
FW: DHS Emergency Rule Request for Review

From Mac Golden <Mac.E.Golden@dhs.arkansas.gov>

Date Mon 4/7/2025 4:00 PM

To Toni Roy <Toni.Roy@dhs.arkansas.gov>



MAC GOLDEN

CHIEF

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From: Thayer, Jill E. <Thayerj@blr.arkansas.gov>

Sent: Monday, April 7, 2025 3:57 PM

To: Mac Golden <Mac.E.Golden@dhs.arkansas.gov>

Cc: Lori McDonald <Lori.McDonald@dhs.arkansas.gov>; Mary Franklin <mary.franklin@dhs.arkansas.gov>

Subject: RE: DHS Emergency Rule Request for Review

[EXTERNAL SENDER]

Mac,

The Executive Subcommittee reviewed and approved the following emergency rule at its meeting on Thursday, April 3, and its review and approval was effective at 12:01 a.m., Saturday,

April 5, 2025:

DHS-Division of County Operations: Supplemental Nutrition Assistance Program updates pursuant to Act 675 of 2023.

Let me know if you have any questions or concerns or if there is anything else that you need from me.

Sincerely,

Jill.

Jillian E. Thayer

BLR Chief Legal Counsel
Bureau of Legislative Research
State Capitol, Rm. 315
Little Rock, Arkansas 72201

Phone: (501) 683-0720
Fax: (501) 682-1936
thayerj@blr.arkansas.gov

From: Mac Golden <Mac.E.Golden@dhs.arkansas.gov>
Sent: Monday, April 07, 2025 3:47 PM
To: Thayer, Jill E. <Thayerj@blr.arkansas.gov>
Cc: Lori McDonald <Lori.McDonald@dhs.arkansas.gov>; Mary Franklin <mary.franklin@dhs.arkansas.gov>
Subject: FW: DHS Emergency Rule Request for Review

Good afternoon Jill,

We had an Emergency Rule approved last Thursday but have not received the approval letter yet. Do you know if it has issued? (Looks like Marty is out today)

Thank you,

Mac



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From: Garrity, Marty <garritym@blr.arkansas.gov>
Sent: Monday, April 7, 2025 3:44 PM
To: Mac Golden <Mac.E.Golden@dhs.arkansas.gov>
Subject: Automatic reply: DHS Emergency Rule Request for Review

[EXTERNAL SENDER]

I am currently out of the office I will have limited access to my email during this time and will respond when I am back in the office. If you need immediate assistance, please contact Jill Thayer at thayerj@blr.arkansas.gov or 501-683-0720.

Marty Garrity

Director
Bureau of Legislative Research
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Little Rock, AR 72201

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SNAP CERTIFICATION MANUAL – SECTION 1000

1900 Classifying Households

1910 Aged/Disabled Households

1900 Classifying Households

SNAP Manual 06/15/98

Households will be classified in accordance with the provisions of this section.

1910 Aged/Disabled Household

SNAP Manual 04/05/2025

An aged/disabled household contains at least one (1) member who is age sixty (60) or over or is disabled as defined in the Glossary under “[Aged/Disabled](#)”. The household member who is aged or disabled is entitled to a medical deduction as provided in SNAP 6500. Households with an aged/disabled member are entitled to unlimited excess shelter costs. They are not subject to the gross income pretest but must meet the net income standards. See SNAP 7600 for an explanation of net income eligibility.

1919 Broad Based Categorically Eligible Household

SNAP Manual 04/05/2025

Broad Based Categorically Eligibility applies to all SNAP households that receive a non-cash TANF or Maintenance of Effort benefit (See Appendix AA for BBCE information). This allows the resource limit for all households to be increased (See Appendix D). This increase is permitted for a twelve (12) month period and can only be granted once every five (5) years. After the twelve (12) month period has been exhausted the standard resource amounts will apply.

1920 Categorically Eligible Household

SNAP Manual 04/05/2025

A categorically eligible household is any household in which all members receive (or are authorized to receive) Supplemental Security Income (SSI) or at least one (1) member receives (or is authorized to receive) a Transitional Employment Assistance (TEA) benefit as defined in SNAP 1920.2. “Authorized to receive” means that an individual has been determined eligible for benefits and has been notified of this determination even though the benefits have not yet been received. The fact that TEA or SSI benefits have been suspended, recouped, or are less than the minimum amount paid will have no impact on a determination of categorical eligibility.

No household may be classified as a categorically eligible household if:

1. The entire household is institutionalized, and the institution is not listed at SNAP 1800 as an institution where residents may participate in the Supplemental Nutrition Assistance Program.
OR
2. Any member of the household is disqualified for an intentional program violation as defined in [SNAP 16600](#) and SNAP 16800.

SNAP CERTIFICATION MANUAL – SECTION 1000

1900 Classifying Households

1910 Aged/Disabled Households

No household member will be included as an eligible member of a categorically eligible household if that member is:

- An eligible alien as defined in SNAP 1621.
- An eligible student as defined in SNAP 1622.2.
- Disqualified for failure to comply with a work registration requirement as defined in SNAP 3400.

SNAP CERTIFICATION MANUAL –SECTION 4000

4300 Resource Eligibility Standards

4310 Uniform Resource Standards

4300 Resource Eligibility Standards

SNAP Manual 04/05/2025

A household's eligibility will be denied or terminated when the value of the household's countable resources (both liquid and non-liquid assets) exceeds the limit for all households regardless of household size, including households with an individual with disabilities (see glossary definition of sixty (60) years of age or older individuals with disabilities households).

The household is classified as categorically eligible if all household members receive SSI benefits or a combination of TANF and SSI. A combined household of SSI recipients and non- SSI recipients cannot be classified as categorically eligible. However, the individual household members who receive SSI benefits are categorically eligible. This means that any resources owned solely by an SSI recipient are not to be counted when the household's total resources are determined, but all resources owned by the other household members are to be counted. If the resources owned by household members, who do not receive SSI, exceed the resource limit, then the entire household (including the SSI recipient) is ineligible to participate in the Supplemental Nutrition Assistance Program. Co-owned resources will not automatically be excluded under this policy. Instead, the resource will be handled in the same manner as any other jointly owned resource. Please see Appendix D for current resource limits for Regular and Age/Disabled households.

Broad Based Categorically Eligibility applies to all SNAP households that receive a non-cash TANF or Maintenance of Effort benefit (See Appendix AA for BBCE information). This allows the resource limit for all households to be increased (See Appendix D). This increase is permitted for a twelve (12) month period and can only be granted once every five (5) years. After the twelve (12) month period has been exhausted the standard resource amounts will apply.

SNAP CERTIFICATION MANUAL – SECTION 1000

12200 Changes Reported by the Household

12233 Actions to Take to Change a Resource

12233 Actions to Take to Change a Resource

SNAP MANUAL 04/05/2025

Vehicles

1. Determine the countable value of the new vehicle (see [SNAP 4800 - 4841](#)).
2. If the vehicle has any countable value, add this figure to the existing resources. If applicable, subtract the countable value of the vehicle used as the “trade-in.”
3. Compare the household’s total countable resources to the applicable resource limits (see [SNAP 4300 - 4310](#)).
4. If the household’s total countable resources are less than the limits, the household continues to be eligible. If not, close the case.

Liquid Resources

If the household’s liquid resources exceed the applicable limit (See Appendix D), the case will be closed unless the household is categorically eligible.

Arkansas Dept. of Human Services – SNAP Basis of Issuance: October 2024 – September 2025

Appendix D: Current Standards Current Standard Deductions

Type of Deduction		Amount	Effective Date
1. Earned Income		20%	05-01-86
2. Standard Deduction (Based on household size)	Household size 1	\$204	10-01-24
	Household size 2	\$204	
	Household size 3	\$204	
	Household size 4	\$217	10-01-24
	Household size 5	\$254	
	Household size 6 and	\$291	
3. Standard Utility Allowance (SUA)		\$333	10-01-24
4. Maximum Excess Shelter		\$712	10-01-24
5. Standard Medical Deduction (SMD)		\$190	10-01-24
6. Basic Utility Allowance (BUA)		\$267	10-01-24
7. Homeless Living Allowance (HLA)		\$190.30	10-01-24
8. Telephone Standard		\$50	01-01-21

Current SSI Maximum Payments

Type of Payment	Amount	Effective Date
SSI Only – Individual	\$943	01-01-24
SSI Only – Couple	\$1415	01-01-24

Current Medicare Premium (Part B Only): \$174.70

Current Medicare Premium (Part D Only): \$34.70

Resource Limits: Household Type and Maximum Amount:

All Households five thousand five hundred (\$5,500) for twelve (12) months (after twelve (12) months, see amounts below)**

Households with at least one (1) member who is age sixty (60) or older or is disabled four thousand five hundred dollars (\$4,500)

All other households three thousand dollars (\$3,000)

*The Asset limit for elderly or disabled household who serves as the threshold for substantial lottery or gambling winnings.

** five thousand five hundred dollars (\$5,500) resource limit can only be given for twelve (12) months in a five (5) year period.

FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY.

DEPARTMENT _____
BOARD/COMMISSION _____
PERSON COMPLETING THIS STATEMENT _____
TELEPHONE NO. _____ **EMAIL** _____

To comply with Ark. Code Ann. § 25-15-204(e), please complete the Financial Impact Statement and email it with the questionnaire, summary, markup and clean copy of the rule, and other documents. Please attach additional pages, if necessary.

TITLE OF THIS RULE _____

1. Does this proposed, amended, or repealed rule have a financial impact?
Yes No

2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule?
Yes No

3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered? Yes No

If no, please explain:

(a) how the additional benefits of the more costly rule justify its additional cost;

(b) the reason for adoption of the more costly rule;

(c) whether the reason for adoption of the more costly rule is based on the interests of public health, safety, or welfare, and if so, how; and

(d) whether the reason for adoption of the more costly rule is within the scope of the agency's statutory authority, and if so, how.

4. If the purpose of this rule is to implement a *federal* rule or regulation, please state the following:
 - (a) What is the cost to implement the federal rule or regulation?

Current Fiscal Year

General Revenue _____
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____

Total _____

Next Fiscal Year

General Revenue _____
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____

Total _____

(b) What is the additional cost of the state rule?

Current Fiscal Year

General Revenue _____
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____

Total _____

Next Fiscal Year

General Revenue _____
Federal Funds _____
Cash Funds _____
Special Revenue _____
Other (Identify) _____

Total _____

5. What is the total estimated cost by fiscal year to any private individual, private entity, or private business subject to the proposed, amended, or repealed rule? Please identify those subject to the rule, and explain how they are affected.

Current Fiscal Year

\$ _____

Next Fiscal Year

\$ _____

6. What is the total estimated cost by fiscal year to a state, county, or municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

Current Fiscal Year

\$ _____

Next Fiscal Year

\$ _____

7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars (\$100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes No

If yes, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

- (1) a statement of the rule's basis and purpose;
- (2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;
- (3) a description of the factual evidence that:
 - (a) justifies the agency's need for the proposed rule; and
 - (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;
- (4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and
- (7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
 - (a) the rule is achieving the statutory objectives;
 - (b) the benefits of the rule continue to justify its costs; and
 - (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.

1 State of Arkansas As Engrossed: S3/15/23 H3/29/23

2 94th General Assembly

A Bill

3 Regular Session, 2023

SENATE BILL 306

4

5 By: Senators J. Dismang, C. Tucker

6 By: Representatives Vaught, McCullough

7

8

For An Act To Be Entitled

9 AN ACT TO AMEND THE ASSET LIMITS FOR THE SUPPLEMENTAL
10 NUTRITION ASSISTANCE PROGRAM; TO ALLOW FOR AN
11 ADJUSTMENT TO THE ASSET LIMIT BASED UPON INFLATION;
12 TO INCLUDE AN AUTOMATIC INFLATION ADJUSTMENT; TO
13 DIRECT THE DEPARTMENT OF HUMAN SERVICES TO REQUEST A
14 BROAD-BASED CATEGORICAL ELIGIBILITY WAIVER; AND FOR
15 OTHER PURPOSES.

16

17

18

Subtitle

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BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

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28

SECTION 1. Arkansas Code § 20-76-115 is amended to read as follows:

29

20-76-115. ~~Federal resource~~ Resource limits for Supplemental Nutrition

30

Assistance Program - Resource limit waiver.

31

(a) ~~Unless required by federal law:~~

32

~~(1) The resource limit standards of the Supplemental Nutrition~~

33

~~Assistance Program shall not exceed the standards specified in 7 U.S.C. §~~

34

~~2014(g)(1); and~~

35

~~(2) Categorical eligibility that exempts households from the~~

36

~~federal resource limit standards shall not be granted for any noncash, in-~~



1 ~~kind, or other benefit.~~

2 ~~(b)~~ Unless required by federal law, the Department of Human Services
3 shall not:

4 (1) Apply gross income standards for food assistance higher than
5 the standards specified in 7 U.S.C. § 2014(c); or

6 (2) Grant categorical eligibility that exempts households from
7 the gross income standard under subdivision ~~(b)(1)~~ (a)(1) of this section for
8 any noncash, in-kind, or other benefit unless a waiver is obtained under
9 subsection (b) of this section.

10 (b)(1)(A) The Department of Human Services shall request a waiver from
11 the United States Department of Agriculture to exempt Supplemental Nutrition
12 Assistance Program enrollees from the federal resource limit, subject to the
13 asset limits under subdivision (b)(2) of this section.

14 (B) The Department of Human Services may request a broad-
15 based categorical eligibility waiver from the United States Department of
16 Agriculture if a waiver is necessary to implement the asset limits under
17 subdivision (b)(2) of this section.

18 (2) Upon the Department of Human Services obtaining the waiver
19 requested under subdivision (b)(1) of this section:

20 (A) The asset limit under the program shall be equal to
21 the federal resource limit;

22 (B)(i) If an enrolled household is determined by the
23 Department of Human Services to have accumulated countable assets greater
24 than the federal resource limit, the Department of Human Services shall grant
25 a temporary increase of the asset limit for that household to an amount set
26 by the Department of Human Services by rule for a period of up to one (1)
27 year.

28 (ii) The Department of Human Services shall set the
29 temporary asset limit at five thousand five hundred dollars (\$5,500) and may
30 seek waiver approval from the United States Department of Agriculture to
31 modify that amount to correspond with future changes in the federal resource
32 limit; and

33 (C) An enrolled household may receive a temporary increase
34 of the asset limit no more than one (1) time every five (5) years.

35
36 APPROVED: 4/11/23