - Mandatory Employable OTM Highest Degree Earned Code Individual Cat Code

No Deprivation Waivers Exemption Indicator

Save Changes

Next Previous Ignore Errors Return to Case level Dat Run Rules Create CHS

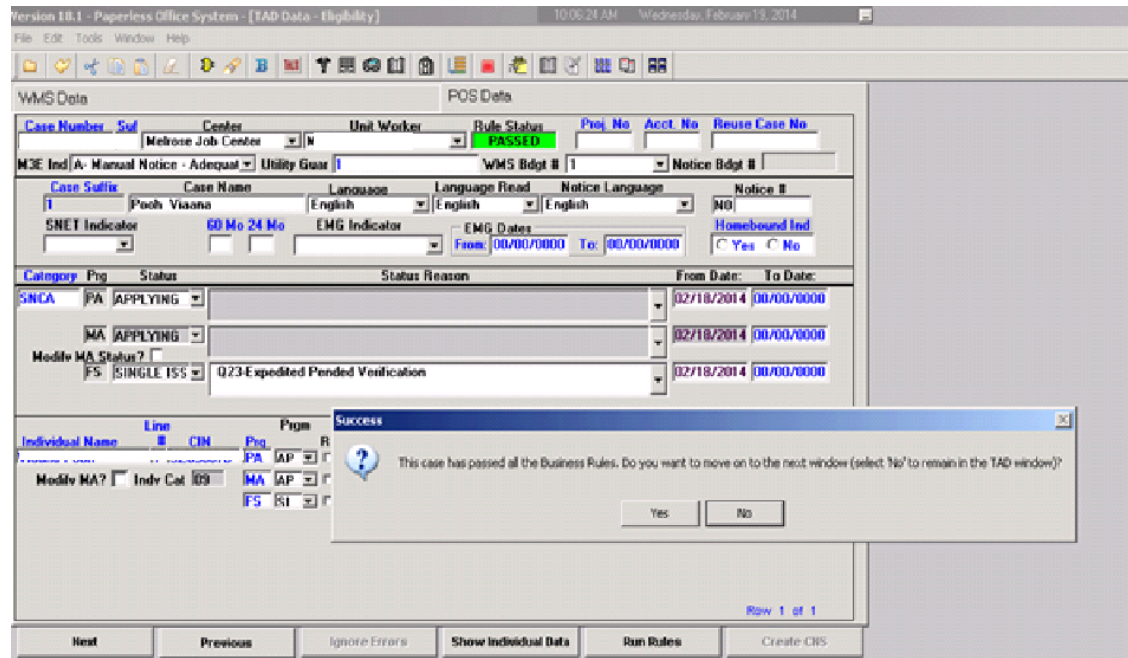
**Question**

Do You Wish to Save Changes Made to the Individual Screen

Yes No Cancel

- Click **Yes** run the business rules.

## TAD – Business Rules



- Click **Yes** to proceed and the **CBIC Payee Status** window will appear, or
- Click **No** if additional changes are needed for the TAD.

### CBIC Payee Status Window

The **CBIC Payee Status** window only appears if the applicant is eligible for an immediate needs grant and/or ESNAP benefits and the JOS/Worker completed the **Grants Data Entry** window to issue a benefit. The following information will be displayed:

- Re-Use Case Number
- Suffix
- Category
- FS Status of Re-Use Case Number
- Casehead/Payee Name
- Relationship Code
- Client Identification Number (CIN)



## CBIC Payee Status Window

Version 10.1 - Paperless Office System - [CBIC Payee Status Window] 10:18:39 AM Wednesday, February 19, 2014

File Edit Tools Window Help

Re-use Case Number: [ ] Suffix: 1 Category: SNCA FS Status: SINGLE ISSUE

Casehead/Payee name: [ ] Relationship Code: 01

Casehead/Payee CIN: [ ] CBIC Payee CIN: [ ]

Is the "Casehead/Payee CIN" listed above the same as the "CBIC Payee Cin"?  Yes  No

If Open TI is down, go to WMS Screen WIDCCH (Case Number PA/FS Payee Inquiry) using the case number selected in the Case Number Re-Use window or the application registration number if no case number was reused and retrieve the CBIC Payee CIN and answer the question above.

MESSAGE

The SDI Grant should pass the WMS SDI Payee edit.

Next Previous

## Manual CBIC Review

In the event the CBIC Look-up fails in WMS, the JOS/Worker is instructed (in the middle of the **CBIC Payee Status** window) to go to the **Case # PA/FS Payee Inquiry window (WIDCCH)** in WMS to determine if the CIN of the payee shown in WMS in the **PA/FS Payee CIN** field is identical to the casehead or payee's CIN displayed on the **POS Case Number Re-Use** window.

To view the **WMS CBIC Inquiry** windows in order to determine the last payee:

- Access WMS by clicking the yellow plug at the top of the POS window or minimize POS and double-click the WMS icon located on the desktop of the personal computer.
- Log on to WMS using your User ID and Password.
- Enter **09** (Common Benefit ID Card Subsystem) in the **Selection #** field on the WMS Host System Menu (**NWMM00**).
- Enter **09** (Case # PA/FS Payee Inquiry [**WIDCCH**]) for case number inquiry or **07** (Individual PA/FS Payee Inquiry [**WIDICH**]) for CIN inquiry in the Function field on the WMS ID Card Menu (**WIDMNU**).
- After comparing the CIN in WMS with the CIN on the **CBIC Payee Status** window, exit WMS and return to POS. On the **CBIC Payee Status** window respond **Yes** or **No** to the question "Is the Payee CIN listed under 'Casehead/Payee CIN' the same as the Case Head or Payee CIN listed on the 'Reuse' case number window?"
  - Click **Yes** and the following message is displayed: "The SDI SNAP grant should pass the WMS SDI payee edit." Click the **OK** button to continue.

## Attachment B - ESNAP Screening for CA Application Interview in POS

- Click **No** and the following message is displayed: “You must prepare a CBIC Update form to change the Payee in CBIC to match the Casehead/Payee on the case number being used.”
- If no response is entered, the JOS/Worker will be unable to proceed. The system displays the message “You must answer the question ‘Is the Payee CIN listed under ‘CBIC Payee’ the same as the Casehead or Payee CIN listed on the ‘Reuse’ case number window?’”

Once the **Yes** or **No** response is selected, click the **Next** button to continue.

- Complete the **CBIC Payee Status** window, and click **Next** to proceed, and the **Single Issuance Benefit** window will appear.

### Single Issuance Benefit Screen

Case Name	Case Number	Reuse Case Number	Suffix	Date Form Prepared	IS Center	Category
			1	02/19/2014	040	SNCA

Benefit Type  
 PA  
 FS

Next Previous

Nobody in family is eligible for Immediate Needs grant now!

- Click the **FS** radio button and the **FS Single Issuance Benefit** section will appear.

### FS Single Issuance Benefit

On the **Grants Data Entry** window, the **Issuance Code** field is prefilled with the following code:

- **52** (Expedited SNAP Benefits – Fully Verified) for applicants eligible for ESNAP that provide all documents to verify identity, provided full verification of SNAP eligibility, and have no pending RFI.
- **54** (Expedited SNAP Benefits – Not Verified) for applicants eligible for ESNAP that provide verification of casehead identity, but do not provide full verification of SNAP eligibility or have pending RFI.

The screenshot shows a software window titled "Grants Data Entry" with a menu bar (File, Edit, Tools, Window, Help) and a toolbar. The main area contains a form with the following fields:

- Case Name: [Empty]
- Case Number: [Empty]
- Reuse Case Number: [Empty]
- Suffix: 1
- Date Form Prepared: 02/19/2014
- IS Center: 040
- Category: SNCA
- Benefit Type:  PA,  FS

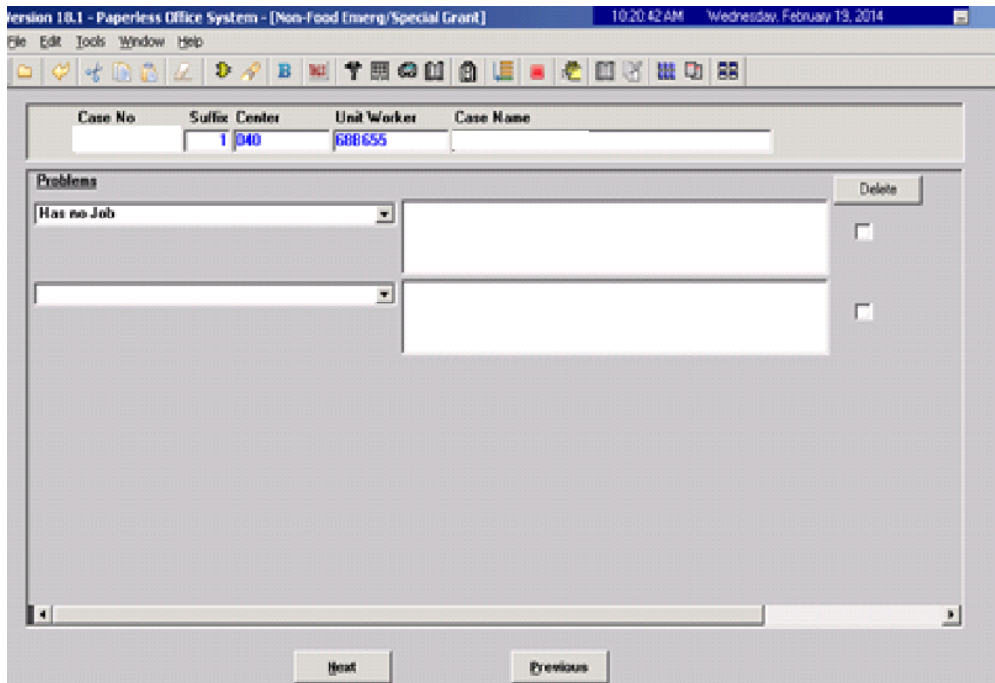
Below these fields is a table with the following columns: Issuance Code, Amount, From, To, Back-Up Grant, Check/CD#, Routing Location, Replaces Benefit, Authorization Number, and Payee. The table contains two rows of data:

Issuance Code	Amount	From	To	Back-Up Grant	Check/CD#	Routing Location	Replaces Benefit	Authorization Number	Payee
1 Code 54 - Expedited SNAP Benefit	\$91	02/18/2014	02/28/2014						
2	\$189	00/00/0000	00/00/0000						

Below the table, the Total Amount is displayed as \$270. At the bottom of the window, there are "Next" and "Previous" buttons.

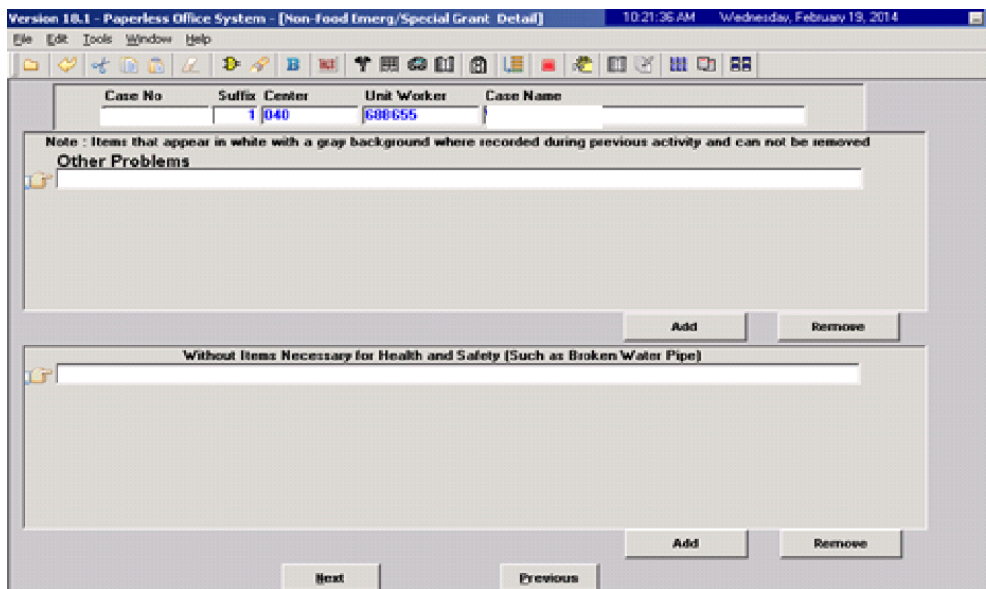
- Review the information on the window, click **Next** and the **Non Food Emerg/Special Grant** window will appear.

### Non-Food Emergency/Special Grant Window



- Click **Next** to proceed, and the **Non food Emerg/Special Grant Detail** window will appear.

### Non-Food Emergency/Special Grant Detail Window



- Review the information on the window and click **Next** to proceed, and the **Form Data Entry** window will appear.

## Form Data Entry Window

If a CBIC payee updated is required, when the **Forms** window appears, click **Yes** in response to the item “Request for Identification Card/Temporary Medicaid Authorization/Update Existing CBIC” (**W-607A**), if necessary.

	Yes	No
Social Security Administration - Consent for Release of Information (Form W515R)	<input checked="" type="radio"/>	<input type="radio"/>
Safety Net Assistance (SNCA) Application (LDSS-4776)	<input type="radio"/>	<input type="radio"/>
Request for Birth or Death Verification from Agencies Outside New York City (Form W680)	<input type="radio"/>	<input type="radio"/>
Request for Identification Card/Temporary Medicaid Authorization (Form W607A)	<input checked="" type="radio"/>	<input type="radio"/>
School Verification Letter (Form W-700E)	<input type="radio"/>	<input type="radio"/>
Request for Contact on a SNAP Application(Form DSS4753)	<input type="radio"/>	<input type="radio"/>
Request for Contact on a SNAP Application (Form W-119)	<input type="radio"/>	<input type="radio"/>
Systematic Alien Verification for Entitlement (SAVE) Referral (Form W-515X)	<input type="radio"/>	<input type="radio"/>
Documentation Requirements (Form W-113K)	<input type="radio"/>	<input type="radio"/>
RAU Case Documentation Transmittal(Form W153P)	<input type="radio"/>	<input type="radio"/>
Notice of SNAP Recertification Appointment (Form W-129RR)	<input type="radio"/>	<input type="radio"/>
FIA School/Training Enrollment Letter (Form W-700D)	<input type="radio"/>	<input type="radio"/>
Family Care Assessment (Form W-582A)	<input type="radio"/>	<input type="radio"/>
Declaration of Application for a Social Security Number (Form EXP-83H)	<input type="radio"/>	<input type="radio"/>

Spanish      Next      Previous

- Click the **Yes** for any required forms, then complete the forms.
  - If documentation is required, complete the **Data Entry** window for “Documentation Requirements (**Form W-113K**)” to indicate the due date.
  - If a CBIC update is required, complete the data entry window for “Request for Identification Card/Temporary Medicaid Authorization” (**Form W-607A**).
- Click **Next** to proceed and the **Notice Data Entry** window will appear.

## Attachment B - ESNAP Screening for CA Application Interview in POS

### Notice Data Entry Window

	Yes	No
Notice of New Worker Assigned (Form W102)	<input checked="" type="radio"/>	<input type="radio"/>
Notice to Report to Center (Form M-3g)	<input type="radio"/>	<input type="radio"/>
Notification to Utility Company (Form M858V)	<input type="radio"/>	<input type="radio"/>
Referral/Information Letter (Form W-34A)	<input type="radio"/>	<input type="radio"/>
SNAP Recertification Notice for Center F61 (Form W-140VV)	<input type="radio"/>	<input type="radio"/>
Notice of Decision on Assistance to Meet an Immediate Need or Special Allowance (Form W-145HH)	<input type="radio"/>	<input type="radio"/>
Fair Hearing Compliance Statement (Form W186C)	<input type="radio"/>	<input type="radio"/>
Fair Hearing Compliance Request (Form W186D)	<input type="radio"/>	<input type="radio"/>
Notification of Rent Payment Responsibility (Form W897P)	<input type="radio"/>	<input type="radio"/>
Notice of Recoupment of Advance Payment (Form W-637B)	<input type="radio"/>	<input type="radio"/>
Notification of Rent Payment Responsibility (RPR) Residents CSRD Hotels/Family Emergency Apartments (Form W897P-EPU)	<input type="radio"/>	<input type="radio"/>
Notice of Special Grant (Form W636)	<input type="radio"/>	<input type="radio"/>

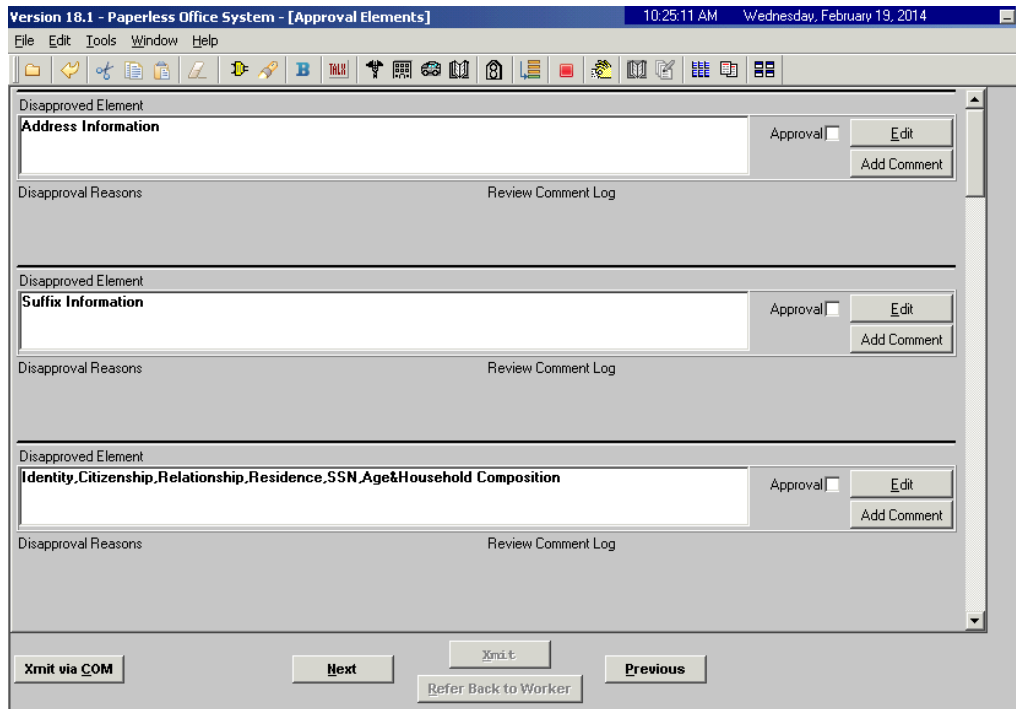
- Click the **Yes** radial button for each notice that needs to be completed. Complete the notice and click **Next** and the **Print Forms** window will appear.

### Print Forms Window

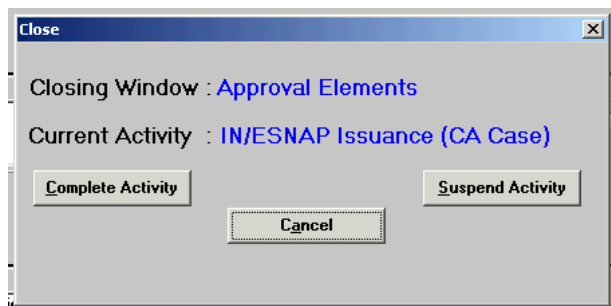
Form No.	Form Description	Copies	Forms
DSS2474	SSI Referral and Certification of Contact		e-form
DSS3573	PA-Recoupment		e-form
DSS3938	Food Stamp Application Expedited Processing Summary Sheet		e-form
DSS4198	Third Party Data Sheet		e-form
DSS4279	Notice of Responsibilities and Rights for Support		e-form
DSS4529	Agreement to Repay Any Safety Net Assistance Overpayments Still Owed After Case Is Closed		e-form
DSS4530	Assignment of Wages, Salary, Commissions or other Compensation for Services		e-form
DSS4571	Alcohol/Substance Abuse Screening Instrument		e-form
DSS4733	DFR Legal Residence Statement		e-form
DSS4753	Food Stamps - Request for Contact/Missed Interview		e-form
DSS4776	Safety Net Assistance (SNCA) Application (LDSS-4776)		e-form
EXP_76R	Documentation Receipt		e-form
EXP83H	Declaration of Application for a Social Security Number		e-form
FIA1021	Notice of Able-Bodied Adult Without Dependents (ABAWD) Status		e-form
FIA1021A	Notice of Need to Reestablish Able-Bodied Adult Without Dependents (ABAWD) Eligibility		e-form
FIA1021B	Declaration of Job Search Activities		e-form
FIA1102	FIA-1102 Scanning and Indexing Internal Paper Authorization Documents		e-form
FIA1104	Notice of Determination Regarding Your Request for a Utility Grant		e-form

- Select all forms that require printing and click **Print**.
- Click **Next** to proceed after forms have printed and the **Approval Elements** window will appear.

## Approval Elements Window



- Click **Next**, and the **Close** window will appear.



- Click **Complete Activity** to submit to the Supervisor for approval.
- The **Approval Assignment** window appears.

### Approval Assignment Window

- Select the Supervisor, enter a detailed case comment and click **OK** to submit for approval.

The screenshot shows the 'Approval Assignment' window with the following components:

- Selected Case:** A group box containing fields for 'No', 'Case Name', 'CIN', 'Suf', 'Caseload', 'Casehead', and 'SSN'. The 'No' and 'Caseload' fields contain redacted black text.
- Refer Case To:** A section with a 'Search Name:' text box and a table below it. The table has columns for 'Title', 'Unit', 'Last Name', 'First Name', 'U/W', and 'Phone Number'. The table body is redacted with black text.
- Enter Comments If Any:** A large text area for entering comments, currently empty.
- Activity Includes Ready SI Grants:** A dropdown menu currently set to 'No'.
- Next Level:** A text box containing redacted black text.
- Buttons:** 'Cancel' and 'OK' buttons are located at the bottom right of the window.

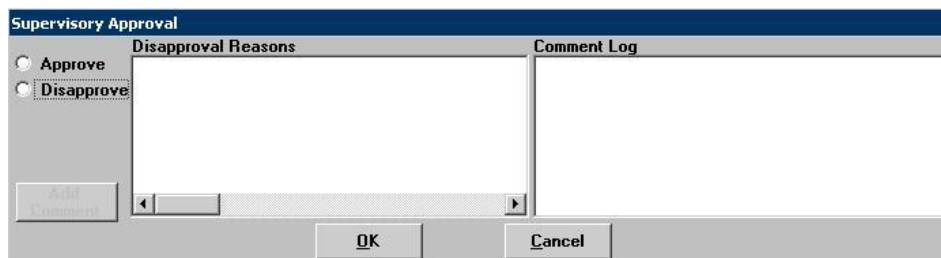
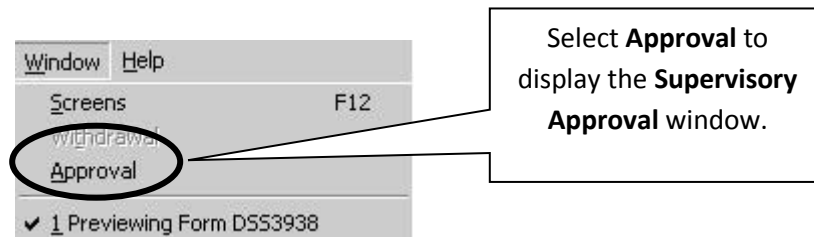


## Supervisor

To complete the processing for the same-day issuance of ESNAP through POS, the Supervisor must approve the following windows in the **Approve IN/ESNAP** activity (by placing a check mark in the **Approval** box for each window):

- **LDSS-2921 Signature**
- **IN/ESNAP Eligibility**
- **CIN Re-Use**
- **Case Number Re-Use**
- **TAD Data**
- **Grants Data Entry**
- **Previewing Form LDSS-3938**
- **ESNAP Decision Form**

The following windows highlight the Supervisory Approval process. All of the windows in this process are not shown, but the critical windows and those with changes are highlighted below.



The **Supervisory Approval** window for the **LDSS-2921** signature contains an Override option. The Supervisor can approve, disapprove or override the signature capture activity.

## Attachment B - ESNAP Screening for CA Application Interview in POS

The override may be used if the signature capture devices (or signature pads) have malfunctioned and the JOS/Worker has completed the following steps:

- The **LDSS-2921** form was printed.
- The applicant signed the paper form.
- The form was scanned and indexed into the electronic case record.

The following windows will not appear for applicants that are ineligible for ESNAP or cannot receive SNAP benefits under the expedited process:

- **CIN Re-Use**
- **Budget**
- **TAD**
- **CBIC Payee**
- **Grant Data Entry**

After the **LDSS-3938** window is approved, the next window to appear is the **ESNAP Decision Form** window.

The Notice of Denial of Expedited Food Stamp Service or Inability to Issue Food Stamp Benefits (**M-40k**) is also printed if the applicant is eligible for ESNAP benefits but benefits cannot be issued at this time because his/her identity cannot be verified.

If the household is ineligible for ESNAP, after the Supervisor reviews and approves the **LDSS-3938** window and the **ESNAP Decision Form** window, the **M-40K** will print.

**Note:** If the applicant is eligible for an Immediate Needs grant, the Supervisor must approve the grant within the **IN/ESNAP Issuance** activity per current procedure.

- The Supervisor must approve the **ESNAP Decision Form** window and click the **Next** button.

If the household is eligible for SNAP benefits, the **Previewing Form LDSS-3938** window will appear after the **Grants Data Entry** window.

The **ESNAP Decision Form** window will enable the Supervisor to preview the Action Taken on Your Food Stamp Benefits Case (NYC) form (**LDSS-3152 NYC**) when a CNS notice is not used for the case, approve the window or enter comments on what needs correcting. When approved (i.e., check mark entered in the "Approve" box), the LDSS-3152 NYC will print, if a CNS notice will not be used.

## Attachment B - ESNAP Screening for CA Application Interview in POS

The last window in the Approve **IN/ESNAP Issuance** activity is **Approval Elements** window.

- The Supervisor must click the **Xmit** (Transmit) button to send the grant and TAD to WMS if all windows have been approved and the household is eligible for ESNAP.

The **Refer Back to Worker** button at the bottom of the **Approval Elements** window on page 34 will enable the Supervisor to send the case back to a JOS/Worker for completion when a window activity has been disapproved. To return the case, the Supervisor must:

- Click the **Refer Back to Worker** button to display the list of available JOS/Workers within the Job Center. The display will highlight the JOS/Worker who completed the interview, but the Supervisor will have the option to select any JOS/Worker from the list.
- Click the **OK** button to send the case back to the highlighted JOS/Worker's Queue.

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

Application File Date: \_\_\_\_\_

Center: \_\_\_\_\_

## Supplemental Nutrition Assistance Program (SNAP) Benefits Application Attestation Signature Form (Supplement to the LDSS-4826)

**This is a supplement to the State-approved Supplemental Nutrition Assistance Program (SNAP) Benefits Application/Recertification (LDSS-4826).** Your signature on this form is an acknowledgement that you have received the information on this form, taken from the SNAP Benefits Application/Recertification (LDSS-4826), about your rights and responsibilities as an applicant for SNAP benefits. Your signature on this form also is a sworn statement that any information that you have provided or will provide as part of your application is correct to the best of your knowledge. This will allow us to conduct your eligibility interview over the telephone.

**SNAP BENEFITS PENALTY WARNING** – Any information you provide in connection with your application for SNAP benefits will be subject to verification by Federal, State and local officials. If any information is incorrect, you may be denied SNAP benefits. You may be subject to criminal prosecution for knowingly providing incorrect information.

You will **never** be able to get SNAP benefits again if you are found guilty in a court of law for the second time of buying or selling controlled substances (illegal drugs or certain drugs for which a doctor's prescription is required) in exchange for SNAP benefits; **or** found guilty in a court of law of selling or getting firearms, ammunition or explosives in exchange for SNAP benefits; **or** found guilty in a court of trafficking in SNAP benefits worth \$500 or more. Trafficking includes the illegal use, transfer, acquisition, alteration or possession of SNAP benefits, authorization cards or access devices; **or** found guilty of committing a third Intentional Program Violation (IPV).

You will not be able to get SNAP benefits for two years if you are found guilty in a court of law for the first time of buying or selling controlled substances (illegal drugs or certain drugs for which a doctor's prescription is required) in exchange for SNAP benefits.

If you have committed your:

- First IPV, you will not be able to get SNAP benefits for one year.
- Second IPV, you will not be able to get SNAP benefits for two years.

A court could also bar you from receiving SNAP benefits for an additional 18 months. If you make a false statement about who you are or where you live in order to get multiple SNAP benefits, you will not be able to get SNAP benefits for ten years (or **permanently** if this is the third IPV).

You may be found guilty of an IPV if you make a false or misleading statement, or misrepresent, conceal or withhold facts; **or** commit any act that constitutes a violation of Federal or State law for the purpose of using, presenting, transferring, acquiring, receiving, possessing or trafficking of coupons, authorization cards or reusable documents used as part of the Electronic Benefit Transfer (EBT) system.

You could also be fined up to \$250,000, sent to jail for up to 20 years, or both.

Anyone who is fleeing to avoid prosecution, custody or confinement for a felony, or who is violating a condition of probation or parole, is not eligible to receive SNAP benefits.

If you get more SNAP benefits than you should have (overpayment), you must pay them back. If your case is active, we will take back the amount of overpayment from future SNAP benefits that you get. If your case is closed, you may pay back the overpayment through any unused SNAP benefits remaining in your account, or you may pay cash.

If you have an overpayment that is not paid back, it will be referred for collection in a number of ways, including automated collection by the federal government. Federal benefits (such as Social Security) and tax refunds that you are entitled to receive may be taken to pay back the overpayment. The debt will also be subject to processing charges.

Any expunged SNAP benefits will be put towards your overpayment. If you apply for SNAP benefits again, and have not repaid the amount you owe, your SNAP benefits will be reduced if you begin to get them again. You will be notified, at that time, of the amount of reduced benefits you will get.

**CONSENT** – I understand that by signing this application form I agree to any investigation made by the New York State Office of Temporary and Disability Assistance or my local social services district to verify or confirm the information I have given or any other investigation made by them in connection with my request for SNAP benefits. If additional information is requested, I will provide it. I will also cooperate with State and Federal personnel in a SNAP benefits Quality Control Review.

**CONSENT FOR RELEASE OF CONFIDENTIAL UNEMPLOYMENT INSURANCE (UI) INFORMATION** – I authorize the New York State Department of Labor (DOL) to release any confidential information, maintained by DOL for Unemployment Insurance (UI) purposes, to the New York State Office of Temporary and Disability Assistance (OTDA). This information includes UI benefit claims and wage records. I understand that OTDA, along with State and local agency employees working in social services district offices, will use the UI information for establishing or verifying eligibility for, and the amount of, TA, MA, or SNAP benefits applied for in this application and for investigations to determine whether I received benefits to which I was not entitled.

**SUA (STANDARD UTILITY ALLOWANCE) INFORMATION** – I understand that SNAP benefits recipients are categorically income eligible for the Home Energy Assistance Program (HEAP). If I am not included in the annual automatic HEAP payment process for certain SNAP recipients, my household intends to apply for a HEAP benefit within the next 12 months. If I decide not to apply for HEAP within the next 12 months, I will let my worker know.

**TELEPHONE ALLOWANCE INFORMATION** – I understand that SNAP benefits recipients are eligible for a telephone allowance if they pay to use a home phone, cell phone, phone calling card or coin operated pay phone. If I do not have any cost to make phone calls, I will let my worker know.

**CHANGES** – I agree to inform the agency promptly of any change in my needs, income, property, living arrangement, pregnancy status or address to the best of my knowledge or belief in accordance with my reporting requirements.

**REQUIREMENT TO REPORT/VERIFY HOUSEHOLD EXPENSES** – I understand that my household must report child care and utility expenses in order to get a SNAP benefits deduction for these expenses. I further understand that my household must report and verify rent/mortgage payments, property taxes, insurance, medical expenses and child support paid to a non-household member in order to get a SNAP deduction for these expenses. I understand that failure to report/verify the above expenses will be seen as a statement by my household that I/we do not want to receive a deduction for those unreported/unverified expenses. A deduction for these expenses may make me eligible for SNAP benefits or may increase my SNAP benefits. I understand that I may report/verify these expenses at any time in the future. This deduction would then be applied to the calculation of SNAP benefits in future months in accordance with the rules for change reporting and processing changes.

**PRIVACY ACT STATEMENT – COLLECTION AND USE OF SOCIAL SECURITY NUMBER (SSN)** – The collection of SSNs is authorized for each household member with respect to SNAP benefits pursuant to the Food Stamp Act of 1977 (as amended, 7 US Code 2011-2036). The information we collect will be used to determine whether your household is eligible or continues to be eligible for benefits. We will verify this information through computer matching programs. This information will also be used to monitor compliance with program regulations and for program management. The information will be used to check identity, to verify earned and unearned income, and to determine if applicants or recipients can receive money or other help. The information may be disclosed to State and Federal agencies for official examination and to law enforcement officials for the purpose of apprehending persons fleeing to avoid the law.

If you or anyone applying/recertifying does not have an SSN, a SSN must be applied for at the Social Security Agency.

**CITIZENSHIP/IMMIGRATION STATUS** – I swear and/or affirm under penalty of perjury that the information I have provided about the citizenship and immigration status of myself and everyone living with me is true and correct. I understand that any information I provide to verify the immigration status of anyone applying for SNAP benefits may be checked for authenticity with the United States Citizenship and Immigration Services.

For the SNAP benefits Program, citizenship must be documented only if questionable.

**NON-DISCRIMINATION NOTICE** – In accordance with Federal Law and U.S. Department of Agriculture (USDA) policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, political belief, or disability. To file a complaint of discrimination, write: *USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410* or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.

**AUTHORIZED REPRESENTATIVE** – You can authorize someone who knows your household circumstances to **apply** for SNAP benefits for you. You can also authorize someone outside your household to get SNAP benefits for you and to use them to buy food for you. If you would like to authorize someone, you must do so in writing. You may do so by printing the person's name, address and phone number on page four.

When an Authorized Representative is applying on behalf of a SNAP benefits household that does not reside in an institution, both the Authorized Representative and the SNAP benefits Head of Household or other responsible adult member of the household must sign and date the signature sections at the bottom of this form.

**LIFELINE** – For applicants/recipients of SNAP benefits: The Office of Temporary and Disability Assistance may or may not release your name and address to your telephone service provider. Your telephone service provider may or may not use this information to enroll you in their Lifeline Service for a discounted telephone rate.

If you *do not* want this information released, check this box .

You may contact your telephone service provider directly for enrollment in the discounted rate Lifeline Service.

Medicaid-**only** applicants/recipients must contact their telephone service provider directly for enrollment in the discounted rate Lifeline Service.

**CERTIFICATION: I swear and/or affirm under the penalties of perjury that the information I have given or will give to the local Social Services district is correct.**

Case Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

Date of Birth (optional): \_\_\_\_\_ Social Security Number (optional): \_\_\_\_\_

\_\_\_\_\_  
Applicant's/Authorized Representative's Signature

**IF APPLYING FOR SOMEONE ELSE AS AN AUTHORIZED REPRESENTATIVE, PRINT YOUR NAME AND ADDRESS HERE. YOU MAY ALSO VOLUNTARILY PRINT YOUR TELEPHONE NUMBER.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

**IF YOU HELPED COMPLETE THIS APPLICATION/RECERTIFICATION FOR SOMEONE ELSE, PRINT YOUR NAME AND ADDRESS HERE. YOU MAY ALSO VOLUNTARILY PRINT YOUR TELEPHONE NUMBER.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

**IF YOU WOULD LIKE TO AUTHORIZE SOMEONE, PRINT THE PERSON'S NAME, ADDRESS AND TELEPHONE NUMBER DIRECTLY BELOW.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

Fecha: \_\_\_\_\_

Fecha de la Solicitud: \_\_\_\_\_

Centro: \_\_\_\_\_

## Formulario de Entendimiento de Atestación de la Solicitud del Programa de Asistencia de Nutrición Suplementaria (SNAP) (Suplemento al LDSS-4826-SP)

**El presente es un suplemento de la Solicitud/Recertificación del Programa de Asistencia de Nutrición Suplementaria (SNAP) (LDSS-4826-SP) aprobada por el Estado.** Su firma en este formulario es un reconocimiento de que usted ha recibido la información contenida en este formulario. Dicha información fue tomada de la Solicitud/Recertificación para beneficios de SNAP (LDSS-4826-SP) la cual le explica sobre sus derechos y responsabilidades como solicitante de SNAP. Su firma en este formulario servirá como una declaración jurada de que la información que usted ha proporcionado o proporcionará como parte de su solicitud es cierta y correcta, según su leal saber y entender. Esto nos permitirá llevar a cabo su entrevista de elegibilidad por teléfono.

**ADVERTENCIA SOBRE SANCIONES RELACIONADAS CON LOS BENEFICIOS DE SNAP** – Toda información que usted proporcione en relación con su solicitud para recibir los beneficios de SNAP estará sujeta a la verificación por autoridades Federales, Estatales y Municipales. Si se encuentra información incorrecta, se le podrán negar los beneficios de SNAP. Se le podría someter a enjuiciamiento penal por proporcionar, a sabiendas, información incorrecta.

Usted **nunca** podrá obtener beneficios de SNAP si se le declara culpable por la segunda vez en un tribunal de justicia de comprar o vender sustancias controladas (drogas ilegales o drogas para las cuales se requiere receta médica) a cambio de beneficios de SNAP; o si se le declara culpable en un tribunal de justicia de vender u obtener armas de fuego, municiones o explosivos a cambio de beneficios de SNAP; o si se le declara culpable en un tribunal de justicia de traficar beneficios de SNAP en un valor de \$500 ó más. El tráfico incluye el uso ilegal, la transferencia, la adquisición, la manipulación o la posesión ilegal de beneficios de SNAP, tarjetas de autorización o elementos de acceso; o si es declarado culpable de cometer la tercera Violación Intencional al Programa (IPV).

Usted no podrá recibir beneficios de SNAP por dos años si se le declara culpable, por primera vez, en un tribunal de justicia de comprar o vender sustancias controladas (drogas ilegales o determinadas drogas que sólo se pueden comprar con receta médica) a cambio de SNAP.

Si usted ha cometido su:

- Primera IPV, no podrá recibir los beneficios de SNAP por el periodo de un año.
- Segunda IPV, no podrá recibir los beneficios de SNAP por un periodo de dos años.

También, un tribunal de justicia puede prohibirle recibir beneficios de SNAP durante un periodo de 18 meses adicionales. Si usted hace una declaración falsa sobre su identidad o domicilio a fin de recibir múltiples de beneficios de SNAP, no podrá recibir beneficios de SNAP durante un periodo de diez años (o **permanentemente** si ésta es su tercera IPV).

A usted se le puede declarar culpable de una IPV si presta testimonio falso o engañoso, o hace representaciones falsas, oculta o retiene datos; o comete un acto que constituya una violación de la ley Federal o Estatal con el propósito de usar, presentar, transferir, adquirir, recibir, poseer o traficar beneficios de SNAP, tarjetas de autorización o documentos reusables pertenecientes al sistema de Transferencia Electrónica de Beneficios (EBT).

Se le puede imponer una multa de hasta \$250,000, enviar a prisión por hasta 20 años, o ambas sanciones.

Cualquier persona que esté huyendo de enjuiciamiento, detención o confinamiento por delito mayor, o quien esté violando una estipulación de libertad condicional o vigilada, no es elegible para recibir los beneficios de SNAP.

Si usted recibe más beneficios de SNAP de lo debido (sobrepago), tiene que devolverlos. Si su caso está activo, recobramos la cantidad del sobrepago de futuros beneficios de SNAP que usted reciba. Si su caso está cerrado, usted puede devolver el sobrepago mediante cualesquier beneficios de SNAP sobrantes en su cuenta, o puede pagar en efectivo.



Si usted tiene un sobrepago que no se ha devuelto, se enviará para recuperación en varias maneras, incluyendo recuperación automática por parte del gobierno Federal. Se pueden embargar los beneficios Federales (como Seguro Social) y reembolsos tributarios, a los cuales usted tenga derecho, para restituir el sobrepago. Además, la deuda estará sujeta a tasas de tramitación.

Cualesquier beneficios de SNAP suprimidos serán destinados a su sobrepago. Si usted solicita beneficios de SNAP de nuevo, y nosotros no hemos devuelto la cantidad que usted debe, sus beneficios de SNAP se reducirán si usted comienza a recibirlos de nuevo. A usted se le notificará, en esa coyuntura, de la cantidad de beneficios reducidos que le correspondan.

**CONSENTIMIENTO** – Entiendo que al firmar esta solicitud doy mi consentimiento para que la Oficina de Asistencia Temporal y para Incapacitados del Estado de Nueva York (New York State Office of Temporary and Disability Assistance) realice toda investigación necesaria a fin de verificar o confirmar la información que he proporcionado, o para cualquier otra investigación realizada en relación con mi solicitud para beneficios de SNAP. Proporcionaré información adicional si se requiere. Además, cooperaré con el personal Estatal y Federal en la realización de toda revisión de control de calidad pertinente a los beneficios de SNAP.

**CONSENTIMIENTO PARA DIVULGACIÓN DE INFORMACIÓN CONFIDENCIAL SOBRE SEGURO PARA DESEMPLEO (UI)** – Autorizo al Departamento de Trabajo del Estado de Nueva York (New York State Department of Labor – DOL) para la divulgación de cualquier información confidencial, archivada por el DOL para propósitos de seguro para desempleo (UI), a la Oficina del Estado de Nueva York de Asistencia Temporal y para Incapacitados (New York State Office of Temporary and Disability Assistance – OTDA). Esta información incluye declaraciones de beneficios de UI y pruebas de salario. Soy consciente de que la OTDA, junto con el Estado de Nueva York y empleados de las oficinas de distrito de servicios sociales de agencias locales, utilizarán la información sobre UI para establecer o verificar la elegibilidad para, y la cantidad de beneficios de Asistencia Temporal, Asistencia Médica o SNAP solicitados en la presente y para investigaciones para determinar si he recibido beneficios a los cuales no tenía derecho.

**INFORMACIÓN SOBRE SUBSIDIO ESTÁNDAR DE SERVICIOS PÚBLICOS (SUA)** – Entiendo que los beneficiarios de SNAP reúnen los requisitos de ingresos categóricamente para el Programa de Subsidio de Energía para el Hogar (HEAP). Si no se me incluye en el proceso anual de pago automático de HEAP para ciertos beneficiarios de SNAP, tengo intenciones de solicitar el beneficio dentro de los próximos 12 meses. Si decido no solicitar el beneficio HEAP dentro de los próximos 12 meses, le informaré de dicha situación a mi trabajador.

**INFORMACIÓN SOBRE ASIGNACIÓN PARA SERVICIOS TELEFÓNICOS** – Entiendo que los beneficiarios de SNAP reúnen los requisitos para una asignación telefónica si pagan por el uso de un teléfono en el hogar, teléfono celular, tarjeta telefónica o teléfono a monedas. Si no tengo gastos de teléfono, se lo informaré a mi trabajador.

**CAMBIOS** – Acepto informar **con prontitud** a la agencia de todo cambio que se produzca pertinente a mis necesidades, ingresos, propiedades, condiciones de vivienda o domicilio, estado de embarazo o dirección, según mi leal saber y entender, y según las estipulaciones de notificación.

**RESPONSABILIDAD DE REPORTAR/VERIFICAR GASTOS DEL HOGAR** – Entiendo que mi hogar debe reportar gastos por cuidado infantil y servicios públicos para poder obtener deducciones por estos gastos con relación a los beneficios de SNAP. Además, entiendo que mi hogar deberá reportar y comprobar los pagos por alquiler/hipoteca, impuestos inmobiliarios, seguros, gastos médicos y cuidado infantil pagados a toda persona que no sea miembro del hogar, con el fin de obtener una deducción por estos gastos en los beneficios de SNAP. Entiendo que el no reportar/no verificar los gastos anteriores se interpretará como una declaración por parte de mi hogar de que yo/nosotros no quiero/queremos obtener la deducción por tales gastos no reportados/no verificados. La deducción por estos gastos podría habilitarme para recibir los beneficios de SNAP o aumentar mis beneficios de SNAP. Entiendo que puedo reportar/verificar estos gastos cuando lo desee en el futuro. Esta deducción se aplicaría luego al cálculo de los beneficios de SNAP en los meses subsiguientes, según las reglas sobre la notificación y tramitación de los cambios.

**DECLARACIÓN DE PRIVACIDAD – RECOPIACIÓN Y USO DEL NÚMERO DE SEGURO SOCIAL (SSN) –** La recopilación de los números de seguro social de cada miembro del hogar, con respecto a los SNAP, está autorizada conforme la ley que rige el Programa de Cupones para Alimentos de 1977 (enmendado, 7 US Code 2011-2036). Toda información recopilada servirá para determinar si su hogar reúne los requisitos o continúa reuniendo los requisitos para recibir los beneficios. Verificaremos esta información por emparejamiento mediante programas informáticos. Esta información se utilizará para verificar el cumplimiento de las reglas del programa y para la administración del mismo. La información también se usará para verificar la identidad, los ingresos salariales y no salariales, y para determinar si los solicitantes o beneficiarios pueden recibir dinero u otro tipo de ayuda. La información puede divulgarse a las agencias Estatales y Federales para la revisión oficial y a las autoridades del orden público con el propósito de arrestar a toda persona que huye de la justicia.

Si usted o cualquier solicitante/recertificante no tiene un número de seguro social, debe solicitarlo en la Agencia de Seguro Social (Social Security Agency).

**CIUDADANÍA/ESTADO MIGRATORIO –** Juro y/o afirmo so pena de perjurio que la información que proporcioné sobre mi situación de ciudadanía estadounidense o estado migratorio, y la de las personas que viven en mi hogar es verdadera y correcta. Entiendo que la Oficina de Servicios de Ciudadanía e Inmigración de Estados Unidos (*United States Citizenship and Immigration Services*) puede examinar la veracidad de la información que proporcione en relación con el estado migratorio del/de los solicitante(s) de SNAP.

Para el Programa de beneficios de SNAP, la ciudadanía debe documentarse sólo si es cuestionable.

**AVISO DE LA POLÍTICA ANTIDISCRIMINATORIA –** Según la política de las leyes Federales y del Departamento de Agricultura de Estados Unidos (USDA), a esta institución se le prohíbe discriminar basándose en la raza, color de la piel, la nacionalidad, el género, la edad, la religión, las ideas políticas o en la incapacidad. Si desea presentar una queja por discriminación, envíe su carta al: *USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410* o llame al (202) 720-5964 (voz y TDD). USDA es un proveedor y empleador que brinda igualdad de oportunidades.

**REPRESENTANTE AUTORIZADO –** Usted puede autorizar a otra persona que conozca las circunstancias de su hogar para que **solicite** los beneficios de SNAP en nombre suyo. Además, puede autorizar a otra persona que no sea miembro de su hogar obtener los beneficios de SNAP y comprar los alimentos en nombre suyo. Si usted desea autorizar a otra persona, escriba en letra de molde en la página cuatro, el nombre de dicha persona, el domicilio y el número de teléfono.

Cuando un representante autorizado solicita en nombre de una familia que no reside en una institución, tanto el representante autorizado como el jefe de la familia, u otro miembro adulto responsable del hogar deben firmar y fechar la sección de firmas al final de este formulario.

**LIFELINE: Para los solicitantes/beneficiarios de SNAP:** Es posible que la Oficina de Asistencia Temporal y para Incapacitados (NYS Office of Temporary and Disability Assistance) revele su nombre y domicilio a su proveedor de servicio telefónico. Es posible que la compañía telefónica use esta información para inscribirlo en el servicio telefónico de tarifa descontada conocido como LIFELINE.

Si *no desea* que se revele este tipo de información, marque este casillero .

Usted puede comunicarse directamente con su proveedor de servicio telefónico para la inscripción en el Servicio LIFELINE de tarifa descontada.

Los solicitantes/beneficiarios de **sólo** Medicaid tienen que comunicarse con su proveedor de servicio telefónico directamente para la inscripción en el Servicio LIFELINE de tarifa descontada.

**CERTIFICACIÓN: Juro y/o afirmo so pena de perjurio que la información que he proporcionado o que proporcionaré al distrito local de Servicios Sociales es verdadera.**

Nombre del Caso: \_\_\_\_\_

Dirección: \_\_\_\_\_  
\_\_\_\_\_

Ciudad: \_\_\_\_\_ Estado: \_\_\_\_\_ Código Postal: \_\_\_\_\_

Fecha de Nacimiento (opcional): \_\_\_\_\_ Número de Seguro Social (opcional): \_\_\_\_\_

\_\_\_\_\_  
Firma del Solicitante/Representante Autorizado

**SI PRESENTA ESTA SOLICITUD COMO REPRESENTANTE AUTORIZADO DE OTRA PERSONA, ESCRIBA EN LETRA DE MOLDE AQUÍ SU NOMBRE Y SU DOMICILIO. PUEDE INCLUIR SU NÚMERO DE TELÉFONO COMO INFORMACIÓN VOLUNTARIA.**

Nombre: \_\_\_\_\_ Teléfono: \_\_\_\_\_

Dirección: \_\_\_\_\_

Ciudad \_\_\_\_\_ Estado \_\_\_\_\_ Código Postal \_\_\_\_\_

**SI USTED AYUDÓ A OTRA PERSONA A LLENAR ESTA SOLICITUD / RECERTIFICACIÓN, ESCRIBA AQUÍ EL NOMBRE SUYO Y DOMICILIO EN LETRA DE MOLDE LEGIBLE. PUEDE INCLUIR SU NÚMERO DE TELÉFONO COMO INFORMACIÓN VOLUNTARIA.**

Nombre: \_\_\_\_\_ Teléfono: \_\_\_\_\_

Dirección: \_\_\_\_\_

Ciudad \_\_\_\_\_ Estado \_\_\_\_\_ Código Postal \_\_\_\_\_

**SI USTED DESEA AUTORIZAR A ALGUIEN, ESCRIBA EL NOMBRE, LA DIRECCIÓN Y EL NÚMERO DE TELÉFONO DE LA PERSONA EN LETRA DE MOLDE MÁS ABAJO.**

Nombre: \_\_\_\_\_ Teléfono: \_\_\_\_\_

Dirección: \_\_\_\_\_

Ciudad \_\_\_\_\_ Estado \_\_\_\_\_ Código Postal \_\_\_\_\_

## Expedited Supplemental Nutrition Assistance Program (SNAP) Processing and Application Timelines Desk Aid

While the SNAP rules are the same whether an individual receives SNAP as part of a Cash Assistance (CA) case or a Non Cash Assistance Supplemental Nutrition Assistance Program (NCA SNAP) case, the operational rules will differ because of the differences between CA and SNAP policy.

The same SNAP application may be used for up to 60 days following the date of application, if the application initially was denied at the end of the first 30-day period for a failure to take a required action (other than a failure to be interviewed). However, if a household has received an expedited issuance of SNAP benefits and has failed to provide all pending verification before the end of the calendar month following the end of the initial issuance period, the household will be required to submit a new application.

<p><b>Screening for Expedited SNAP (ESNAP) processing</b></p>	<p>All SNAP applications must be screened on the day the application is filed using the SNAP Application Expedited Processing Summary Sheet (<b>LDSS-3938 NYC</b>) to determine if the household qualifies for Expedited SNAP (ESNAP) processing. Responses to SNAP related questions in POS are used to electronically complete the <b>LDSS-3938 NYC</b>.</p>
<p><b>ESNAP processing criteria</b></p>	<p>To qualify for ESNAP processing, the SNAP household must meet at least one of the criteria listed below:</p> <ul style="list-style-type: none"> <li>• have monthly gross income under \$150 and liquid resources not exceeding \$100 in the month of application;</li> <li>• consist of a destitute migrant and/or seasonal farm worker whose liquid resources do not exceed \$100;</li> <li>• in the month of application, have combined monthly gross income and liquid resources that are less than the sum of the household's monthly shelter costs (shelter costs include rent or mortgage plus the Standard Utility Allowance [SUA] applicable for the household).</li> </ul>
<p><b>Scheduling the initial ("I") eligibility interview for households eligible for ESNAP processing</b></p>	<p>Households eligible for ESNAP processing must comply with an "I" eligibility interview either in person, by telephone, or through an authorized representative. Households eligible for ESNAP processing must be scheduled for an "I" eligibility interview as follows:</p> <p><b>Job Centers:</b></p> <ul style="list-style-type: none"> <li>• are required to conduct the "I" eligibility interview on the same day the application is filed.</li> </ul> <p><b>NCA SNAP Centers:</b></p> <ul style="list-style-type: none"> <li>• are required to conduct the "I" eligibility interview within 48 hours, or within 5 days if the applicant is unavailable for an interview within 48 hours. Households that qualify for ESNAP processing based on a SNAP application received by mail or fax must be scheduled for an "I" eligibility interview within five (5) days from the date the application was received.</li> </ul> <p>Households eligible for ESNAP processing who comply with an "I" eligibility interview must verify the identity of the applicant prior to receiving a benefit. Verification of all other eligibility factors such as income, resources, household composition, etc., can be pending. Households not eligible for ESNAP processing must verify eligibility before a benefit can be issued.</p>
<p><b>Processing applications for individuals eligible for SNAP under the ESNAP processing criteria</b></p>	<p>If the household is determined eligible to receive an expedited issuance of SNAP benefits, the benefits must be provided no later than the fifth calendar day following the date of application if the applicant complies with the "I" eligibility interview by the fifth day. The benefit must be provided by the seventh day following the date of application if the applicant complies with the "I" eligibility interview on the sixth or seventh day. For households that have been determined eligible for SNAP benefits with pending verification and the identity of the applicant has been verified, proceed as follows:</p> <p><b>Job Centers</b></p> <ul style="list-style-type: none"> <li>• place the SNAP portion of the case in single issue (<b>SI</b>) status using opening code <b>Q23</b>;</li> <li>• issue the initial SNAP benefit using code <b>54</b> (Expedited Service – Not Verified for PA/SNAP Cases);</li> <li>• complete and give the applicant the Documentation Requirements and/or Assessment Follow-Up form (<b>W-113K</b>) listing all the eligibility factors that need to be verified, and allow a minimum of 10 calendar days for return of required documents.</li> </ul> <p>For households that verified eligibility and identity:</p> <p><b>Job Centers</b></p> <ul style="list-style-type: none"> <li>• activate (<b>AC</b>) the SNAP case using the appropriate opening code and issue benefit using code <b>52</b> (Expedited Service – Verified for PA/SNAP Cases).</li> </ul> <p><b>NCA SNAP Centers</b></p> <ul style="list-style-type: none"> <li>• place the SNAP case in <b>SI</b> status using opening code <b>Q22</b>;</li> <li>• issue the initial SNAP benefit using code <b>55</b> (Expedited Service – Not Verified for NPA/SNAP Cases);</li> <li>• complete and give the applicant the Documentation Requirements and/or Assessment Follow-Up form (<b>W-113K</b>) listing all the eligibility factors that need to be verified, and allow a minimum of 10 calendar days for return of required documents.</li> </ul>
<p><b>Processing applications for individuals eligible for SNAP under the ESNAP processing criteria</b></p>	<p>For households that verified eligibility and identity:</p> <p><b>Job Centers</b></p> <ul style="list-style-type: none"> <li>• activate (<b>AC</b>) the SNAP case using the appropriate opening code and issue benefit using code <b>53</b> (Expedited Service – EBT, Verified for NPA/SNAP Cases).</li> </ul> <p><b>NCA SNAP Centers</b></p> <ul style="list-style-type: none"> <li>• <b>AC</b> the SNAP case using the appropriate opening code and issue benefit using code <b>53</b> (Expedited Service – EBT, Verified for NPA/SNAP Cases).</li> </ul> <p>In Job Centers only, if the household is eligible for benefits but the identity of the applicant cannot be verified, action to accept the case cannot be processed. Prepare and issue applicant the Notice of Denial of Expedited SNAP Processing or Inability to Issue SNAP Benefits (<b>M-40k</b>) which informs the household that the SNAP benefit cannot be issued until the identity of the applicant is verified.</p>

## Expedited Supplemental Nutrition Assistance Program (SNAP) Processing and Application Timelines Desk Aid (Continued)

<p><b>Issuance of SNAP benefits for households determined eligible for SNAP under the ESNAP processing criteria</b></p>	<p>If, based on the "I" eligibility interview and available verification, the household appears to meet all the standard SNAP eligibility factors and has verified the identity of the applicant, the SNAP case must be accepted regardless of whether or not all the eligibility factors can be verified at that point. The period of the initial benefit will depend on the date of application as follows:</p> <ul style="list-style-type: none"> <li>• if the application is filed on or before the 15th of the month, the initial benefit issuance will cover from the day the application is filed through the end of the same month. For example, a household that filed on 10/10 would receive SNAP benefits from 10/10 through 10/31;</li> <li>• if the application is filed after the 15th of the month, the initial benefit issuance will cover from the day the application is filed through the end of the month following the month of application. For example, a household that filed on 10/16 would receive SNAP benefits from 10/16 through 11/30.</li> </ul> <p>If the SNAP case is accepted with pended verification and the household fails to submit it as required, but complies within 30 days following the end of the period covered by the initial benefit issuance:</p> <ul style="list-style-type: none"> <li>• If the case is in <b>SI</b> status, activate the case and issue any missed benefits;</li> <li>• If the case is closed, reopen and issue any missed benefits.</li> </ul> <p>If the household fails to submit the pended verification by the end of the calendar month following the end of the initial issuance period and still wants SNAP benefits, a new application must be filed.</p> <p>If verification of expenses (e.g. shelter or dependent care) is not provided, determine the eligibility and benefit level without them.</p>
<p><b>Failure to submit pended verification as required</b></p>	<p>If the applicant fails to keep the scheduled "I" eligibility interview appointment, but makes himself/herself available for the "I" eligibility interview anytime within seven days after the day the application was filed, the "I" eligibility interview must be conducted at that point. In these instances the <b>day the applicant complies with the "I" eligibility interview must be clearly indicated in the electronic case record.</b></p> <p>The Supplemental Nutrition Assistance Program (SNAP) Request for Contact/Missed Interview (<b>LDSS-4753</b>) must be sent to persons who fail to be interviewed on his/her scheduled date and time.</p> <p>If the applicant fails to make himself/herself available for the "I" eligibility interview within seven days following the filing of the application, the household will no longer be eligible for ESNAP processing. The application will then be processed according to the 30-days rule which requires the household to verify all eligibility before a SNAP processing benefit can be issued.</p>
<p><b>Applicant is ineligible for ESNAP processing and fails to keep scheduled "I" eligibility interview</b></p>	<p>SNAP case will remain in AP status until the 30th day of application at which time, if the household has not complied with the "I" eligibility interview, the application will be denied. After the application is denied, if the household still wants to receive SNAP benefits, the applicant must begin the application process again.</p> <p>Applicant has an "I" eligibility interview and is required to return in 10 days with outstanding eligibility documents needed to verify his/her eligibility for SNAP.</p> <ul style="list-style-type: none"> <li>• If the applicant complies within 30 days of the application date, she/he is eligible to receive benefits retroactive to the day of application. In this instance, if SNAP case was closed, it must be reopened. A new application and "I" eligibility interview are not required;</li> <li>• If the applicant complies within 31 to 60 days of initial application date, then she/he is eligible to receive benefits from the first day of the month in which she/he complies. Neither a new application nor an "I" eligibility interview is required;</li> <li>• If the applicant complies after the 60th day of application, then she/he must begin the application process again by submitting a new application.</li> </ul>
<p><b>Applicant is ineligible for ESNAP processing and fails to submit pended verification</b></p>	<p>If, at the initial screening, the Agency incorrectly determines the household is not qualified for ESNAP processing but subsequently discovers that the household was qualified for ESNAP processing, and is determined eligible for SNAP benefits, a SNAP benefit must be made available no later than five calendar days after the date it is discovered that the household qualified for ESNAP processing.</p> <p>A household which had verification pended previously so that SNAP benefits could be issued within ESNAP processing timeframes and subsequently failed to submit the pended verification (and has not been certified for ongoing benefits since that time) can still be eligible to receive SNAP benefits under the ESNAP processing criteria upon the filing of a new application. <b>However, before a benefit can be issued, eligibility for SNAP must be verified.</b> These households must verify eligibility within 10 days following the "I" eligibility interview. If the household fails to verify eligibility within the specified period of time, the household will not qualify for expedited processing and no SNAP benefits will be issued until all information necessary to determine SNAP eligibility has been provided. If the household verifies eligibility within the specified period, a SNAP benefit must be made available as soon as possible but no later than five days after receipt of verification.</p>
<p><b>Incorrect initial determination of eligibility for ESNAP processing</b></p>	<p>A household which had verification pended previously so that SNAP benefits could be issued within ESNAP processing timeframes and subsequently failed to submit the pended verification (and has not been certified for ongoing benefits since that time) can still be eligible to receive SNAP benefits under the ESNAP processing criteria upon the filing of a new application. <b>However, before a benefit can be issued, eligibility for SNAP must be verified.</b> These households must verify eligibility within 10 days following the "I" eligibility interview. If the household fails to verify eligibility within the specified period of time, the household will not qualify for expedited processing and no SNAP benefits will be issued until all information necessary to determine SNAP eligibility has been provided. If the household verifies eligibility within the specified period, a SNAP benefit must be made available as soon as possible but no later than five days after receipt of verification.</p>
<p><b>Successive receipt of SNAP benefits under the ESNAP processing criteria</b></p>	<p>A household which had verification pended previously so that SNAP benefits could be issued within ESNAP processing timeframes and subsequently failed to submit the pended verification (and has not been certified for ongoing benefits since that time) can still be eligible to receive SNAP benefits under the ESNAP processing criteria upon the filing of a new application. <b>However, before a benefit can be issued, eligibility for SNAP must be verified.</b> These households must verify eligibility within 10 days following the "I" eligibility interview. If the household fails to verify eligibility within the specified period of time, the household will not qualify for expedited processing and no SNAP benefits will be issued until all information necessary to determine SNAP eligibility has been provided. If the household verifies eligibility within the specified period, a SNAP benefit must be made available as soon as possible but no later than five days after receipt of verification.</p>

**TA/SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) DOCUMENTATION/VERIFICATION DESK GUIDE**

TA	SNAP	ELIGIBILITY FACTOR	PRIMARY	SECONDARY	TA	SNAP	ELIGIBILITY FACTOR	PRIMARY
<b>M</b>	<b>M</b>	<b>Identity</b>	Photo I.D. Driver's License US Passport Naturalization Certificate Hospital/Doctor's Records Adoption Papers <b>For SNAP</b> – Identity is only mandatory for the person making the application.	Statement from Another Person Social Security Number Birth/Baptismal Certificate SOLQ <b>For SNAP</b> - In the case of an authorized representative, both the auth rep and applicant must verify identity.	<b>M</b>	<b>N</b>	<b>Absent Parent Information</b>	Pay Stubs Tax Returns Social Security or VA Records Unemployment (UIB) Book ID Cards (Health Insurance) Driver's License or Registration
<b>M</b>	<b>N</b>	<b>Marital Status</b>	Marriage/Death Certificates Separation Agreement Divorce Decree Social Security Records VA Records	Statement from Clergy Census Records Newspaper Notice Statement from Another Person	<b>M</b>	<b>M *</b>	<b>Social Security Number</b>	Social Security Card Official Correspondence from SSA <b>For TA and SNAP</b> , provided or apply for # at certification; must verify at first recertification unless validated by WMS SOLQ
<b>M</b>	<b>M *</b>	<b>Residence</b>	Statement from Landlord Current Rent Receipt or Lease Mortgage Records <b>For SNAP</b> - Residence is verified at a household level	Statement from Another Person Current Mail School Records Fuel/Utility bill	<b>M</b> <b>M</b>	<b>Q</b> <b>M</b>	<b>Citizenship</b> <b>Alien Status</b>	Birth/Baptismal Certificate Hospital Records US Passport Military Service Records Naturalization Certificate USCIS Documentation Evidence of Continuous US Residence since Prior to 1/1/72 <b>For TA and SNAP</b> , alien status is verified on an individual basis <b>For SNAP Only</b> , citizenship is verified only if questionable
<b>M</b>	<b>M *</b>	<b>Household Composition/ Size</b>	Statement from Non-relative Landlord <b>For SNAP</b> – household size must be verified. This can be done through collateral contacts or readily available documents which can be used to establish identity.	Statement from Other Persons	<b>M</b>	<b>M *</b>	<b>Earned Income</b>	Current Wage Stubs and Statement of Tips Pay Envelopes Contact with Employer Business Records Records and Related Materials Concerning Self-Employment Earnings and Expenses Current Income Tax Return Statement from Roomer, Boarder, Tenant Income Tax Records
<b>M</b>	<b>M *</b>	<b>Age</b>	Birth Certificate Baptismal Certificate Hospital Records Adoption Records Naturalization Certificate Driver's License <b>For SNAP Only</b> , DOB can be Verified at Recertification	Insurance Policy Census Records School Records Statement from Another Person Physician Statement Official Correspondence from SSA				Statement from Family Court Statement from Person Paying Statement from School Statement from Bank or Credit Union Statement from Broker/Agent Support Check stubs Current Award Certificate Current Benefit Check
<b>M</b>	<b>N</b>	<b>Absent Parent</b>	Death Certificate Survivor's Benefits Hospital Records VA or Military Records Divorce Papers Proof of Remarriage	Newspaper Notice Insurance Company Records Institutional Records Agency Case Records and Burial Payment Lines Statement from a Non-Relative	<b>M</b>	<b>M *</b>	<b>Unearned Income</b>	Official Correspondence with NYS Dept. of Labor Official Correspondence from SSA Official Correspondence from VA Official Correspondence from source of income Award Letter

**LEGEND:** **M** = Mandatory Documentation/Verification required for Certification  
**N** = No Documentation/Verification required  
**O** = Optional Documentation/Verification (may be necessary for TA and/or SNAP eligibility or benefit amount.)  
**\*** = Verification can be pending under SNAP Expedited Processing

**Q = Verification is Only Necessary if Questionable**

**TA/SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) DOCUMENTATION/VERIFICATION DESK AID**

		<b>EXPENSES</b>			
		<b>THAT MAY AFFECT ELIGIBILITY OR BENEFIT AMOUNT</b>			
<b>TA</b>	<b>SNAP</b>	<b>ELIGIBILITY FACTOR</b>	<b>ELIGIBILITY FACTOR</b>	<b>PRIMARY</b>	
<b>M</b>	<b>M *</b>	<b>Resources</b>	<b>Shelter Expenses</b>	Statement from household Statement from nursing home Current bank records Current credit union records Stock certificate Bonds Statement from financial institution Insurance policy Statement from insurance company Burial agreement Burial plot deed Statement from funeral director Refund or EITC check Statement from tax office Deed Statement from real estate broker Appraisal/estimate of current value by broker Title of ownership Registration (older models) Appraisal of current value by dealer Financing data Statement from source of payment	Current rent receipt Current lease Mortgage book/records Property and school tax records Landlord statement Sewer and water bills Homeowner's insurance records Fuel bills Non-heating utility bills Telephone bills
<b>M</b>	<b>O *</b>	<b>Health Insurance</b>	<b>Medical Bills</b>	Copies of medical bills (paid and unpaid) Provider Statement of Health Insurance premiums Medicare Prescription Drug Card For SNAP, for A/D individuals only	Copies of medical bills (paid and unpaid) Provider Statement of Health Insurance premiums Medicare Prescription Drug Card For SNAP, for A/D individuals only
<b>M</b>	<b>O *</b>	<b>Disabled/Incapacitated/Pregnant</b>	<b>Unpaid Bills</b> Rent, Utility	Insurance policy Insurance card Statement from provider of coverage Medicare card Statement from medical professional verifying pregnancy and expected date of birth Statement from medical professional Proof of SSA or SSI benefits for disability or blindness For non-waiver areas and non-excluded ABAWD individuals Proof of working and/or work program participation for at least 80 hours per month Check Time Limit Tracking Menu (#17 on WMS menu) for 3 or more months of FS receipt in past 36 months without meeting ABAWD work requirement	Copy of each bill showing amount owed, period of services and provider Court order Statement from day care center or other child care provider Statement from aide or attendant Cancelled checks or receipts
<b>M</b>	<b>M *</b>	<b>Able-Bodied Adult Without Dependents (ABAWD) Eligibility</b>	<b>Other Expenses</b> <b>Dependent Care Cost</b>	Statement from provider of treatment Statement from employment service School records (current report card) Statement from school For SNAP, affects work registration and earnings of children under 18	Court order Statement from day care center or other child care provider Statement from aide or attendant Cancelled checks or receipts
<b>M</b>	<b>O *</b>	<b>Referral</b>			
<b>O</b>	<b>O *</b>	<b>School Attendance</b>			

**\* LEGEND:**  
**M** = Mandatory Documentation/Verification required for Certification  
**N** = No Documentation/Verification required  
**O** = Optional Documentation/Verification (may be necessary for TA and/or SNAP eligibility or benefit amount.)  
**Q** = Verification is only necessary if questionable  
**\*** = Verification can be pending under SNAP Expedited Processing

**SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) APPLICATION EXPEDITED PROCESSING SUMMARY SHEET**

CASE NAME	CASE NUMBER	SCREENED BY	DATE APPLICATION FILED	MONTH	DAY	YEAR
			DATE OF SCREENING	MONTH	DAY	YEAR

**INSTRUCTIONS FOR COMPLETING THIS FORM**

1. Screen all applicants for expedited application processing, using the front of this form, on the day of application.
2. State results of screening in Part Four; and if qualified for expedited application processing, conduct a Full Eligibility Interview and complete Part Five (on reverse) within five calendar days of application.
3. If Full Eligibility Interview determines Household eligible for SNAP benefits:
  - Make benefits available to client within five calendar days after the date of application.
  - Send/Provide client with the CNS "Approval Notice" or manual "Action Taken Notice" within five calendar days after the application date.
  - Follow-up on all pended verification before issuance of on-going benefits beyond the initial expedited issuance period.
  - Determine if Household qualifies for Working Families Supplemental Nutrition Assistance Program Initiative (WFSNAPI).

**PART ONE – CHECK YES OR NO**

IS THE HOUSEHOLD ALREADY RECEIVING SNAP BENEFITS THIS MONTH?

**YES** IF YES, HOUSEHOLD DOES **NOT QUALIFY** FOR EXPEDITED PROCESSING. COMPLETE PART FOUR.

**NO** IF NO, CONTINUE WITH PART TWO.

**NOTE:** IF "YES" IS CHECKED, BUT HOUSEHOLD ENTERED A DOMESTIC VIOLENCE SHELTER DURING THE MONTH OF APPLICATION, CONTINUE WITH PART TWO.

**PART TWO – CHECK YES OR NO**

\*\* In determining GROSS INCOME, exclude non-countable income such as child support payments made to a person outside the household.

**SECTION A**

CHECK YES OR NO

DOES THE HOUSEHOLD HAVE \$100 OR LESS IN CASH, SAVINGS OR OTHER LIQUID RESOURCES, **AND**

**YES** IF YES, HOUSEHOLD **QUALIFIES** FOR EXPEDITED PROCESSING. COMPLETE PART FOUR.

**NO** IF NO, CONTINUE WITH SECTION B.

HAS THE HOUSEHOLD RECEIVED OR DOES IT EXPECT TO RECEIVE LESS THAN \$150 GROSS INCOME \*\* DURING THE MONTH OF APPLICATION?

**SECTION B**

ARE HOUSEHOLD'S TOTAL GROSS INCOME \*\* DURING MONTH OF APPLICATION PLUS THE HOUSEHOLD'S LIQUID RESOURCES LESS THAN THEIR MONTHLY RENT/MORTGAGE PLUS UTILITY EXPENSES?

Rent/Mortgage: \$ \_\_\_\_\_ Income: \$ \_\_\_\_\_

\*Heat/AC: \_\_\_\_\_ Resources: \_\_\_\_\_

\*Utilities: \_\_\_\_\_

\*Telephone: \_\_\_\_\_

**Total Expenses: \$ \_\_\_\_\_ Totals: \_\_\_\_\_**

**YES** IF YES, HOUSEHOLD **QUALIFIES** FOR EXPEDITED PROCESSING. COMPLETE PART FOUR.

**NO** IF NO, HOUSEHOLD DOES **NOT QUALIFY** FOR EXPEDITED PROCESSING UNLESS QUALIFIED UNDER PART THREE. GO TO PART THREE IF A MIGRANT/SEASONAL FARMWORKER OTHERWISE, COMPLETE PART FOUR.

\* Use HT/AC Standard Utility Allowance (SUA) if household incurs costs, received HEAP this year, or anticipates receipt of HEAP.

**PART THREE – MIGRANT/SEASONAL FARM WORKER HOUSEHOLDS ONLY - CHECK YES OR NO**

A. IS THIS A HOUSEHOLD WITH NO MORE THAN \$100 IN LIQUID RESOURCES? **AND**

**YES**  **NO**

IF NO, HOUSEHOLD DOES **NOT QUALIFY** FOR EXPEDITED PROCESSING. COMPLETE PART FOUR.

B. THE ONLY INCOME FOR THE MONTH OF APPLICATION:  
(1) WAS TERMINATED BEFORE APPLICATION?

**YES**  **NO CONTINUE WITH B2.**

OR

(2) IS NEW, AND NO MORE THAN \$25 GROSS INCOME WILL BE RECEIVED WITHIN TEN DAYS AFTER APPLICATION?

**YES**  **NO**

IF YES TO QUESTION A, AND YES TO EITHER QUESTION B1 OR QUESTION B2, HOUSEHOLD **QUALIFIES** FOR EXPEDITED PROCESSING, IF NO TO BOTH B1 & B2 HH DOES **NOT QUALIFY**, COMPLETE PART FOUR IN EITHER SITUATION.

**PART FOUR - RESULTS OF EVALUATION FOR EXPEDITED APPLICATION PROCESSING - CHECK ONE**

QUALIFIED FOR EXPEDITED APPLICATION PROCESSING. **CONDUCT A FULL ELIGIBILITY INTERVIEW AND COMPLETE PART FIVE**– VERIFICATION, DISPOSITION AND DATE OF INTERVIEW (ON REVERSE).

NOT QUALIFIED FOR EXPEDITED APPLICATION PROCESSING.

**NOTES:**



**PART FIVE - ELIGIBILITY INTERVIEW – COMPLETE SECTIONS A, B AND C**

**VERIFICATION - CHECK YES OR NO**

<b>SECTION A</b>	<p>1. CAN APPLICANT'S IDENTITY BE VERIFIED? IF DOCUMENTARY EVIDENCE IS NOT READILY AVAILABLE, COLLATERAL CONTACTS ARE ACCEPTABLE. NO SPECIFIC DOCUMENT CAN BE REQUIRED.</p> <p>2. HAS HOUSEHOLD RECEIVED EXPEDITED PROCESSING OF SNAP BENEFITS IN THE PAST?</p> <p>3. IF YES TO QUESTION 2, HAS ALL PREVIOUSLY PENDED VERIFICATION ALREADY BEEN SUBMITTED, OR HAS THE HOUSEHOLD BEEN CERTIFIED FOR ONGOING SNAP BENEFITS UNDER NORMAL PROCESSING (NO PENDED VERIFICATION), SINCE THE LAST EXPEDITED PROCESSING?</p>	<p><input type="checkbox"/> YES, IF ELIGIBLE BENEFITS CAN BE ISSUED PROVIDED ANY OUTSTANDING REQUIREMENTS HAVE BEEN MET. GO TO QUESTION 2.</p> <p><input type="checkbox"/> YES GO TO QUESTION 3.</p> <p><input type="checkbox"/> YES IF DEEMED ELIGIBLE HH CAN RECEIVE BENEFITS WITH ALL OTHER VERIFICATION PENDED, CONTINUE TO SECTION B.</p>	<p><input type="checkbox"/> NO IF APPLICANT IS DEEMED ELIGIBLE, SNAP BENEFITS CANNOT BE ISSUED UNTIL VERIFICATION OF IDENTITY IS PROVIDED. GO TO QUESTION 2.</p> <p><input type="checkbox"/> NO IF DEEMED ELIGIBLE, HH CAN RECEIVE BENEFITS WITH ALL OTHER VERIFICATION PENDED, CONTINUE TO SECTION B.</p> <p><input type="checkbox"/> NO IF HH IS DEEMED ELIGIBLE, SNAP BENEFITS CANNOT BE ISSUED UNTIL ELIGIBILITY IS VERIFIED. ALLOW 10 DAYS FOR VERIFICATION TO BE SUBMITTED. DATE REQUESTED: _____ DATE SUBMITTED: _____</p>
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<b>SECTION B</b>	DATE OF ELIGIBILITY INTERVIEW:	WORKER NAME:
	<i>PLEASE COMPLETE FOR NON-CA SNAP HOUSEHOLDS ONLY</i>	
	<p>1. IS ANY <u>ADULT</u>* (18 YEARS OF AGE OR OLDER) MEMBER OF YOUR HOUSEHOLD EITHER WORKING 30 OR MORE HOURS PER WEEK <u>OR</u> EARNING \$217.50 OR MORE PER WEEK?</p> <p style="text-align: center;">OR</p> <p>2. ARE ANY TWO (2) <u>ADULT</u>* MEMBERS OF YOUR HOUSEHOLD <u>EACH</u> EITHER WORKING 20 OR MORE HOURS PER WEEK <u>OR</u> EARNING \$145 OR MORE PER WEEK?</p> <p>* (Also Minor Heads of SNAP Household)</p>	<p><input type="checkbox"/> YES IF YES, HOUSEHOLD QUALIFIES FOR WFFSI.</p> <p><input type="checkbox"/> NO IF NO GO TO QUESTION 2.</p> <p><input type="checkbox"/> YES IF YES, HOUSEHOLD QUALIFIES FOR WFSNAPI.</p> <p><input type="checkbox"/> NO IF NO, HOUSEHOLD DOES NOT QUALIFY FOR WFSNAPI.</p>

**AGENCY DISPOSITION OF SNAP BENEFIT ELIGIBILITY - CHECK APPROPRIATE BOXES**

<b>SECTION C</b>	<p><input type="checkbox"/> ELIGIBLE</p> <p><input type="checkbox"/> ELIGIBLE (Applied on or before 15<sup>th</sup> of month; zero benefit due to proration)</p> <p><input type="checkbox"/> ELIGIBLE (Applied after 15<sup>th</sup> of month; zero first month's benefit due to proration; full second month's benefit)</p> <p><input type="checkbox"/> ELIGIBLE (Applied after 15<sup>th</sup> of month; prorated first month's benefit plus second month's benefit)</p> <p><input type="checkbox"/> INELIGIBLE: Indicate reason :</p> <p style="margin-left: 20px;"><input type="checkbox"/> HOUSEHOLD IS INELIGIBLE FOR THE PROGRAM DUE TO PROGRAM RULES (provide explanation in comments.)</p> <p style="margin-left: 20px;"><input type="checkbox"/> VERIFICATION OF IDENTITY NOT PROVIDED (SEE A1 ABOVE)</p> <p style="margin-left: 20px;"><input type="checkbox"/> HH DID NOT SUBMIT ALL REQUIRED NON-IDENTITY VERIFICATION (SEE A3 ABOVE)</p> <p>Other Denial Reason/Comments</p> <p>_____</p> <p>_____</p>		
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">DATE OF FINAL DISPOSITION ON SNAP BENEFIT ELIGIBILITY:</td> <td style="width:50%;">WORKER NAME:</td> </tr> </table>	DATE OF FINAL DISPOSITION ON SNAP BENEFIT ELIGIBILITY:	WORKER NAME:
DATE OF FINAL DISPOSITION ON SNAP BENEFIT ELIGIBILITY:	WORKER NAME:		

**SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)  
REQUEST FOR CONTACT/MISSED INTERVIEW**

NOTICE DATE:		NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE		
CASE NUMBER	CIN NUMBER			
CASE NAME (And C/O Name if Present) AND ADDRESS				
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>		GENERAL PHONE NO. FOR QUESTIONS OR HELP _____		
		OR Agency Conference _____		
		Record Access _____		
		Legal Assistance information _____		
OFFICE NO.	UNIT NO.	WORKER NO.	UNIT OR WORKER NAME	PHONE NO.

In order for us to see if you can get or continue to get SNAP benefits, please see the checked () box below:

**1.  REQUEST FOR CONTACT**

We recently received information about a change in your household. In order for us to make sure you can still get SNAP benefits, we need the following:

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In order for us to make sure you can still get SNAP benefits, we need you to contact us by \_\_\_\_\_ to provide the information/documentation requested above.

**If you do not contact us by this date, your SNAP benefits may be reduced or stopped.**

This decision is based on 18 NYCRR 387.17.

**2.  MISSED INTERVIEW - APPLICATION**

You recently applied for SNAP benefits. In order for us to see if you can get SNAP benefits, you must be interviewed. You were scheduled for an interview on \_\_\_\_\_, but you missed that interview.

**You must be interviewed, or you will be denied SNAP benefits.**

Please call us at \_\_\_\_\_ to set up another interview.

This decision is based on 18 NYCRR 387.7.

**3.  MISSED INTERVIEW - RECERTIFICATION**

We recently told you that you must apply if you want continued SNAP benefits. In order for us to see if you can continue to get SNAP benefits, you must be interviewed. You were scheduled for an interview on \_\_\_\_\_, but you missed that interview.

**You must be interviewed, or your SNAP benefits will be discontinued as of \_\_\_\_\_.**

Please call us at \_\_\_\_\_ to set up another interview.

This decision is based on 18 NYCRR 387.7.

**NOTE:** You have the right to request that the SNAP in-office interview be waived in hardship situations. Hardship generally includes, but is not limited to, illness, transportation difficulties, care of a household member, hardship due to residency in a rural area, prolonged severe weather, or work or training hours that prevent you from coming in during regular office hours.

**SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)  
REQUEST FOR CONTACT/MISSED INTERVIEW**

NOTICE DATE:		NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE			
CASE NUMBER	CIN NUMBER				
CASE NAME (And C/O Name if Present) AND ADDRESS					
<div style="border: 1px solid black; height: 100px; width: 100%;"></div>			GENERAL PHONE NO. FOR QUESTIONS OR HELP _____		
			OR Agency Conference _____		
			Record Access _____		
			Legal Assistance information _____		
OFFICE NO.	UNIT NO.	WORKER NO.	UNIT OR WORKER NAME	PHONE NO.	

In order for us to see if you can get or continue to get SNAP benefits, please see the checked () box below:

**1.  REQUEST FOR CONTACT**

We recently received information about a change in your household. In order for us to make sure you can still get SNAP benefits, we need the following:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In order for us to make sure you can still get SNAP benefits, we need you to contact us by \_\_\_\_\_ to provide the information/documentation requested above.

**If you do not contact us by this date, your SNAP benefits may be reduced or stopped.**

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**You must be interviewed, or your SNAP benefits will be discontinued as of \_\_\_\_\_.**

Please call us at \_\_\_\_\_ to set up another interview.

This decision is based on 18 NYCRR 387.7.

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**SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)  
REQUEST FOR CONTACT/MISSED INTERVIEW**

NOTICE DATE:		NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE			
CASE NUMBER	CIN NUMBER				
CASE NAME (And C/O Name if Present) AND ADDRESS					
<div style="border: 1px solid black; height: 100px; margin: 5px;"></div>		GENERAL PHONE NO. FOR QUESTIONS OR HELP _____			
		OR Agency Conference _____			
		Record Access _____			
		Legal Assistance information _____			
OFFICE NO.	UNIT NO.	WORKER NO.	UNIT OR WORKER NAME	PHONE NO.	

In order for us to see if you can get or continue to get SNAP benefits, please see the checked () box below:

**1.  REQUEST FOR CONTACT**

We recently received information about a change in your household. In order for us to make sure you can still get SNAP benefits, we need the following:

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In order for us to make sure you can still get SNAP benefits, we need you to contact us by \_\_\_\_\_ to provide the information/documentation requested above.

**If you do not contact us by this date, your SNAP benefits may be reduced or stopped.**

This decision is based on 18 NYCRR 387.17.

**2.  MISSED INTERVIEW - APPLICATION**

You recently applied for SNAP benefits. In order for us to see if you can get SNAP benefits, you must be interviewed. You were scheduled for an interview on \_\_\_\_\_, but you missed that interview.

**You must be interviewed, or you will be denied SNAP benefits.**

Please call us at \_\_\_\_\_ to set up another interview.

This decision is based on 18 NYCRR 387.7.

**3.  MISSED INTERVIEW - RECERTIFICATION**

We recently told you that you must apply if you want continued SNAP benefits. In order for us to see if you can continue to get SNAP benefits, you must be interviewed. You were scheduled for an interview on \_\_\_\_\_, but you missed that interview.

**You must be interviewed, or your SNAP benefits will be discontinued as of \_\_\_\_\_.**

Please call us at \_\_\_\_\_ to set up another interview.

This decision is based on 18 NYCRR 387.7.

**NOTE:** You have the right to request that the SNAP in-office interview be waived in hardship situations. Hardship generally includes, but is not limited to, illness, transportation difficulties, care of a household member, hardship due to residency in a rural area, prolonged severe weather, or work or training hours that prevent you from coming in during regular office hours.

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

Case Number: \_\_\_\_\_

Case Name: \_\_\_\_\_

**Notice of Denial of Expedited Supplemental Nutrition Assistance Program (SNAP)  
or Inability to Issue Supplemental Nutrition Assistance Program Benefits**

The Agency's decision(s) regarding your application(s) is/are explained below next to the checked () box(es).

We have determined your household is not eligible for Expedited Supplemental Nutrition Assistance Program (SNAP) service because:

You do not meet any of the following criteria for Expedited SNAP service:

- Your household's total income for the month must be less than \$150 and total liquid resources must not exceed \$100; or
- Your household's total expenses must be more than your total income and liquid resources; or
- You are a destitute migrant or seasonal farm worker with no more than \$100 in liquid resources.

You failed to comply with an initial eligibility interview within seven days after filing of application.

Although you do not qualify for Expedited SNAP service, you may still be eligible for regular monthly SNAP benefits. A denial of Expedited SNAP service does not affect your eligibility for SNAP benefits. You will be notified in writing within 30 days of the date you filed your application about your eligibility.

You will get regular SNAP benefits this month under Case Number \_\_\_\_\_.

You are ineligible due to program rules:

The law(s) and/or regulation(s) allowing us to do this is/are: NYCRR § 387.8, § 387.9, § 387.14 and/or § 387.15.

We have determined your household is eligible for SNAP benefits under the Expedited SNAP service criteria. However, these benefits cannot be issued at this time because your identity cannot be verified. Benefits will be released when your identity is verified.

We have determined your household is eligible for SNAP benefits under the Expedited SNAP service criteria. However, the last time we gave you SNAP benefits was on an expedited basis, pending outstanding documentation, which you failed to submit. As a result, these benefits cannot be issued to you until you submit all the outstanding documentation. When we receive the outstanding documentation, we will use that to determine your SNAP benefit amount and your benefits will be released at that time.

The law(s) and/or regulation(s) allowing us to do this is/are: NYCRR § 387.8 (3) and 7CFR 273.2 (i)(iv).

Authorized by \_\_\_\_\_

Date \_\_\_\_\_

Fecha: \_\_\_\_\_

Número del Caso: \_\_\_\_\_

Nombre del Caso: \_\_\_\_\_

### Aviso de Rechazo de Servicio Acelerado del Programa de Asistencia de Nutrición Suplementaria (SNAP) o Incapacidad de Expedir Beneficios del Programa de Asistencia de Nutrición Suplementaria

La(s) decisión(es) de esta Agencia con respecto a su(s) solicitud(es) se explica(n) más abajo junto a la(s) caja(s) marcada(s) ().

Hemos determinado que su hogar no tiene derecho a recibir servicio Acelerado del Programa de Asistencia de Nutrición Suplementaria (SNAP) porque:

Usted no cumple ninguno de los siguientes requisitos para servicio Acelerado del SNAP:

- El ingreso mensual total de su hogar tiene que ser menos de \$150 y sus recursos monetarios disponibles no deben sobrepasar los \$100. 0
- El total de los gastos de su hogar tiene que ser más que su ingreso total y recursos líquidos; 0
- Usted es un trabajador itinerante o agrícola temporal que no posee más de \$100 en recursos líquidos.

Usted no cumplió con la entrevista inicial de elegibilidad dentro de siete días tras haber presentado solicitud.

Aunque usted no cumple los requisitos para recibir servicio Acelerado del SNAP, puede que sí tenga derecho a beneficios normales y mensuales del SNAP. El rechazo de servicio Acelerado no afecta su derecho a beneficios del SNAP. Se le notificará por escrito con respecto a su elegibilidad dentro de 30 días a partir de la fecha en que usted presentó su solicitud.

Usted recibirá beneficios normales del SNAP este mes bajo el Núm. de Caso \_\_\_\_\_.

Usted es inelegible debido a las reglas del programa:

La(s) disposición(es) legal(es) y reglamentaria(s) que nos permiten obrar de tal forma es/son: 18NYCRR § 387.8, §387.9, § 387.14 and/or § 387.15.

Hemos determinado que su hogar cumple los requisitos para el Servicio Acelerado del SNAP. Sin embargo, actualmente estos beneficios no se pueden expedir porque su identidad aún no ha sido comprobada. Una vez se compruebe su identidad, los beneficios serán expedidos.

Hemos determinado que su hogar cumple los requisitos para el servicio Acelerado del SNAP. Sin embargo, en el último servicio Acelerado del SNAP, usted no presentó la documentación solicitada. Por consiguiente, los beneficios en cuestión no pueden expedirse hasta que usted presente dicha documentación. Al recibirla, esta documentación nos servirá para determinar la cantidad de beneficios del SNAP que le corresponde. Luego procederemos a expedir dichos beneficios.

La(s) disposición(es) legal(es) y reglamentaria(s) que nos permiten obrar de tal forma es/son: 18NYCRR § 387.8 (3) and 7CFR 273.2 (i)(iv).

Autorizado por \_\_\_\_\_

Fecha \_\_\_\_\_