

# Operations Memorandum - Administrative

## OPS080101

01/23/08

**SUBJECT:** Introduction of Revised Semiannual Reporting (SAR) Form and Late/Incomplete Notice (L/IN)  
**TO:** Executive Directors  
**FROM:** Joanne Glover, Director, Bureau of Operations

### Purpose

To introduce to the County Assistance Offices (CAOs) the revised SAR (PA 564) and the L/IN (PA 564A). The revised forms are:

- pre-populated with data from the Client Information System (CIS);
- designed to allow recipients to verify the information or communicate changes on the forms.

The first pre-populated SAR forms for the January 2008 reporting month will be mailed on January 30, 2008.

### Discussion

When semiannual reporting replaced monthly reporting, only the name changed on the existing forms. The United States Department of Agriculture, Food and Nutrition Service, approved those forms for the Food Stamp Program for interim use only. Additional categories, including all TANF and most Medicaid categories, are now enrolled in SAR. Changes have been made to the SAR and L/IN forms to accommodate these changes and to make reporting changes easier for recipients.

Semiannual Reporting Form – [Refer to Attachment #1](#).

The SAR form is pre-populated with the information the recipient is required to review. The following chart describes:

- the information that is pre-populated; and
- the CIS screen where the information is found.

**NOTE:** It is very important to maintain current employment, income and resource information on CIS at all times. If incorrect information on CIS is pre-populated on the SAR forms, it is possible that the client may receive a form listing income and resources

that are no longer valid and current information may not be listed due to space limitations.

Question:	Pre-populated information:	Found on CIS screen:
1. These are the household members you last reported to be living in your household.	Line Number  First Name  M.I.  Last Name  Appellation  Birth Date	CQBMEM
2. These are the household members you last reported to be working and where they worked.	Line Number  First Name  Employer  Date Employment Began	CQWAGE
3. Provide proof of all work income any household member received in the month of:	Reporting Month	Based on SAR date
4. These are the household members you last reported to have income from a source other than work or public assistance.	Line Number  First Name  Type of Income  Amount of last reported unearned income	CQUNRD
6. This is the last reported amount of child support paid for children <u>outside</u> the household.	Total amount of support last reported paid	CQSSPT
7. This is the information you last reported about child care or for care of a sick or disabled person.	Line Number  Provider of care  Person paid for  Total amount last reported	CQDEPT

8. These are the household members you last reported to have resources, including vehicles.	Line Number	CQPERS
	First Name	CQVEHL
	Resource Type	
	Total Value	
	Amount Owed	
	Resource Description	

Question #5 is not pre-populated as it asks for address and utility/shelter costs. The recipient will answer yes or no, and may provide verification of changes.

The number of questions tracked and their placement on the form is changed and the CCMRTK tracking screen has changed accordingly (see [Attachment #2](#)). The CAO checks questions not answered and/or verified as incomplete on the SAR form.

**NOTE:** If the recipient has established good cause for not completing or returning the SAR form, the CAO should narrate the reason for granting good cause. A Good Cause tracking line no longer exists on the new SAR form.

Recipients will answer all questions and list any changes from the information printed on the SAR form. The SAR process has not changed. The SAR process is described in Chapter 23 of Using CIS.

Generation of Late/Incomplete Notice – [Refer to Attachment #3](#)

When the SAR form is not returned or is returned late or incomplete, the L/IN form is sent. The L/IN serves as the advance notice to close for the cash and FS programs. The L/IN includes:

- Questions from the SAR that were not answered along with the pre-populated information as it appeared on the SAR form.
- The extended due date by which the time the L/IN must be in the CAO.

**NOTE:** The L/IN does not serve as an advance notice for the Medical Assistance program. To close or change a Medical Assistance program based on the SAR process, an advance notice must be initiated by the CAO. Refer to [MEH 377.4, Advance Notice PA/MA – 162A.](#)

Question #1 will always be printed and pre-populated on the L/IN for use as a reference for the recipient to answer other questions. If this question was not answered

or completed by the recipient, the question 'Did anyone move into or out of your household?' will also appear on the L/IN.

The completion of the tracking screen based on the information provided on the SAR form will directly impact the information on the L/IN. For example:

If all questions are incomplete:

Check the **ALL** box on the SAR form and on the CCMRTK screen and all questions and pre-populated data from the SAR form will be printed on the L/IN.

If the SAR form is not signed:

Check the **UNSIGNED** box on the SAR and on the CCMRTK screen. The L/IN will tell the client "You did not sign your semiannual reporting form. Please sign the certification section and return the form."

1. Did any household member move into or out of your household? If yes, list who and their relationship to the household.

Question #1 asks for report of household composition changes. **Block 1** is checked if question #1 is not answered or incomplete. There is no longer a requirement to track verification for this question and the caseworker should initiate contact with the recipient as needed.

2. Did any household member start a new job, change a job, or stop working? If yes, list any changes (such as job start date, end date, date of first pay, how often paid). Provide proof (Examples: pay stubs, employer statements, etc.)

Question #2 asks for report of employment changes. **Block 2** is checked if question #2 is not answered and both the question and the pre-populated data are printed on the L/IN. If the recipient reports changes, verification must be provided. **Block 2V** is checked if proof of changes is inadequate or not attached, and the statement 'You did not provide proof of any changes' is printed. If both **Block 2 and 2V** are checked, the question and the pre-populated data will be printed on the L/IN.

3. Provide proof (pay stubs, employer statements, etc.) of all work income any household member received in the month of [reporting month]:

Question #3 asks for report of earned income. If a household member has earned income in the reporting month, proof must be provided. If all proof is not provided or is inadequate, **Block 3V** is checked and the following statement is printed on the L/IN: 'You did not provide proof of any changes.'

4. Did any household member lose or start receiving income or have a change in

income? If yes, list any changes. Provide proof (Examples: award letter, support court orders, etc.)

Question #4 asks for report of unearned income changes. **Block 4** is checked if question #4 is not answered and both the question and the pre-populated data are printed on the L/IN. If the recipient reports changes, verification must be provided. **Block 4V** is checked if proof of changes is inadequate or not attached, and the statement 'You did not provide proof of any changes' is printed. If both **Block 4 and 4V** are checked, the question and the pre-populated data will be printed on the L/IN.

5. Is the address on this form your current address? If no, what is your new address? Provide proof (Examples: lease, landlord statement, deed, etc.)

If you receive food stamps and you have moved, what are your shelter (rent/mortgage) and utility costs? Do you pay for your own heating and/or air conditioning?

Question #5 asks for report of address change. **Block 5** is checked if the question is not answered, and Question #5 is printed on the L/IN. This question is not pre-populated, but the recipient has space to provide a new address. The portion of the question regarding shelter and utility costs does not need to be answered or verified and will not be tracked. Recipients are advised in the Instructions section that if this information is not provided, it may result in less or no food stamps.

6. Did any household member have a change in the amount he is required to pay? If yes, list any changes. Provide copy of support court order or letter and proof of payment.

Question #6 asks for report of amount of support paid for children outside the household. This question is not required to be tracked and has no corresponding block on the SAR form. Recipients are advised in the Instructions section that changes in support paid will affect food stamp benefits and that they may receive less or no food stamps if this information is not provided and verified. This question will only appear on the L/IN if the SAR form is not received or if the **ALL** box is checked on the SAR form.

7. Are there any changes? If yes, list any changes. Provide a copy of bill or statement from caregiver.

Question #7 asks for report of amount paid for child care or for care of a sick or disabled person. Recipients are advised in the Instructions section that changes in support paid will affect food stamp benefits and that they may receive less or no food stamps if this information is not provided and verified. This question will only appear on the L/IN if the SAR form is not received or if the **ALL** box is checked on the SAR form.

8. Has the information in this section changed? Does any household member have resources not listed above? If you answered yes to either question, list any

changes. Provide proof (Examples: copy of bank statement, vehicle registration, etc.)

Question #8 asks for report of household resources. **Block 8** is checked if the recipient does not answer either or both questions.

**EXCEPTION:** Do not check this question incomplete regardless of the answers, if resource information is not required in the eligibility determination according to [MEH 340.1, General Policy.](#)

Question #8 and the pre-populated information are printed on the L/IN. If required changes are reported, proof of resource changes must be provided. **Block 8V** is checked if the proof of changes is inadequate or not attached, and the statement 'You did not provide proof of any changes' is printed. If both **Block 8 and 8V** are checked, the question and the pre-populated data will be printed on the L/IN.

**REMINDER:** Always narrate any incomplete verification. This will make it easier for CAO and Change Center staff to assist recipients with any questions on what information must be provided.

#### Replacing a SAR or L/IN form

At this time the pre-populated SAR and L/IN forms cannot yet be reproduced at the CAO. Until the system enhancement to allow CAOs to print pre-populated forms is complete, a temporary version of the forms asking recipients to list the information will be available on the OIM Home Page as a 'CAO Resource'. The questions on these forms have been modified since there will be no pre-populated information provided. These forms ask recipients to verify changes in information that is not printed on the form. When a recipient asks for a replacement form, the CAO will:

- Print a SAR or L/IN from CAO Resources <http://oimweb/resources/CAOResourcesIndex.htm>
- Write client name, case record number and Reporting Month on the form (NOTE: Please put the case record number on each page of the form. This will allow tracking of information received in the event that a recipient neglects to return all pages.)
- Give or mail the form to the recipient and always include an envelope with the CAO return address.

If a pre-populated form is needed for an appeal or fair hearing, the CAO must call the CIS Hotline and request a replacement form. CAOs will be notified when the capability to print pre-populated forms is available.

#### **Next Steps**

1. Review this Operations Memorandum with appropriate staff.
2. Any questions regarding this memo should be directed to your Area Manager.
3. Blank revised SAR and L/IN forms with all questions will be available on DocuShare.
4. An alternate version of both forms will be available as a CAO Resource on the OIM Home Page.
5. Notification will be provided when Spanish versions of the SAR and L/IN are available.
6. Retain this Operations Memorandum until Handbooks are updated.