



COMMONWEALTH of VIRGINIA

DEPARTMENT OF SOCIAL SERVICES

February 27, 2015

Supplemental Nutrition Assistance Program Manual - Volume V

Transmittal #16

This transmittal contains provisions to implement use of the National Directory of New Hires (NDNH) for the Supplemental Nutrition Assistance Program (SNAP). Section 4013 of the Agricultural Act of 2014 requires that SNAP cases be matched against the NDNH, ideally before cases are certified.

This transmittal reinstates a requirement to send an action request form to SNAP households that fail to submit an interim report timely. We are reinstating this action in response to revised guidance from the Food and Nutrition Service.

This transmittal also includes clarifications and corrections.

The provisions of this transmittal are effective February 1, 2015.

The SNAP manual and this transmittal are available at <https://jupiter.dss.state.va.us/FoodStampManual/mainpage.jsp>.

Changes are noted for the following sections:

Chapter	Significant Changes
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Table of Contents

Pages i-ii The manual Table of Contents was revised.

Part III

Page i The Table of Contents for Part III was revised.

Pages 13-15

A new section was added to the Computer Matching Requirements chapter for the NDNH. Data provided by the NDNH match must be independently verified.

Chapter	Significant Changes
Part VII Pages 1-2	Shelters for battered women and children are now addressed as shelters for persons fleeing domestic violence. SNAP eligibility is not limited to women and children fleeing domestic violence.
Appendix I Pages 1-2	The amount for a countable work credit was updated to \$1220 per quarter.
Part XIII Pages 1-2	Shelters for battered women are now addressed as shelters for persons fleeing domestic violence.
Part XIV Pages 13-16	The process for assessing interim report forms was revised. The Interim Report Form – Request for Action must be provided when households fail to return the interim report. Transmittal 15 included instructions to provide the action request only when households submitted an incomplete interim report.
Part XV Pages 1-2	Pages with incorrect dates issued with Transmittal 15 are reissued. These pages contain no other changes.
Part XVII Pages 7-8	Provisions for compromising the amounts owed on claims was revised. The reduced amount must be reflected as a payment on the claim.
Part XIX Pages 5-6	Clarification was added to address local involvement in validating appeals. Case action information must be provided within five business days after appeals staff advise that an appeal has been filed.
Pages 9-12	Hearings officers must provide copies of decisions that reverse actions of local departments of social services to regional program consultants. Reversed decisions, in addition to a review of client complaints and application processing statistics, provide a more thorough review of SNAP access in a locality.
	Local departments of social services must provide documentation to the hearing officer to show that hearing decisions have been implemented. Documentation is dependent on case circumstances and could be

Chapter	Significant Changes
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represented by approval of an application, establishing a claim, providing restoration of benefits, etc.

Clarification was added for submitting a Referral for Administrative Disqualification Hearing. The referral must be submitted no later than 15 days after issuing the Notification of Intentional Program Violation.

Part XXIV

Pages i-ii

The Table of Contents was revised.

Pages 67-69

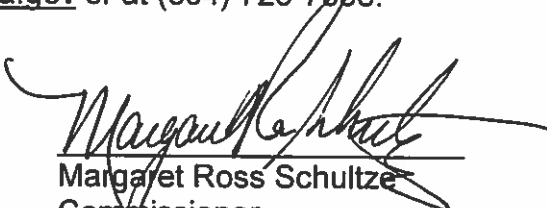
The Interim Report Form – Request for Action was revised. This form must be sent to households that fail to submit interim report forms timely or to households that submit incomplete interim reports.

Part XXV

Pages 13-16

Categories of social or supportive services have been reduced from four to three. The medical and dental category was removed. The list of allowable expenses was expanded and renamed.

Questions about this transmittal should be directed to regional program consultants or to Nikole Cox at nikole.cox@dss.virginia.gov or at (804) 726-7938.



Margaret Ross Schultze
Commissioner

Attachment

ABBREVIATIONS/ACRONYMS

DEFINITIONS

PART I INTRODUCTION

- A. Purpose of the Supplemental Nutrition Assistance Program (SNAP)
- B. History of the Supplemental Nutrition Assistance Program
- C. Benefit Issuance and Use
- D. Personnel and Office Operations
- E. Nondiscrimination
- F. Collection of Racial/Ethnic Group Data
- G. Retention of Records
- H. Disclosure of Information
- I. Program Informational Activities
- J. **Family Assessment**
- K. Prudent Person Concept
- L. PRE-APPLICATION ELIGIBILITY DETERMINATION/DISCUSSION PROHIBITED

APPENDIX I - FIPS Code Directory

APPENDIX II - VIRGINIA DEPARTMENT OF SOCIAL SERVICES PRACTICE MODEL

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- B. Filing an Application
- C. Household Cooperation
- D. Interviews
- E. Normal Processing Standard
- F. Delays in Processing
- G. Joint Processing and Categorical Eligibility

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I. Certification Notices

APPENDIX I - Voter Registration

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B. Responsibility for Obtaining Verification

C. Documentation

D. Verification at Recertification

E. Verification during the Certification Period

F. **Computer Matching Requirements**

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A. Certification Periods

B. Notice of Eligibility, Denial or Pending Status

C. Recertification

D. Changing the Length of the Certification Period

PART V EXPEDITED SERVICES

A. Entitlement to Expedited Service

B. Identifying Households Needing Expedited Service

C. Processing Standards

D. Verification Procedures for Expedited Service

E. Certification Procedures for Expedited Service

F. Destitute Migrant or Seasonal Farmworker Households

PART III VERIFICATION/DOCUMENTATION

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F. COMPUTER MATCHING REQUIREMENTS

Part III.B assigns households primary responsibility for providing verification except in verifying unearned income that is otherwise available through computer matching. In addition to using record systems to verify unearned income, matches of systems against SNAP applicants and recipients must routinely be made to verify the accuracy of information presented by households.

1. Systems of Records

The chart below identifies the systems through which inquiries must be made and whether independent or secondary verification must be sought before acting on the information presented through the records system.

Systems of Records – Application Match	
Source	Independent/Secondary Verification?
Automated Program to Enforce Child Support (APECS) <ul style="list-style-type: none"> • Support Paid • Support Received 	<p>No</p> <p>No</p>
Electronic Disqualification Recipient System (eDRS)* <ul style="list-style-type: none"> • Disqualified recipients for an intentional program violation (IPV) and determining the length of an IPV penalty 	<p>Yes</p>
State Verification Exchange System <ul style="list-style-type: none"> • Death Match • Prisoner Match** • Social Security Number Match • Unearned Income received through SSA • Work Credits 	<p>Yes</p> <p>Yes</p> <p>No</p> <p>No</p> <p>No</p>
Virginia Employment Commission (VEC) <ul style="list-style-type: none"> • Earnings • Unemployment Benefits 	<p>Yes</p> <p>No</p>

* Assessment is optional for minors.

**Assessment must be made of incarceration periods of more than 30 days for adults.

Other systems of records are available for specific inquiry. Caseload matches are not required. The chart below identifies the systems through which inquiries may be made.

Systems of Records – Specific Inquiry	
Source	Independent/Secondary Verification?
State Online Query – Internet (SOLQ-I) -SSA Benefits	<p>No</p>

Systems of Records – Specific Inquiry (continued)

Source	Independent/Secondary Verification?
Beneficiary Data Exchange (BENDEX)	
-SSA Benefits	No
Systematic Alien Verification for Entitlement (SAVE)-Immigration Status	No
State Data Exchange (SDX)-SSI Files	No

Frequency of Matches

All systems screenings, except inquiries through SVES, must occur before the approval of applications, reapplications, or recertification/renewals for each household member, as appropriate. Delayed screening for SVES may result in an agency-caused overpayment however.

For eDRS, screenings must occur before the approval of all applications - initial application, reapplication, or recertification/renewal, and when new adult members are added during the certification period.

Screenings must also occur for the interim report evaluation except for eDRS. The SVES match must occur for the interim evaluation for elderly/disabled households certified longer than 12 months as the screening must occur at least once every 12 months for these households. For all other households, SOLQ-I may be used for the interim report evaluation.

Independent/Secondary Verification

The agency must assess the results of system queries and include information obtained through the inquiries in the evaluation of the case. The agency must resolve discrepancies noted between the application and system screenings before processing applications or completing the interim evaluation.

Information provided by system queries may be used in SNAP cases without additional verification if the information is provided by the source that also generates the information. The agency must obtain additional verification of information that is not generated by the source of such information.

2. Periodic Matches

The Virginia Department of Social Services may occasionally match the caseload or a portion of the caseload against other databases. These matches may be used to determine the continued eligibility of households or individual members. These matches may include:

- Virginia Department of Corrections (DOC) – **weekly** listing accessible through the Data Warehouse of persons in the custody of DOC the previous month. The DOC listing does not establish current status so contact with the household is encouraged before taking action. It is recommended to access the report at least once every six months.
- Public Assistance Reporting Information System (PARIS) – quarterly listing accessible through the Data Warehouse of persons receiving assistance in more than one state simultaneously. Resolve the information generally within 30 days of receipt.

3. Income Eligibility Verification System (IEVS)

The Income Eligibility Verification System (IEVS) provides information by running matches of the client population against the files of other state and federal agencies. IEVS matches are not run for SNAP-only cases. If there is an associated SNAP case when the match is run for TANF or Medicaid, the information is presented for the SNAP case. Matches include:

- Social Security Administration for earnings information from the Benefit Exchange Earnings Records (BEERS);
- Internal Revenue Service for unearned income, such as interest income (RES).

The agency must obtain independent verification of information obtained from IEVS by contacting the household or the appropriate source of the income or resource. If the agency opts to contact the household, informally contact the household, informing of the information received, and requesting that the household respond within 10 days. If the household fails to respond in a timely manner, the agency must follow up on the information to report the impact on the benefit at recertification or the interim evaluation if the electronic record and Benefit Impact Statement are still available. If the report indicates that the household would be over the allowable gross income level, the agency must send the Request for Contact, as allowed by Part XIV.A.2.d.

The agency may contact the appropriate source of the information. Once independent verification is provided, either by the household or source, the agency must properly notify the household of the action it intends to take and provide the household with an opportunity to request a fair hearing prior to any adverse action.

4. National Directory of New Hires (NDNH)

A match of Social Security Numbers of SNAP household members will occur with the NDNH. NDNH matches will be submitted on a monthly or quarterly basis. Workers will be notified of available match results through Alerts, including unmatched Social Security Numbers that must be resolved. Results will be provided for:

- **New Hire information;**
- **Quarterly Wage; and**
- **Unemployment Insurance.**

The NDNH match is required to determine eligibility and benefit levels for all new, reapplication, and recertification applications.

Data received through the NDNH must be independently verified.

If there is a delay in obtaining sufficient verification or to accommodate expedited processing time frames, continue processing the application. Upon receipt of subsequent match data or verification that establishes a household's ineligibility or incorrect benefit amount, the local department of social services must terminate or reduce benefits, as appropriate, and establish a claim to collect overpaid benefits.

- c. Disabled or blind individuals who are residents of a public or private, nonprofit residential setting that serves no more than sixteen residents. These group living arrangements must be certified by an appropriate agency of the state or locality under Section 1616(e) of the Social Security Act and regulations based on it. See Part VI.E for a discussion of this group living arrangement.
 - d. **Individuals** temporarily residing in a shelter for **those fleeing domestic violence**. A shelter for **individuals fleeing domestic violence** refers to a public or private nonprofit residential facility that serves **individuals fleeing domestic violence and their children**. If such a facility serves other individuals, a portion of the facility must be set aside on a long-term basis to serve only **those fleeing domestic violence and their children**.
 - e. Residents of public or private nonprofit shelters for homeless individuals.
- D. STRIKERS (7 CFR 273.1(g)(1))
1. Definition of a Striker
- a. For SNAP purposes, a striker is defined as:
 - 1) Anyone involved in a strike; or,
 - 2) Anyone involved in a concerted stoppage of work by employees (including a stoppage by reason of the expiration of a collective bargaining agreement); or,
 - 3) Anyone involved in any concerted slowdown (or other concerted interruption of operations by employees).
 - b. Examples of non-strikers include:
 - 1) Employees whose workplace is closed by an employer in order to resist demands of employees, e.g., lockout.
 - 2) An individual who would have been exempt from work registration on the day prior to the strike, other than those exempt solely on the grounds that they are employed at the struck plant, e.g., the individual may be the caretaker of a child under 6 years of age and, therefore, would not be affected by the striker provisions.
 - 3) Employees unable to work as a result of striking employees, e.g., striking newspaper pressmen preventing newspapers from being printed and, consequently, truck drivers are not working because there are no papers to deliver.
 - 4) Employees who are not part of the bargaining unit on strike who do not want to cross a picket line due to fear of personal injury or death.

2. Determining Striker Eligibility at Initial Certification

Households with striking members (this does not include individuals exempt from work registration) shall be ineligible to participate unless the household was eligible immediately prior to the strike. This means that the EW must determine the household's income as though the household applied on the day before the strike for all individuals in the household on that date. Do not account for changes between this date and the date of application in the eligibility determination. For example, if an individual was in the home on the day before the strike, receiving \$100 per month, and on the date of application this individual is no longer in the home, eligibility must still be based on this individual being in the home and the income he or she was receiving. Also, in considering the striker's income as though the household applied on the day before the strike, if the striker was absent from work for one week due to sickness, for example, a full month's income is still to be counted. Normal verifications must be obtained (FNS Policy Memo 82-4).

If the household would have been ineligible had they applied the day before the strike, deny the application.

If the household would have been eligible had they applied the day before the strike, the EW must compare the striking member's income before the strike to the striker's current income. Add the higher of the two to the current income of members who are not on strike that is anticipated to determine the household's eligibility at the time of application.

Use only current resources in determining resource eligibility.

Strikers who are eligible are subject to the work registration requirements of Part VIII.A.

3. Determining Striker Eligibility for Ongoing Cases

If a member of a currently certified household becomes involved in a strike, the definition of a striker described in Part VII.D. is still applicable. The household containing a person defined as a striker shall not receive an increased allotment as the result of a decrease in income of the striking member(s). The EW shall compare the striker's income before the strike to the striker's current income and add the higher of the two to the countable income of nonstriking members.

Use only current resources in determining resource eligibility.

Strikers who are eligible are subject to the work registration requirements in Part VIII.A.

4. Changes in Striker Status

If a striker officially terminates employment with the struck employer, he/she will no longer be considered a striker. The employer or other acceptable sources must verify an official termination.

If a striker accepts temporary employment with the intent of returning to his struck job once the strike ends, he is still considered a striker.

SSA Quarters of Coverage Verification Procedures for Legal Immigrants

Individuals who are not citizens of the U.S. may be eligible for SNAP benefits depending on their immigration status. (See Part VII.F.1.) One of the eligible classes requires that the immigrant must be credited with 40 quarters of work. This appendix contains the process for determining the number of qualifying quarters with which an individual can be credited.

To determine the number of quarters available to an eligible immigrant household member, the EW must obtain answers to the following questions:

1. How long has the applicant, the applicant's spouse, or the applicant's parents (before the applicant turned 18) lived in the U.S.?
2. How many years has the applicant, the applicant's spouse, or the applicant's parents (before the applicant turned 18) commuted to work in the U.S. from another country before coming to the U.S. to live, or worked abroad for a U.S. company or in self-employment while a legal resident of the U.S.?

(If the total number of years to both questions is less than 10 years, the agency does not need to ask question 3 because the 40-quarter standard cannot be met.)

3. In how many of the years reported in answer to question 1, did the applicant, the applicant's spouse, or the applicant's parent earn money through work?

(To determine whether the applicant's earnings were sufficient to establish "quarters of coverage" in those years, the agency should refer to the income chart included in this appendix.)

If the answer to question 3 is 10 years or more, the EW must verify, from USCIS documents or other documents, the date of entry into the country for the applicant, spouse and/or parent. If the dates are consistent with having 10 or more years of work, an inquiry through SVES must be made.

Information received through SVES will not report earnings for the current year and possibly not the last year's earnings. The household must provide verification of earnings through pay stubs, W-2 forms, tax records, employer records, or other documents, if the quarters of this period are needed to qualify for assistance.

If the household believes the information from SSA is inaccurate or incomplete, beyond the current two-year lag period, advise the household to provide verification to the SSA to correct the inaccurate income records.

In evaluating the verification received directly from the household or through SVES, the EW must exclude any quarter, beginning January 1997 in which the person who earned the quarter received TANF, SSI, Medicaid or SNAP benefits. This evaluation also includes benefits from the Nutritional Assistance Program from Puerto Rico, the Northern Mariana Islands, or American Samoa.

Establishing Quarters

The term “quarter” means the 3-calendar-month period that ends with March 31, June 30, September 30 and December 31 of any year.

Social Security credits (formerly called “quarters of coverage”) are earned by working at a job or as a self-employed individual. A maximum of 4 credits can be earned each year.

Credits are based solely on the total yearly amount of earnings. All types of earnings follow this rule. The amount of earnings needed for each credit and the amount needed for a year in order to receive four credits are listed below.

Year	Quarter Minimum	Annual Minimum	Year	Quarter Minimum	Annual Minimum
1978	\$250	\$1000	1997	\$670	\$2680
1979	\$260	\$1040	1998	\$700	\$2800
1980	\$290	\$1160	1999	\$740	\$2960
1981	\$310	\$1240	2000	\$780	\$3120
1982	\$340	\$1360	2001	\$830	\$3320
1983	\$370	\$1480	2002	\$870	\$3480
1984	\$390	\$1560	2003	\$890	\$3560
1985	\$410	\$1640	2004	\$900	\$3600
1986	\$440	\$1760	2005	\$920	\$3680
1987	\$460	\$1840	2006	\$970	\$3880
1988	\$470	\$1880	2007	\$1000	\$4000
1989	\$500	\$2000	2008	\$1050	\$4200
1990	\$520	\$2080	2009	\$1090	\$4360
1991	\$540	\$2160	2011	\$1120	\$4480
1992	\$570	\$2280	2012	\$1130	\$4520
1993	\$590	\$2360	2013	\$1160	\$4640
1994	\$620	\$2480	2014	\$1200	\$4800
1995	\$630	\$2520	2015	\$1220	\$4880
1996	\$640	\$2560			

If a quarter for the current year is included in the computation, use the current year amount as the divisor to determine the number of quarters available.

For quarters earned before 1978:

- A credit was earned for each calendar quarter in which an individual was paid \$50 or more in wages (including agricultural wages for 1951-1955);
- Four credits were earned for each taxable year in which an individual’s net earnings from self-employment were \$400 or more; and/or
- A credit was earned for each \$100 (limited to a total of 4) of agricultural wages paid during the year for years 1955 through 1977.

A. DETERMINING HOUSEHOLD ELIGIBILITY AND BENEFIT LEVELS (7 CFR 273.10(a))

Eligibility and the level of SNAP benefits for households submitting an initial application, reapplication or recertification must be based on circumstances reasonably anticipated for the months of eligibility.

Applicant households consisting of residents of a public institution who apply jointly for SSI and SNAP benefits prior to release from the institution will have their eligibility determined for the month in which the applicant was released from the institution.

Because of anticipated changes, a household may be eligible for the month of application, but ineligible in the subsequent month. The household is entitled to benefits for the month of application even if the processing of its application results in the benefits being issued in a subsequent month. Similarly, a household may be ineligible for the month of application, but eligible in a subsequent month due to anticipated changes in circumstances. Even though denied for the month of application, the household does not have to reapply in the subsequent month. [The same application must be used for the denial for the month of application and the determination of eligibility for subsequent months, within the timeliness standards in Part II.F.]

As a result of anticipating changes, the amount of SNAP benefits for a household for the month of application may differ from the benefit amount in subsequent months. The local department of social services must establish a certification period for the longest possible period as allowed by Part IV.A.2 over which changes in the household's circumstances can be reasonably determined. The household's benefit amount may vary month to month within the certification period to reflect changes determined at the time of certification. Benefits for the initial month or a subsequent month must be prorated from the day of application, the day the household provides the last verification or takes the final action, or the day the household establishes eligibility according to Part XIII.D.

1. Household Composition

A household's membership for eligibility determination and benefit level is assessed as of the application date for the month of application or the first day of the month following entry or attachment to the household for ongoing eligibility. See Part VI for guidelines in determining household composition.

If any household member is included in another active SNAP case for the month of application, reapplication or recertification, eligibility for the remaining household members must be determined. The household member included in another case is added to the current case as soon as administratively possible.

The EW must add the individual to the gaining household for the earliest possible month after the move. However, if the person cannot be removed from the old household effective the following month, the person cannot be added to the new household until the person is deleted from the old one. For example, a member moves on June 28 and there is insufficient time to send advance notice effective July 1, so the deletion is effective August 1. A new member cannot be added to the household until the individual's income and resources have been determined and eligibility determined.

If the individual's move coincides with the gaining household's recertification, the new member is added in the same timeframes as though the change occurred during the certification period. The new member is added for the earliest possible month, and depending on the dates involved, the recertification may be processed without the new member being immediately included.

NOTE: Participation in more than one household in a month is prohibited except as noted in Part VII for people who leave a household containing a person who abused them and enter a shelter for **individuals fleeing domestic violence**.

When a household reports the loss of a member, the individual is deleted as soon as administratively possible. The EW has a maximum of 10 days to act on the change. A 10-day advance notice period must be provided if the deletion results in negative action.

When an individual is deleted from a household, the income and deductible expenses of the person must be deleted effective the same month, unless the provisions for considering income and expenses of ineligible or disqualified members are applicable.

2. Special Circumstances

The EW must evaluate issues related to changes in the age of household members if the change occurs in the month of application or the month following the application filing date. The EW must evaluate any age changes that occur during the certification period at recertification/renewal. Except for the allowance of medical expenses, issues related to changes in age must be reflected the month after the household member's birthday.

3. Income and Deductions (7CFR 273.10(c))

The EW must calculate the allotment using the household members' anticipated income and deductible expenses.

The provisions of this chapter do not generally apply to households with self-employment or contract income. Household members whose income is from self-employment (Part XII.A) or a contract (Part XII.F) will have these types of income averaged as described in the chapters cited. The income is assigned to the months over which it is averaged. If a household member's status as a self-employed person or contract employee changes, the last month to consider income from those sources is the month the change in status occurs.

Households receiving monthly or semi-monthly income, such as state or federal assistance payments, or semi-monthly pay checks, must have the income assigned to the normal month of receipt, even if mailing cycles, weekends or holidays cause the income to be received in a different month.

For the online systems used to verify child support or unemployment benefits, mailing and processing days must be added to the payment dates shown to reflect the period of receipt properly for SNAP purposes. Checks are prepared and mailed on the business day following the APECS disbursement date or the VEC warrant date. Allow two mail days to determine

Benefits would be prorated back to the date of the request for the additional information if the verification is provided on or before the 10th day instead of prorating from the date when the final element was verified.

4. Once the changed element has been verified, the new information must be factored in the benefit calculation for the month of application as well as any months that follow the application month. Eligibility and benefit level for the household must be based on the income and expenses already received/reported as well as elements that are anticipated with reasonable certainty to occur during the month.
5. There will be instances when the change will not affect the application month. Such an instance would be when there is a change in the household's composition. Part XIII.A.1 requires that household composition must be evaluated as of the application date so that any change to the household's membership would be reflected the month after the month of the change. This restriction would also include any associated changes such as calculating the income or personal deductions for a specific member.
6. The application must be denied if the household fails to verify the new elements or the items requested originally.

C. INTERIM REPORT FILING

All households must file an Interim Report by the sixth or twelfth month of the certification period unless they are exempt from filing as noted below. Household composition and financial circumstances at the time of application will be the basis of the SNAP benefit amount for the first half of the certification period unless the household reports a change during the certification period before the Interim Report period. Household composition and financial circumstances reported on the Interim Report will be the basis of the SNAP benefit amount for the remainder of the certification period unless the household reports additional changes after filing the Interim Report.

1. Exemption from Filing

Households with certification periods of six months or less are exempt from filing an Interim Report. These households may include:

- a. Households with unstable or changeable circumstances, such as homeless households and households with migrant or seasonal farm workers.
- b. Households that receive Transitional Benefits for former TANF recipients.

2. Interim Reporting Filing

Households required to file an Interim Report should have a certification period of 12 or 24 months. On or about the twentieth of each month, the Virginia Department of Social Services will generate and mail Interim Reports to certified households for which the sixth or twelfth month of the certification period is the following month.

A list of cases sent the Interim Report each month and a copy of individual reports are

available online to local departments of social services. In addition, a list of cases automatically closed for failure to submit the report timely is available online.

a. Household Responsibilities

The household must:

- Complete the Interim Report and return it to the local department of social services by the fifth day of the sixth or twelfth month. Any responsible household member or authorized representative may complete the Interim Report.
- Supply verification of changed elements.
- Provide additional information or verifications, as requested, within 10 days of the request.

b. Agency Responsibilities

The local department of social services must:

- Assess Interim Report forms returned from households for completeness, accompanied verifications and reported changes.
 - Remove all shelter expenses if the household fails to declare shelter expenses that result from a move reported on the Interim Report.
 - Give no deduction for unverified or undeclared expenses. Leave the prior child support deduction in place but remove all existing shelter expense amounts.
- Assess and act on returned Interim Report forms:
 - Interim Report forms returned on or by the 20th of the sixth/twelfth month (or the 18th or 19th of February, as appropriate), complete the assessment and reinstate the case to provide benefits timely for month seven/thirteen for eligible households.
 - Interim Report forms returned after the 20th of the sixth/twelfth month (or after the 18th or 19th of February, as appropriate), complete the assessment and reinstate the case to provide benefits within 10 days of receipt, as all other reports of changes. Workers are encouraged to take action promptly to avoid case closures and delay of benefits. (See Part XIV.A.2.)
 - Evaluate and act on completed interim report forms returned in month seven/thirteen after closure of a case. If eligible for benefits, reinstate the case without requiring the household to reapply.
 - Provide benefits, as allowed in section d. below, after determining the cause of the delay.
 - Require the household to reapply for benefits if the interim report is returned after month seven/thirteen.
- Send the *Interim Report Form - Request for Action* form:
 - **If the household fails to return a completed Interim Report timely.** Provide another Interim Report if the household requests it.
 - If the returned Interim Report is incomplete or lacks required verifications of reported income changes and the local agency is unable to obtain information from the household by telephone or

- other household contact. Send the original Interim Report to the household if information is not obtained.
- If the returned Interim Report lacks a signature. Send the original Interim Report to the household.
 - The household will have 10 days to supply information, verification, or to complete the form, even if the 10-day period expires after the case should automatically close.
 - Photocopy an incomplete Interim Report before sending the form back to the household.
 - If the household fails **to return an Interim Report** or fails to return a completed Interim Report by the ADAPT cutoff of month six/twelve, ADAPT will automatically close the case at the end of the sixth or twelfth month, as appropriate. No adequate or advance notice is needed if the household fails to submit a completed Interim Report. Neither is an adequate or advance notice needed if the household fails to take required actions or to supply requested verifications, provided the Interim Report Form - Request for Action was sent to request additional action before the closure.

Incomplete Interim Reports

The Interim Report is incomplete if:

- The Case Name, head of the household, responsible household member or authorized representative has not signed the form;
- The household fails to address changes in income, submit verification of income, or fails to note the amount of liquid resources; or
- The household fails to provide information needed to determine eligibility or benefit level, such as failing to note if changes have occurred in household composition or the address.

The worker must use reasonable judgement to determine if the Interim Report is incomplete. For example, if the household indicates that no changes have occurred for income but supplies new pay stubs, the report should not be considered incomplete. The Interim Report will not be considered incomplete if the household fails to:

- provide proof of reported changes in its child support obligation or the amount paid. or
- declare new shelter expenses that result from a move to a new residence.

c. Verification Requirements

In order to determine eligibility for the second half of a certification period, the household must provide the following:

- Proof of changed income amounts, as required by the type (\geq \$100 earned; \geq \$50 unearned) or source changes starting or stopping. The agency must request sufficient income verification that will allow a reasonable monthly estimate of the income expected to be received.

Note: The household does not need to submit verification of self-employment or contract income that has been averaged or verify exempt income or resources.

- Proof of other elements. The household may need to verify other eligibility elements reported on the Interim Report, as needed.
- d. Calculation of Benefits
The agency must:
- Determine a household's continued eligibility and benefit level effective the seventh or thirteenth month based on information provided through the Interim Report or generated through systems inquiries if the source generated and verifies the information;
 - Determine the date of receipt of the Interim Report or required verification if it is received in month seven/thirteen.
 - Determine who caused the delay. A delay will be agency-caused if agency actions contribute to a delay in the return of the Interim Report (such as an incorrect address) or if the initial request for required verification or information is delayed so that the 10-day period to return the information extends into month seven/thirteen.
 - Agency Delay: Provide benefits for month seven/thirteen in full without proration.
 - Household delay: Prorate benefits for month seven/thirteen from the date when the Interim Report is submitted or when the last required verification or information element is provided.
 - Reinstate the case in ADAPT after the evaluation of the Interim Report; and
 - Provide an adequate notice to the household, as appropriate, of ineligibility or the benefit calculation for the second half of the certification period that results from the evaluation of the Interim Report.

D. ADVANCE NOTICE OF PROPOSED ACTION

The household must receive written notice prior to any action to reduce or terminate benefits within the certification period. The advance notice period is 10 days and begins with the day following the date the notice is given or mailed to the household.

The agency may use the Notice of Action for this purpose, unless benefits in both TANF and SNAP are being reduced or terminated simultaneously. In that case, use the Advance Notice of Proposed Action. Both forms and instructions are in Part XXIV.

Neither an advance notice nor an adequate notice is necessary when (7 CFR 273.13(b)):

1. All members of the household have died.
2. The household has moved from the locality, except in those situations where the agency transfers the case or opts to retain the case as allowed by Part XIV.A.7.
3. Restoration of benefits is complete and the household had previous notification when the increased benefits would terminate.
3. The allotment fluctuates monthly due to anticipated changes and the household had prior notice at the time of certification.

A. GENERAL PROVISIONS

All individuals who are able to work must be working or actively engaged in a work activity in order to receive SNAP benefits. Unless an exemption to the work requirement exists, individuals may receive SNAP benefits for only three months during a 36-month period. After the initial three-month period (Y1 benefits), an individual may receive benefits after periods of employment, provided the regaining eligibility provisions of chapter C of this chapter are met or an exemption to the work requirement exists.

In order to receive SNAP benefits beyond three months a nonexempt able-bodied household member must:

1. work for cash wages in any amount or for in-kind goods or services for 20 hours or more per week, averaged monthly;
2. participate in and comply with requirements of an employment services program operated by the Department of Social Services, other than job search, for 20 hours or more per week or for the number of hours assigned for the work experience component as calculated by the household's allotment divided by the federal minimum wage;
3. participate in and comply with non-departmental (DSS) work programs for 20 hours or more per week;
4. serve in an unpaid, volunteer capacity for a public or private agency, at a minimum, for the number of hours that is equal to the household's allotment divided by the federal minimum wage; or
5. any combination of these activities.

If the member was unable to work, as described above, and is able to show good cause, the member will meet the work requirement as long as the absence is temporary and the member retains the job.

The 36-month period is a fixed period from the first of the month in which a household containing an individual subject to the work requirement is certified in Virginia. The 36-month period will begin and continue for any household member who is at least 18 and under 50 years of age, even if an exemption from the work requirement exists for that member at the time of certification or other case action. Tracking must be completed for all individuals within the age range, even when they are exempt.

Any month in which an affected individual receives the full benefit month as part of a certified household will count toward the three-month limit.

Months in which a household receives prorated benefits will not count toward the three-month limit. Months in which the household does not receive an allotment because benefits are prorated to zero (i.e., less than \$10) will not count toward the limit however. Months in which a certified

household is eligible to receive benefits but does not actually participate do not count toward the three-month period. Months for which a household repays benefits received erroneously also will not count toward the three-month limit once the household repays the claim in full.

For the purposes of this provision, a work program will include programs operated under the Workforce Investment Act (WIA) and the Trade Adjustment Assistance Act in addition to the agency-sponsored employment and training programs. Job search activities assigned through SNAPET or other state or local social services programs are not acceptable tasks to count toward establishing a household member's eligibility for continuing benefits beyond the initial three-month limit. Job search activities assigned through WIA will be evaluated as an acceptable task however.

An unemployed (0 work hours) or underemployed (<30 work hours) individual is not entitled to additional benefits during the balance of the 36-month period after receiving benefits for three countable months, unless the individual meets an exemption from the work requirement or meets the regaining provisions of Part XV.C. The agency must send an advance notice to participating households when a member becomes ineligible to participate further because of the work requirement. Such a household member is a disqualified household member during any period in which the individual does not meet the work requirement. See Parts VI.C and XII.E for a discussion of disqualified household members.

Ongoing households with members who are not eligible because of the work requirement must continue to report changes involving these members.

B. WORK REQUIREMENT EXEMPTIONS

The following individuals are exempt from the work requirement:

1. Any individual who is under 18 years of age or 50 years of age or older. See Part XIII.A.2.
2. Any individual who is medically certified as mentally or physically unfit for work.
3. Any adult member of a SNAP household of which a child under age 18 is part of the SNAP household.
4. A pregnant woman.
5. Any resident of an exempt locality. The exemption may be based on the unemployment rate of the locality or its identification as a Labor Surplus Area.
6. Any individual who is otherwise exempt from work registration as outlined in Part VIII.A.1.

The agency must establish the 36-month period and track the reasons for the exemption for each individual who meets an exemption other than age.

Example

A claim was established for \$1000 due to an agency error. The household requests a compromise stating an inability to pay the amount owed.

- The difference between the monthly expenses, monthly income and 10% of the resources is \$200 which is the calculated funds available for repayment.
- 10% of the available funds is \$20; ($\$20 \times 36 \text{ months} = \720), the amount the household is expected to repay in 36 months.
- \$280 is the compromised claim amount ($\$1000 - \$720 = \$280$).
- **Enter the compromised amount as a payment using the code CR.**
- The household must repay \$720.

The local department of social services must document the reason for the compromise or if the request is denied.

The local department of social services may use the full amount of the claim, including any amount compromised, to offset a restoration of lost benefits. The local department of social services may reinstate any compromised portion of the claim, if the claim becomes delinquent. The local department of social services must notify the claimant that the compromised amount may be restored to the claim balance if the claim becomes delinquent.

F. COLLECTION METHODS (7 CFR 273.18(f)&(g))

1. Allotment Reduction (7 CFR 273.18(g)(1))

A household may choose to have its SNAP benefits reduced to repay a claim. However, the local department of social services must implement allotment reduction against a participating household unless the household is making regular payments in an amount greater than the amount that could be recovered through allotment reduction.

Prior to reduction, the local department of social services must inform the household orally or in writing of the appropriate formula for determining the amount of SNAP benefits to be recovered each month and the effect of that formula on the household's allotment, i.e., the amount of SNAP benefits the local department of social services expects will be recovered each month.

For an AE or an IHE claim, the amount of the reduction must be limited to 10% of the allotment or \$10, whichever is greater, unless the household agrees to a higher amount. For an IPV claim, the amount of the reduction must be limited to 20% or \$20, whichever is greater, unless the household agrees to a higher amount. The *Repayment Agreement* must be used to document the household's request for a higher allotment.

The local department of social services may not reduce the initial month's allotment at application or reapplication unless the household agrees to the reduction. The local department of social services must document this agreement.

The local or state department of social services may not use involuntary collection methods, such as state or federal offsets, against individuals in a household that is having its allotment reduced.

2. Lump Sum Payments (7 CFR 273.18(g)(4))

The local department of social services must accept any payment for a claim, whether it represents full or partial payment. The payment may be made with cash, check, or money order. The local department of social services may accept a credit or debit card for payments if the agency has the capability to accept these types of payments. The local department of social services must retain appropriate documentation of the payment.

3. Installment Payments (7 CFR 273.18(g)(5))

The local department of social services may accept installment payments as the result of a negotiated repayment agreement. The repayment agreement must include a due date for the payments. The payments may be made by cash, check, or money order. The local department of social services may accept a credit or debit card for payments if the agency has the capability to accept these types of payments. Unless a court order prohibits it, a certified household must make installment payments in an amount that is greater than the amount that is recoverable through benefit reduction. The local department of social services must retain appropriate documentation of the payments.

If the household does not submit a payment according to the terms of its negotiated repayment agreement, the claim is delinquent and subject to additional collection actions. If the household is participating in the program, benefit reduction must be invoked.

4. Electronic Benefit Transfer (EBT) Accounts (7 CFR 273.18(g)(2))

The local department of social services must allow a household to pay its claim using benefits from its EBT account. At the household's request, this reduction may be used in addition to allotment reduction or other repayment methods. If a certified household chooses EBT account deduction as the primary collection method, the monthly payment must be greater than the amount that is recoverable through allotment reduction, unless a court order prohibits it.

The local department of social services must obtain written permission from the household in order to collect from an EBT account. The household should complete the *Repayment Agreement* form to note permission for a one-time or monthly payment from the EBT account. The agency must send the household a receipt of each transaction.

After 365 days of inactivity, the local department of social services must also use any benefits expunged from the household's EBT account of which the local department of social services is aware to offset the amount of the claim. This offset may be done at any time during the collection process. The local department of social services does not need the household's permission to apply expunged benefits to a claim but the agency must send the household a receipt to note the claim reduction. The agency may use the Request/Receipt for EBT Account Deduction as the receipt

5. Offsets to Restored Benefits (7 CFR 273.18(g)(3))

The local department of social services must reduce any restored benefits owed to a household by the amount of any outstanding claim. This offset may be done at any time during the collection process.

6. Public Service (7 CFR 273.18(g)(7))

The local department of social services may accept public service as a form of payment, but only if a court orders the public service specifically in lieu of paying the claim. The local department of social services, in conjunction with the court, should set the hourly rate for the work performed. The local department of social services must retain appropriate documentation.

7. Treasury Offset Program (7 CFR 273.18(n))

The Virginia Department of Social Services must refer eligible claims that are delinquent for 180 days or more to Treasury Offset Program (TOP) for offset against any eligible federal payment. This includes, but is not limited to, federal tax refunds, salaries of federal

G. PREPARATION FOR THE HEARING

The appeal request, upon receipt by the Hearings Manager, must be assigned to a regional hearing officer who will validate the appeal and acknowledge the request by letter to the claimant with a copy to the local department of social services and other appropriate parties. **Appeals staff will arrange with the local appeal coordinator to gather sufficient information to determine the validity of appeal requests. The local department of social services must provide validating information within five business days of the request for information.**

The local department of social services must prepare a Summary of Facts of the case and forward it to the hearing officer within five days prior to the hearing. A general outline of this summary follows, although the content may vary to fit case situations. All statements made should be factual and phrased in a way not objectionable to the claimant.

For appeals that involve work registration or SNAPET noncompliance, eligibility staff and E & T staff must prepare the Summary of Facts jointly except when a household member refuses to register.

The Summary of Facts should include the following:

1. Identifying Information:

- Name of local agency
- Name, address and case number of claimant
- Persons included in the SNAP household
- Name, age, relationship to claimant
- Other persons in household
- Name, relationship

2. Date of Request and Reason for Appeal (quote the claimant in requesting the hearing)

3. Statement of Agency Action

- a. Give a brief, factual statement of the reason for agency action, or failure to act, and the nature and date of agency action. Note if there was an agency error, negligence or administrative breakdown.
- b. Under the heading "Agency Policy", cite and quote passages from the Virginia SNAP certification manual on which agency action was based.
- c. If the level of participation is in question, give a detailed breakdown of the claimant's financial circumstances as it appears on the SNAP application with whatever explanation may be necessary.
- d. Note the date and result of an agency conference on the denial of expedited service, if appropriate.

4. State whether participation is continuing during the appeal process on the basis authorized immediately prior to the adverse action notice.

5. The Summary must be signed and dated by the agency director or designee. The local department of social services must retain a copy of the Summary, which is the official document for presentation of its case at the hearing.

The local department of social services must provide a copy of the Summary and any other documents and records which are to be used at the hearing to the claimant or representative. The summary or documents must be provided at a reasonable time prior to the date of the hearing.

If documents pertinent to the hearing are received by the local department of social services or there are changes in the situation following transmittal of the Summary, copies of the documents and a written statement of the changes must be mailed in advance of the hearing to the hearing officer. Copies of the additional information must also be made available to the claimant or representative.

During the period between the filing of the appeal and the receipt of the decision from the State Hearing Authority, the local department of social services continues to be administratively responsible for the case on appeal. This responsibility includes appropriate adjustment in eligibility status or level of participation necessitated by changes in the claimant's situation, income, changes in household composition, or changes for any other reason.

If a change in circumstances occurs during the appeal process that results in a reduction or termination of benefits, an advance notice must be sent. If the claimant fails to appeal the proposed additional change, participation will be adjusted with respect to this change in circumstances. The change must be reported to the hearing officer for consideration of possible effect on the decision.

H. RESPONSIBILITIES OF HEARING AUTHORITY (7 CFR 273.15 (i))

In preparation of the hearing, the hearing authority must consider and act on the following situations:

1. If the request for a hearing is from a household, such as migrant farm workers, that plans to move from the jurisdiction of the hearing officer, the hearing must be held as quickly as possible so a decision may be reached before the household leaves the area.
2. If the household requests postponement of the hearing, it must be granted. The postponement may not exceed 30 days. The time limit for action on the decision may be extended for as many days as the hearing is postponed.
3. If there are a series of individual requests for hearings, the appropriateness of conducting a single group hearing must be determined. The hearing officer may consolidate only cases in which the sole issue is one of State and/or federal law, regulation or policy, and with the consent of the appealing parties.

In all group hearings, the policies governing hearings must be followed. Each individual claimant must be permitted to present his own case or be represented by legal counsel or other spokesman. If the claimants request a group hearing on an issue specified in this chapter, the request must be granted.

- b) present the case or have it presented by legal counsel or other person;
 - c) bring witnesses;
 - d) establish pertinent facts and advance arguments; and,
 - e) question or refute any testimony or evidence, including the opportunity to confront and cross-examine adverse witnesses.
4. The local department of social services will have the opportunity to clarify or modify its statements contained in the Summary of Facts and to question the claimant, his representative, or witnesses on the important issue(s). The local department of social services has the same rights as the claimant to examine documents, bring witnesses, advance arguments, question evidence and submit evidence.
 5. Evidence admissible at the hearing is limited to information that is related to the issue(s) being appealed. Such issues include those given by the claimant at the time of the appeal request and those given by the local department of social services as a basis for its actions or inaction under appeal. The hearing officer must determine whether an issue, other than the one being appealed, may be introduced, but no additional issues are admissible without concurrence of the claimant and local department of social services.

L. DUTIES OF THE HEARING OFFICER

The hearing officer must:

1. Ensure that all relevant issues are considered.
2. Request, receive, and make part of the record all evidence determined necessary to decide the issues being raised.
3. Regulate the conduct of the hearing consistent with due process to ensure an orderly hearing.
4. Order an independent medical assessment or professional evaluation from a source mutually satisfactory to the household and the local department of social services if it is relevant and useful.
5. Render a decision in the name of the State Hearing Authority. Decisions must comply with regulations as stated in the Virginia SNAP Certification Manual and the Virginia EBT Policies and Procedures Guide and must be based on the hearing record. An official report containing the substance of what transpired at the hearing, the findings and conclusions of the hearing officer, together with all papers and requests filed in the proceeding, will constitute the record for the decision.
6. **Provide a copy of the decision that reverses the actions of a local department of social services to the SNAP Regional Consultant.**

M. HEARING DECISION (7 CFR 273.15(q))

An official report containing the substance of the hearing, together with the findings and conclusions of the hearing officer, and all papers filed in the proceeding, will constitute the record for the decision. The household and the local department of social services must each be notified of the decision by a copy of the written official report of the decision.

The decision of the hearing officer will be final and binding when presented in writing to the claimant and the local department of social services.

The claimant, the claimant's representative, and the local department of social services must be given written notice of the right to request a review of the hearing officer's decision by the Appeals Review Panel. The decision must be put into effect regardless of whether review by the Appeals Review Panel of the decision has been requested. In addition to the claimant's right to request a review by the Appeals Review Panel, the claimant may seek a judicial review of the decision.

The request for the Appeals Review Panel review by either party must be submitted in writing within 10 days following the date of the hearing officer's written decision with a written statement of the reasons for the objection to the decision. A copy of the review request by the local department of social services must be submitted to the claimant.

The Appeals Review Panel will make recommendations about future policy changes or the conduct of future hearings only. The claimant, the claimant's representative, and local department of social services will not be notified about the panel's recommendations.

When the decision of the hearing officer is adverse to the claimant, all available administrative remedies have been exhausted.

All hearing records and decisions are available for public inspection and copying, subject to the disclosure safeguards, provided identifying names and addresses of household members and other members of the public are kept confidential.

N. IMPLEMENTATION OF DECISIONS

All final hearing decisions must be reflected in the household's benefits within time limits specified in this section. **Local departments of social services must provide documentation to the hearing officer of compliance with hearing decisions.**

1. Decisions that result in an increase in household benefits must be reflected in the benefit amount within 10 days of the receipt of the hearing decision, even if the local agency must provide a supplementary allotment or otherwise provide the household with an opportunity to obtain the allotment outside of the normal issuance cycle. The local department of social services may take longer than 10 days if it elects to make the decision effective in the household's normal cycle, provided that the issuance will occur within 60 days from the household's request for the hearing.
2. Decisions that result in a decrease in household benefits must be reflected in the next scheduled issuance following receipt of the hearing decision. No additional notice to the household is needed.

3. When the decision of the hearing officer or Commissioner, as appropriate, determines that a household has been improperly denied program benefits or as been issued a smaller benefit amount than it was due, lost benefits must be provided to the household as allowed by Part XVI.A.
 4. When the decision of the hearing officer or Commissioner, as appropriate, upholds the action of local department of social services, a claim against the household must be prepared, as allowed by Part XVII.A for any overissuances.
- O. INTRODUCTION TO ADMINISTRATIVE DISQUALIFICATION HEARINGS (ADH) (7 CFR 273.16(e))

An Administrative Disqualification Hearing (ADH) is an impartial review by a hearing officer of a household member's actions involving an alleged intentional program violation (IPV) for the purpose of rendering a decision of guilty or not guilty of committing an IPV.

In order to request an ADH, there must be clear and convincing evidence that demonstrates that a household member committed or intended to commit an IPV as described in the Definitions section. Examples of evidence include, but are not limited to, the following:

1. Written verification of unreported income or resources received by the household;
2. Verification that the household understands its reporting requirements by its signature under the rights and responsibilities section of the application or on some other form;
3. An application or change report form submitted during the period the IPV is alleged to have occurred which omits the information in question;
4. Documented contacts with the household during the period the IPV is alleged to have occurred in which the household failed to report information in response to agency queries about household circumstances.

Each example noted above does not have to be presented to document intentionality, however, it is likely that such deliberateness can only be shown through the presentation of more than one of these evidence examples.

P. INITIATION OF AN ADH

The local department of social services must ensure that the evidence against the household member alleged to have committed the IPV is reviewed by either an eligibility supervisor or agency director to certify that such evidence warrants a referral for an ADH.

Prior to submitting the Referral for Administrative Disqualification Hearing to the State Hearing Authority, the local department of social services must provide the forms, Notification of Intentional Program Violation and Waiver of Administrative Disqualification Hearing and may provide the "Administrative Disqualification Hearings" pamphlet to the household member suspected of the IPV. To determine the appropriate disqualification period for the notification form, the agency must

access the electronic Disqualified Recipient Subsystem (eDRS) to determine the number of prior disqualifications an individual may have. The eDRS information about prior disqualifications must be verified before deciding on the length of the penalty. See Part XVII.M.2 for additional information about eDRS.

The waiver must be returned to the agency within 10 days from the date notification is sent to the household in order to avoid submission of the Referral for ADH. If a signed waiver is received, no ADH is conducted and the disqualification period is imposed in accordance with policy at Part XVII.M.1. No further administrative appeal procedure exists after an individual waives his/her right to an ADH and a disqualification penalty has been imposed. The disqualification period cannot be changed by a subsequent fair hearing decision. The household member is entitled to seek relief in a court having appropriate jurisdiction and the period of disqualification may be subject to stay or other injunctive remedy by a court of appropriate jurisdiction.

If no waiver to the ADH is received within 10 days, the local agency must submit the Referral for Administrative Disqualification Hearing to the Hearings Manager **by the 15th day following the date notification was sent to the household. The additional five days allows for possible mail delivery delays.** The form must include the following information:

1. Identifying Information as requested at the top of the form.
2. Summary of the Allegation(s).
3. Summary of the Evidence.
4. Copies of documents supporting the allegation.

The referral must be signed and dated by the supervisor or director.

If a case is referred for an ADH, it must not simultaneously be referred for prosecution. The local department of social services may combine a fair hearing and an ADH into a single hearing if the factual issues arise out of the same or related circumstances and the household receives prior notice that hearings will be combined.

If the ADH and fair hearing are combined, the agency must follow timeframes for conducting an ADH. If the hearings are combined for the purpose of settling the amount of the claim at the same time as determining whether or not the IPV has occurred, the household will lose its right to a subsequent fair hearing on the amount of the claim. However, the local department of social services must, at the household's request, allow the household to waive the 30-day advance notice period for the scheduling of the ADH when the hearings are combined.

Q. SCHEDULING THE ADH

Upon receipt of the request for the ADH, the Hearings Manager will forward the request to the appropriate hearing officer.

1. Advance Notice of ADH (7 CFR 273.16(e)(3))

The hearing officer must schedule a date for the ADH and provide written notification to the household member suspected of IPV at least 30 days in advance of the date the ADH has been scheduled. The form, "Advance Notice of Administrative Disqualification Hearing" is used for this purpose. The pamphlet that describes the ADH procedures may be sent with the advance notice.

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INTERIM REPORT FORM - REQUEST FOR ACTION

Case Name: _____

Case Number: _____

Agency: _____

Date: _____

You were required to send in a completed Interim Report to this agency by the fifth (5th) of the month for your TANF and/or your SNAP case. Please note the information checked below.

() We have not received an Interim Report form from you. Complete the Interim Report form that was sent to you. When you send the Interim Report form in, please make sure you answer every question, give us all the information the report asks for, and sign and date the report.

() The Interim Report form you submitted was incomplete. The form you submitted is attached. This form is incomplete because:

1. () You did not answer every question. Please answer the following questions:

P

2. () You did not sign and/or date the report. Please sign and date the report.

() Proof of some of the statements made on your report was missing. Please send in the following:

You must return a completed Interim Report and proof of any changes within ten (10) days. If you do not submit a completed report, your SNAP or TANF case will close. **You will not receive an additional notice** unless the information you submit changes your benefits.

If you are unable to complete the Interim Report or if you have any questions about how to complete it or what information you need to send in, please ask for help. For more information about the Interim Report process, see Part 14.C of the SNAP Manual and Section 401.3H of the TANF Manual.

If you have taken the actions listed above, please disregard this reminder.

Worker	Telephone Number	For Free Legal Advice Call 1-866-534-5243
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APPEALS AND FAIR HEARINGS

If you do not agree with the action we are proposing or the amount of benefits you are receiving, you may have a hearing on your case. You will have a chance to explain why you think we made a mistake at the hearing and a hearing officer will decide if you are right. A hearing gives you a chance to review the way a local social services agency handled your situation about your need for TANF or SNAP benefits. The hearing is a private, informal meeting at the local social services agency with you and anyone you want to bring as a witness or to help you tell your story, such as a lawyer. A representative of the local agency will be present as well as a hearing officer. The hearing officer is the official representative of the State Department of Social Services.

It is YOUR RIGHT TO APPEAL decisions of the local social services agency. If you want more information or help with an appeal, you may contact the local social services agency. It will not cost you anything to request a fair hearing, and you will not be penalized for asking for a fair hearing. If you want free legal advice, you may contact your local legal aid office.

How to File an Appeal

- Send a written request to the Virginia Department of Social Services, Attention: Hearing and Legal Services Manager, 801 East Main Street, Richmond, Virginia 23219-2901.
- Call me at the number listed on the front.
- Call 1-800-552-3431.

When to Appeal

- Within the next 30 days for TANF and within the next 90 days for SNAP benefits.
- Within 10 days of the date on this form to get the SNAP benefits continued.*
- Before the effective date of the change to get the TANF benefits continued.*

*Note that you may have to repay benefits you received during the appeal process if the hearing decision supports the agency action.

Local Agency Conference

In addition to filing an appeal, you may have a conference with your local social services agency about the denial of your entitlement to expedited SNAP benefits. During the conference, the agency must explain why you were not entitled to expedited SNAP benefits. You will have the chance to present any information where you disagree with the agency's proposed action. You may present your story by an authorized representative, such as a friend, relative, or lawyer.

Hearing Process and Decision

The hearing officer will notify you of the date and time for your hearing at the local social services agency or at a location agreeable to you and the agency. If you cannot be there on that day, call the hearing officer and your eligibility worker immediately. If you need transportation, the local agency will provide it.

At the hearing, you and/or your representative will have the opportunity to:

- Examine all documents and records used at the hearing;
- Present your case or have it presented by a lawyer or by another authorized representative;
- Bring witnesses;
- Establish pertinent facts and advance arguments; and
- Question or refute any testimony or evidence, including the opportunity to confront and cross-examine witnesses.

The hearing officer will base the decision only on the evidence and other material introduced at the hearing, except when medical information is requested or other essential information is needed. In this event, you and the local social services agency would have the opportunity to question or refute this additional information.

You will get the hearing officer's decision in writing on your appeal within 60 days of the date the State Department of Social Services receives your appeal request.

INTERIM REPORT FORM – REQUEST FOR ACTION

FORM NUMBER – 032-03-0649

PURPOSE OF FORM – To notify a household of required actions it must take for completing the Interim Report or for providing required verification.

USE OF FORM – The agency may use this form to tell households what action is needed to process the Interim Report to avoid closure of the case.

NUMBER OF COPIES – Two

DISPOSITION OF FORM – The agency must notify households when they fail to complete the Interim Report form or fail to submit needed verification or information. If households file an incomplete form or fail to submit needed information, the agency must return the original Interim Report to the household along with this action form. If households fail to file an Interim Report altogether, the agency may send another copy of the report to the household along with the action form.

INSTRUCTIONS FOR PREPARATION OF FORM – Complete identifying case and agency information at the top of the form and the action required by the household. Sign and date the form.

- f. The completion of a training assignment may be followed by two weeks of job search.

6. Employment and Training for Ex-Offenders

Employment and training services for ex-offenders are offered in partnership with the Virginia Department of Criminal Justice. This component includes job skills assessments, occupational exploration, training and counseling in personal preparation for employability, employment opportunities, including information on local emerging and demand occupations and job placement services. This component will share costs for education and vocational training and supportive services. A referral form will be used. See Appendix II for the referral form.

7. Employment and Training for Refugees

Employment and training services for refugees are offered in a partnership with the Office of Newcomer Services through local Refugee Resettlement Agencies. Employment and training participants under the Refugee Social Services Program or Match Grant Program meet participation requirements for SNAPET by way of their enrollment in the Refugee Program(s). Participants enrolled in both the Refugee Resettlement Program and SNAPET must meet the following procedures:

- a. The refugee resettlement staff will accompany the participant to the initial SNAPET assessment to help with language barriers, if any, and to talk about the Comprehensive Resettlement Plan (CRP) that will substitute for a SNAPET Plan of Participation.
- b. SNAPET agencies must stay in contact with the resettlement agency but, the resettlement agency is not required to send a break-down of component activities and hours to the SNAPET agency.
- c. SNAPET will be notified if a refugee refuses to comply with refugee resettlement requirements to determine whether the SNAPET case should be closed; when someone leaves the program; and when there is a job placement.

E. SOCIAL/SUPPORTIVE SERVICE

Social/supportive services may be provided to participants in SNAPET, including volunteers, for expenses that are reasonably necessary and directly related to participation in SNAPET. Agencies are encouraged to explore alternatives to removing barriers if supportive service funds are limited.

If supportive services are essential for participation in a component and neither the registrant nor the agency can provide them, and no alternatives are available, place the participant in either the pending or inactive status.

The need for any supportive services must be linked to needs identified on the Participant's Plan of Participation. Supportive services related to starting or retaining employment are allowed for a period not to exceed 90 days.

Participants who fail to comply with SNAPET requirements are not entitled to supportive services.

1. SNAPET Worker Responsibilities

- a. The SNAPET worker is a case manager. The worker must assist the participant in meeting the service needs. This may be done directly by the SNAPET worker or through a referral to a service/social worker or an outside service provider.
- b. When providing social services to recipients, the Plan of Participation may replace the Service Application regardless of the funding source for the service.

2. Social/Supportive Services for Participants

There are **three** categories of social/supportive services available to SNAPET participants. These SNAPET social/supportive services may be provided directly or may be purchased.

a. Child Care

Child care services are provided to enable a caretaker to participate in program components.

1. Arrangement for and/or payment of child care as a supportive service must be provided when the participant needs this service to participate in component activities.
2. Participants who are parents of school age children are expected to search for a job during the hours that the children are in school. However, if a job interview must take place outside of school hours, child care may be authorized.
3. Participants who need child care and who cannot arrange their own may be provided assistance. Payment will be made within the guidelines of child care policy. Payment may also include child care related transportation costs.

b. Transportation

This service is provided to enable participants to travel to and from authorized SNAPET activities.

1. The participant is primarily responsible for arranging transportation to participate in an SNAPET component. Transportation will be provided only when the registrant is unable to make arrangements.
2. Transportation may be provided by any of the following means:
 - a. Agency or public transportation;

- b. Individuals other than public transportation. In this circumstance, payment is made to the individual provider. Such payment must be pre-authorized and reimbursement cannot exceed the current mileage reimbursement rate. A reimbursement type purchase order may serve as a pre-authorization; or
- c. Commercial establishments. For example, a client who needs gas for his/her car could receive a voucher that a gas station would honor. Through the purchase order/invoice system, the station would receive payment.

c. Other allowable expenses include:

- 1. Clothing suitable for job interviews;**
- 2. Licensing and bonding fees for a work experience or job placement;**
- 3. Uniforms;**
- 4. Work shoes;**
- 5. Purchase of an initial set of tools or equipment if required for a SNAPET component or job retention component;**
- 6. Fingerprinting if necessary for a job;**
- 7. Background check when necessary for a job;**
- 8. Medical services such as TB testing if required for a job;**
- 9. Personal safety items required to complete training/educational coursework;**
- 10. Books;**
- 11. Course registration fees;**
- 12. Drug tests if required for a job;**
- 13. Eye exams and vision correction, such as the purchase of eyeglasses;**
- 14. Dental work such as routine cleaning;**
- 15. Minor auto repairs;**
- 16. Test fees and training material directly related to a SNAPET component;**
- 17. Union dues necessary for a job; and**
- 18. Housing assistance including rent/or utilities not to exceed \$500.00 per occurrence and no more than two times in a 12 month period.**

3. Duration of SNAPET Services

SNAPET social/supportive services may be provided for as long as the individual needs the service to participate in a SNAPET component.

F. VOLUNTEERS

SNAP household members who are exempt from the work registration requirement may volunteer to participate in SNAPET.

1. Agencies may, at their option, permit volunteers to participate in a SNAPET component.
2. The same assessment procedures that apply to mandatory participants will apply to volunteers.
3. Social Services reimbursements/payments for transportation and daycare may only be made for expenses that are reasonably necessary and directly related to participation in the SNAPET program.

Example

A volunteer works part-time and has been assigned to the training component for 5 hours a week. Child day care services may only be provided for the 5 hours that the individual participates in the Training activity.

G. CHANGES/TRANSFERS

1. The SNAPET worker must notify the Eligibility Worker of any changes in the participant's situation that may affect the SNAP benefits or the individual's exemption status. This notification must be in writing and must occur within five working days of the change. The Communication Form must be used for this purpose.
2. SNAP cases may be transferred from one Virginia locality to another. SNAPET case transfer procedures follow.
 - When a SNAPET case transfers from one SNAPET locality to another SNAPET locality, daily alerts are generated to the SNAPET worker in the sending locality and to the transfer in caseload in the receiving locality
 - The sending SNAPET locality will need to close all open SNAPET enrollments for the SNAP case with the SNAPET Closure Status value = "05" for Transferred.
 - In the SNAPET database, the history for this enrollment record and its assessments and employments will show this sending FIPS.
 - The SNAPET worker in the receiving FIPS will not be able to open an enrollment record on the transferred in case until the sending agency SNAPET worker has closed the enrollment record.
 - When the receiving SNAPET locality opens a SNAPET Enrollment for the transferred in SNAPET client, the rule for the SNAPET Enrollment Start Date changes. The Start Date is to be the day after the Close Date on the SNAPET enrollment closed for transfer(closure status = 05)
 - The Date Entered Employment may equal the Date Entered Employment on the Enrollment in the Transfer Out locality. However, any "MMYYYY of Change" entered in the new FIPS can only start with the month after the last "MMYYYY of Change" in