## List of SNAP Forms

### Form Manual 10/01/18

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<tbody>
<tr>
<td>DC0-1</td>
<td>Notice of Action</td>
<td>Sept-18</td>
<td>• Manual notification of application approval when automated notice is not appropriate.</td>
<td>DHS SHARE Spanish form on DHS SHARE Order from the warehouse.</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-12</td>
<td>Verification of Social Security Enumeration</td>
<td>May-08</td>
<td>• Serves as verification of application for an SSN.</td>
<td>DHS SHARE Order from the warehouse.</td>
<td>NA</td>
</tr>
<tr>
<td>DCO-19</td>
<td>SNAP Disqualified Recipient Report</td>
<td>Aug-04</td>
<td>• Used by county office to report SNAP disqualifications to the central office, SNAP Section.</td>
<td>DHS SHARE</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-29</td>
<td>Quality Control Error Response</td>
<td>June-07</td>
<td>Used by the county office to provide information to the central office about any QA error case discovered.</td>
<td>DHS SHARE</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-70</td>
<td>Check Verification</td>
<td>Aug-85</td>
<td>Used by the county office to verify checks received by household.</td>
<td>DHS SHARE ONLY</td>
<td>No</td>
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<tr>
<td>DCO-74</td>
<td>Request for Services in Alternate County</td>
<td>Oct-12</td>
<td>Completed by SNAP households to request service through a DHS county office other than the office in the household’s county of residence.</td>
<td>DHS SHARE ONLY</td>
<td>No</td>
</tr>
<tr>
<td>DCO-76</td>
<td>Collateral Statement</td>
<td>Sept-18</td>
<td>Used to obtain verification of household composition and/or residence in questionable situations.</td>
<td>DHS SHARE Spanish form on DHS SHARE Order from warehouse</td>
<td>Yes</td>
</tr>
<tr>
<td>DHS-80</td>
<td>Claim of Lost, Stolen and/or Forged Assistance Warrant/Check</td>
<td>Jul-97</td>
<td>Completed when a client reports a lost or stolen TEA or reimbursement check - e.g., E&amp;T reimbursement check.</td>
<td>DHS SHARE ONLY</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-83</td>
<td>Contributions Statement</td>
<td>Sept-18</td>
<td>Used to verify contributions that a household is receiving.</td>
<td>DHS SHARE Spanish form on DHS SHARE Order from warehouse</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-94</td>
<td>Second Party Review Summary</td>
<td>Jun-12</td>
<td>Completed by reviewer during second party review. If needed, completed by worker to document corrective action.</td>
<td>DHS SHARE ONLY</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-96</td>
<td>Odd Job Income/Expense Record</td>
<td>Aug-11</td>
<td>Used to record daily income and expenses from odd jobs for the household</td>
<td>DHS SHARE</td>
<td>No</td>
</tr>
<tr>
<td>DCO-97</td>
<td>Verification of Earnings</td>
<td>Feb-91</td>
<td>Used to obtain verification of earnings from the employer.</td>
<td>DHS SHARE Order from warehouse</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-103</td>
<td>Request for Information at Annual Review</td>
<td>March-18</td>
<td>Used to obtain information and/or verification from a household that has submitted an Annual Review.</td>
<td>DHS SHARE Spanish form on DHS SHARE Order from warehouse</td>
<td>Yes</td>
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<tr>
<td>DCO-110</td>
<td>Complaint Report</td>
<td>Feb-18</td>
<td>• Used by DHS clients to make a complaint.</td>
<td>DHS SHARE ONLY</td>
<td>No</td>
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<td></td>
<td>• Records both civil rights complaints and other types of complaints.</td>
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<td>• Establishes a system for tracking complaints.</td>
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<tr>
<td>DCO-128</td>
<td>Categorical Eligibility Test</td>
<td>June-09</td>
<td>Used to determine if households are categorically eligible.</td>
<td>DHS SHARE ONLY</td>
<td>Yes</td>
</tr>
<tr>
<td>DHS-187</td>
<td>Billing and Routing Sheet/ Transitional Employment Assistance Payments/ Billed to the Department of Human Services</td>
<td>Feb-13</td>
<td>Used to authorize reimbursements for SNAP E&amp;T Program participants</td>
<td>DHS SHARE ONLY</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-191</td>
<td>Request for Information - Medicaid, SNAP and TEA Programs</td>
<td>Oct-15</td>
<td>Used to request information when a client has applied for benefits.</td>
<td>DHS SHARE ONLY</td>
<td>Yes</td>
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<td></td>
<td>Used to request information postponed verification from expedited households.</td>
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<tr>
<td>DHS-199</td>
<td>Benefit Overpayment Report</td>
<td>Oct-98</td>
<td>Used to report SNAP overpayments to the Overpayments Unit.</td>
<td>DHS SHARE</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-201</td>
<td>Report of Restored Benefits</td>
<td>Jan-95</td>
<td>• Used to document supervisory approval of restored benefits.</td>
<td>DHS SHARE ONLY</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Used to report restored benefits to the Overpayments Unit.</td>
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<tr>
<td>DCO-205</td>
<td>Employment and Training Program Referral Form &amp; Participation Record</td>
<td>Jun-16</td>
<td>• Used to refer both mandatory referrals and volunteers to the E&amp;T contractor.</td>
<td>DHS SHARE ONLY</td>
<td>Yes</td>
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<tr>
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<td></td>
<td>• Used by the contractor as a participation record.</td>
<td>Spanish form on DHS SHARE</td>
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<tr>
<td>DCO-207</td>
<td>SNAP Workers Referral/ Change</td>
<td>Oct-02</td>
<td>Used to refer SNAP recipients to the Workfare Sponsor in counties where the Workfare Program is operating. Also used to transmit information that will affect Workfare participation.</td>
<td>Maintained at Workfare County</td>
<td>NA</td>
</tr>
<tr>
<td>DCO-208</td>
<td>Notification of Workfare Obligation</td>
<td>Jun-95</td>
<td>Used by the county office to notify Workfare Program participants of their Workfare obligation.</td>
<td>Maintained at Workfare County</td>
<td>NA</td>
</tr>
<tr>
<td>DCO-209</td>
<td>Workfare Exchange of Information</td>
<td>Oct-95</td>
<td>Used by the county office and the Workfare office to exchange information about workfare participants.</td>
<td>Maintained at Workfare County</td>
<td>NA</td>
</tr>
<tr>
<td>DCO-210</td>
<td>Workfare Quarterly Report</td>
<td>Jun-95</td>
<td>Used by the county office to provide a quarterly count of participants.</td>
<td>Maintained at Workfare County Office</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-212</td>
<td>Workfare Monthly Activity Report</td>
<td>Jun-95</td>
<td>Used by the Workfare Administrator or designee to report program activity to the county office.</td>
<td>Maintained at Workfare Site</td>
<td>NA</td>
</tr>
<tr>
<td>DCO-215</td>
<td>Request for Assistance</td>
<td>Sept-17</td>
<td>Multi-program application form</td>
<td>DHS SHARE</td>
<td>Yes</td>
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<td>Spanish form on DHS SHARE Order from warehouse</td>
<td></td>
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<tr>
<td>DCO-218</td>
<td>Request for Information Semi-Annual Report</td>
<td>Oct-03</td>
<td>Request needed information from households who submit a semi-annual report</td>
<td>DHS SHARE</td>
<td>Yes</td>
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<td>Spanish form on DHS SHARE Order from warehouse</td>
<td></td>
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<tr>
<td>DCO-219</td>
<td>Notice of Appointment</td>
<td>Feb-09</td>
<td>Used to schedule appointments for TEA, SNAP and Medicaid applicants.</td>
<td>DHS SHARE</td>
<td>Yes</td>
</tr>
<tr>
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<td>Spanish form on DHS SHARE Order from warehouse</td>
<td></td>
</tr>
<tr>
<td>DCO-223</td>
<td>Application for Homeless Meal Provider Status</td>
<td>Nov-08</td>
<td>Used by homeless shelters that wish to accept voluntary contributions of SNAP benefits in exchange for meals.</td>
<td>DHS SHARE</td>
<td>No</td>
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<td>ONLY Spanish form on DHS SHARE</td>
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<tr>
<td>DCO-224</td>
<td>Meal Provider Visit Record and Disposal</td>
<td>Aug-00</td>
<td>Used by the county to approve or deny homeless meal provider status.</td>
<td>DHS SHARE ONLY</td>
<td>No</td>
</tr>
<tr>
<td>DCO-231</td>
<td>Notice to SNAP Recipients</td>
<td>May-94</td>
<td>Used in counties where no interview is scheduled at recertification until the household submits an application. Notifies households of the steps they must take to continue receiving SNAP benefits without interruption.</td>
<td>DHS SHARE Spanish form on DHS SHARE</td>
<td>No</td>
</tr>
<tr>
<td>DCO-234</td>
<td>Change Report</td>
<td>Sept-18</td>
<td>Used by SNAP, TEA and Medicaid households to report changes.</td>
<td>DHS SHARE Spanish form on DHS SHARE</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-234A</td>
<td>Change Report Addendum</td>
<td>Sept-18</td>
<td>Explains the limited reporting requirements to SNAP households that are subject to this requirement.</td>
<td>DHS SHARE Spanish form on DHS SHARE</td>
<td>No</td>
</tr>
<tr>
<td>DCO-235</td>
<td>Instructions for Completing Midpoint Review Form</td>
<td>Sep-04</td>
<td>Accompanies the Midpoint Review Form sent to households with 24-month certification periods. Explains the process and deadlines for reporting.</td>
<td>DHS SHARE Spanish form on DHS SHARE</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-238</td>
<td>Declaration of Food Loss</td>
<td>July-13</td>
<td>Used by households to request a full or partial replacement of food lost in household misfortune.</td>
<td>DHS SHARE ONLY</td>
<td>No</td>
</tr>
<tr>
<td>DCO-243</td>
<td>Travel Reimbursement Documentation</td>
<td>Oct-12</td>
<td>Documents transportation costs incurred by E&amp;T recipients.</td>
<td>DHS SHARE ONLY</td>
<td>No</td>
</tr>
<tr>
<td>DCO-248</td>
<td>SNAP Adjustment - Automated 248 System</td>
<td>Jul-01</td>
<td>Used by workers to authorize a transaction (supplement, restoration, etc.) on daily issuance.</td>
<td>DHS SHARE</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-254</td>
<td>Daily Census Report</td>
<td>Jun-97</td>
<td>Used by treatment center to maintain a daily census of drug and alcohol treatment residents who receive SNAP benefits.</td>
<td>DHS SHARE ONLY</td>
<td>No</td>
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<tr>
<td>DCO-256</td>
<td>Action Taken on Administrative Disqualification Hearing or Waiver</td>
<td>Oct-12</td>
<td>Used by worker to notify a household that a member has been disqualified due to an IPV determined through a disqualification hearing or because the household waived their rights to a hearing</td>
<td>DHS SHARE ONLY Spanish form on DHS SHARE</td>
<td>No</td>
</tr>
<tr>
<td>DCO-259</td>
<td>Action Taken on Your Court Hearing</td>
<td>Oct-12</td>
<td>Used by worker to notify a household that a member has been disqualified due to an IPV determined through a court of law.</td>
<td>DHS SHARE ONLY Spanish form on DHS SHARE</td>
<td>No</td>
</tr>
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</table>
| DCO-260     | Notification of Work Registration                                         | March-18      | • Used in all counties to notify households when a member is work registered.  
• Used in E&T counties to notify households when a member is referred to the E&T Program.  
Used in E&T counties to advise work registrants that they may volunteer to participate in the E&T Program. | DHS SHARE Order from warehouse          | No          |
| DCO-261     | Volunteer Agreement                                                      | Oct-15        | Used by counties to verify volunteer hours for individuals volunteering to meet work requirements.                               | DHS SHARE                               | Yes         |
| DCO-261N    | Notice to SNAP Recipients Subject to Work Requirements                   | March-16      | Used to notify households of Work Requirements                                                                                   | DHS SHARE                               | Yes         |
| DCO-263     | Alcoholism and Drug Addiction Treatment Centers Record of On-Site Visit   | Nov-00        | Used by the DHS county office to record on-site visits to treatment centers.                                                        | DHS SHARE ONLY                          | No          |
| DCO-264     | Alcoholism and/or Drug Addiction Treatment Center Declaration Form        | Mar-02        | An addendum to the Request for Assistance, this form is used by treatment centers to capture the information needed by the AR to complete an ANSWER interview. | DHS SHARE ONLY                          | No          |
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<tr>
<td>DCO-268</td>
<td>Notice of SNAP/Medicaid Review/Notice of Expiration</td>
<td>April-16</td>
<td>Used to notify households that their certification period is expiring and to return the Application for Recertification</td>
<td>DHS SHARE Automated</td>
<td>No</td>
</tr>
<tr>
<td>DCO-269</td>
<td>Notice of Missed Appointment</td>
<td>Jan-11</td>
<td>Used to notify households that they missed their SNAP appointment</td>
<td>DHS SHARE Automated in ANSWER</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-271</td>
<td>Telephone Report</td>
<td>Sept-18</td>
<td>Used by workers to collect information from households that call the DHS county office to report a change in circumstances.</td>
<td>DHS SHARE Order from warehouse</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-272</td>
<td>Access AR Online Application Notice of Interview</td>
<td>July-18</td>
<td>Used to schedule either a telephone or face-to-face interview when a household submits an Access AR Online Application</td>
<td>DHS SHARE</td>
<td>Yes</td>
</tr>
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</table>
| DCO-273     | Receipt for SNAP Benefits or Money              | Jul-00        | • Used in DHS county office to:  
  • Act as a receipt for money paid on an overpayment  
  • Acts as a receipt for SNAP benefits withdrawn from an EBT account to repay an overpayment  
  • Gives written permission for the agency to withdraw SNAP benefits from an EBT account to repay an overpayment. | DHS SHARE ONLY                      | No          |
<p>| DCO-285     | Semi-Annual Report and Medicaid Renewal Form    | April-16      | Used by SNAP households subject to semi-annual reporting. Also allows SNAP households with Medicaid to be reevaluated for Medicaid services at the same time.                                               | DHS SHARE Spanish form on DHS SHARE Computer generated form | Yes         |
| DCO-286     | Notice of SNAP Recertification Appointment      | March-09      | Used to schedule either a telephone or face-to-face interview when a household submits an Application for Recertification                                                                                | DHS SHARE Spanish form on DHS SHARE Order from Warehouse | Yes         |</p>
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<tr>
<td>DCO-811</td>
<td>SNAP/MSP Annual Review</td>
<td>Jan-18</td>
<td>Used by SNAP households Subject to Annual Reviews. Also, allows SNAP households with MSP to be reevaluated for Medicaid services at the same time.</td>
<td>DHS SHARE Spanish form on DHS SHARE Computer Generated Form</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-1700</td>
<td>Suspected Fraud Report</td>
<td>August-17</td>
<td>Used in DHS county offices to refer SNAP households to the Fraud Unit when fraudulent activity is suspected.</td>
<td>DHS SHARE</td>
<td>Yes</td>
</tr>
<tr>
<td>DCO-1701</td>
<td>SNAP Suspected Fraud Referral</td>
<td>May-85</td>
<td>Used in DHS county offices to request a field investigation.</td>
<td>DHS SHARE</td>
<td>Yes</td>
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<tr>
<td>DHS-1719</td>
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<tr>
<td>PUB-169</td>
<td>SNAP Program</td>
<td>August-12</td>
<td>Provides general information about applying for and participating in the SNAP Program. May be used for outreach or given along with a Request for Assistance to households that express an interest in the Program.</td>
<td>Order from the warehouse. Spanish version on DHS SHARE</td>
</tr>
<tr>
<td>PUB-279</td>
<td>Your Rights and Your Responsibilities</td>
<td>July-14</td>
<td>Provides specific information to SNAP applicants and participants. Must be provided to all applicants – initial and recertification.</td>
<td>Order from the warehouse. Spanish version on DHS SHARE</td>
</tr>
<tr>
<td>PUB-360</td>
<td>SNAP Semi-Annual Reporting</td>
<td>Nov-16</td>
<td>Provides specific information about Semi-Annual Reporting. Must be provided to households that become subject to SR for the first time. May be provided to any SR household if needed.</td>
<td>Order from the warehouse. Spanish version on DHS SHARE</td>
</tr>
<tr>
<td>PUB-390</td>
<td>Alcoholism and Drug Addiction Treatment Centers&lt;br&gt;SNAP Program Participation</td>
<td>Nov-08</td>
<td>Provides specific information about the responsibilities of Alcoholism and Treatment Centers when residents participate in the SNAP Program. Must be provided to any new AR designated by a center. May be provided to any treatment center at any time. May be provided to any interested party upon request.</td>
<td>DHS SHARE ONLY</td>
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**Addict/Alcoholic Representative**  
11/01/98

An individual employed by an alcoholism and/or drug addiction treatment center and appointed by the center to act on behalf of resident households in the process of applying for SNAP benefits.

The representative is also authorized to use SNAP benefits on behalf of the center’s resident households.

**Addict/Alcoholic Resident**  
11/01/98

A resident of an institution approved under Public Law 91-616 as an alcoholism and/or drug addiction treatment center.

This includes private, nonprofit centers and certain centers operated by Mental Health.

**Administrative Hearing**  
11/01/98

An administrative procedure during which a claimant and/or a representative of the claimant has an opportunity to present any grievance about an action or proposed action of the DHS County Office or its agents.

The claimant may show why he or she believes the action is not fair and should be corrected. The agency must prove whether the action taken was correct according to policy.

**Age 60 or Older/Individuals with Disabilities**  
10/01/11

Aged/disabled households may deduct medical expenses incurred for the aged/disabled member(s) and are allowed unlimited excess shelter costs.
Age 60 or Older/Individuals with Disabilities households are not subject to the gross income eligibility pretest. Any household, including one person households that contain an age 60 or older and/or an individual with disability will be allowed up to $3,500 in countable resources.

An aged/disabled household must contain one of the following:

1. An individual who is age 60 or older or who turns age 60 in the month of application.
2. An individual who receives SSI under Title XVI of the Social Security Act or who receives disability or blindness payments under Titles I, II, XIV, or XVI of the Social Security Act.
3. An individual who receives federally or state-administered supplemental benefits under section 1616 (a) of the Social Security Act if eligibility to receive these benefits is based upon the disability or blindness criteria used under Title XVI of the Social Security Act.
4. An individual who receives a federal or state-administered supplemental benefit under section 212 (a) of Public Law 93-66, that is commonly called a state supplement.
5. An individual who receives disability retirement benefits from a governmental agency because of a disability considered permanent under Section 221 (i) of the Social Security Act.
6. A veteran with a service-connected disability rated by the Veteran’s Administration (VA) as total or paid by the VA as total under Title 38 of the United States Code.
7. A veteran who is considered by the VA to be in need of regular aid and attendance or permanently housebound under Title 38.
8. A surviving spouse of a veteran if the spouse is considered by the VA to be in need of regular aid and attendance or permanently housebound.
9. A surviving child of a veteran if the child is considered by the VA to be permanently incapable of self-support under Title 38.
10. A surviving spouse or child of a veteran if the spouse or child is entitled to a VA payment under Title 38 due to the death of the veteran so long as the spouse or child has a disability considered permanent under Section 221(i) of the Social Security Act. “Entitled” as used in this definition refers to those surviving spouses and children of veterans who are actually receiving such payments or who are entitled to such payments but are not yet receiving them.
11. An individual who receives an annuity payment under section 2 (a)(1)(iv) of the Railroad Retirement Act of 1974 and is determined to be eligible to receive Medicare by the Railroad Retirement Board.
12. An individual who receives an annuity payment under section 2 (a)(1)(v) of the Railroad Retirement Act of 1974 and is determined to be disabled based upon the criteria used under Title XVI of the Social Security Act.
13. Recipients of interim assistance benefits pending the receipt of Supplemental Security Income (SSI).
14. Recipients of permanent disability-related medical assistance benefits under Title XIX of the Social Security Act. This includes individuals found eligible for Medicaid through a decision of the Medical Review Team but does not include individuals eligible for Medicaid under any category not related to a permanent and total disability.

15. Recipients of disability-based state general assistance benefits. (There is no disability-based state general assistance program in Arkansas.)

**Verification Tables for Disability**

<table>
<thead>
<tr>
<th>Type of Disability</th>
<th>Required Verification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual receives SSA disability or SSI.</td>
<td>Proof that the individual is receiving such payments.</td>
</tr>
<tr>
<td>Veteran with a service connected disability.</td>
<td>A statement for the VA which clearly indicates that the veteran is receiving benefits for a service-connected disability rated as total or paid at the total rate.</td>
</tr>
<tr>
<td>Veteran in need of a regular aid and attendance or housebound.</td>
<td>Proof that the veteran is in receipt of VA disability benefits.</td>
</tr>
<tr>
<td>Surviving spouse of veteran if spouse is in need of regular aid and attendance or housebound.</td>
<td>Proof that the individual is in receipt of VA disability benefits.</td>
</tr>
<tr>
<td>Surviving child of veteran if child is permanently incapable of self-support.</td>
<td>Proof that the individual is in receipt of VA disability benefits.</td>
</tr>
<tr>
<td>Surviving spouse or child of veteran if spouse or child is in receipt of death benefits but is actually disabled as defined by the Social Security Act.</td>
<td>None, if the individual obviously has a disability appearing on the Social Security Administration’s most current list of disabilities considered permanent under the Social Security Act. If the disability is not obvious, a statement from a physician or licensed or certified psychologist stating that the individual has one of the non-obvious disabilities listed will be required.</td>
</tr>
<tr>
<td>Recipient of Railroad Retirement disability annuity from the Railroad Retirement Board who is eligible for Medicare.</td>
<td>Proof that the individual receives such benefits and is eligible for Medicare.</td>
</tr>
</tbody>
</table>

**Alcoholism and/or Drug Addiction Treatment and Rehabilitation Program**

Any drug addiction or alcoholic treatment rehabilitation program conducted by a private, nonprofit organization or institution, or a publicly operated community mental health center, under part B of Title XIX of the Public Health Service Act (42 U.S.C. 300x et seq.).
Private, nonprofit organizations who choose to use SNAP benefits at a retail store must receive authorization from the Office of Alcohol and Drug Abuse Prevention. Community mental health centers and private nonprofit organizations who use a point of sale device at the center to access SNAP benefits must receive authorization from FNS.

**Application Form (DCO-215)**
11/01/98

A form used to make application to participate in the Supplemental Nutrition Assistance Program. The application form must be completed by the casehead, a responsible household member or an authorized representative and submitted to a DHS county office.

**Attendant**
11/01/98

An individual who is necessary for medical, housekeeping, or child care reasons but who is not part of the household.

**Authorized Representative (AR)**
11/01/98

A person designated by the casehead, spouse, or another responsible household member to make application for SNAP benefits or to use SNAP benefits on the household’s behalf.

Drug addicts or alcoholics participating in a nonprofit residential treatment or rehabilitation program will be represented by an employee of the facility. A resident of nonprofit group living arrangements may be represented by an employee of the facility or an AR of their own designation.

**Boarder**
11/01/98

A person to whom a household furnishes lodging and meals for compensation. Boarders may not participate in the Supplemental Nutrition Assistance Program.
Boarding House (Commercial)
11/01/98

A commercial establishment that offers meals and lodging for compensation with the intention of making a profit.

The statement of the proprietor or owner will be sufficient to determine that an establishment does or does not fit this definition.

Capital Gains
11/01/98

Proceeds from the sale of capital goods or equipment in a self-employment enterprise.

Casehead
11/01/98

The household member in whose name the case record will be maintained.

The case will be filed in the county office under the name of the casehead and all notices will be sent to the casehead.

Categorically Eligible Household
11/01/00

A categorically eligible household is any household in which all members receive (or are certified to receive) Supplemental Security Income (SSI) or at least one member receives (or is certified to receive) one of the following Transitional Employment Assistance (TEA) benefits:

- **Child-Care Assistance:** This is limited to child-care assistance paid to current TEA cash assistance recipients and child care assistance paid to former TEA cash assistance recipients through extended support services.

- **TEA Cash Assistance:** These monthly payments are available to help meet the family’s basic needs while the parent or other adult relative works toward increasing his or her earning potential. An eligible family may receive cash assistance for no longer than 24 months. TEA cash assistance is also available to help meet the needs of children who are
being cared for by adult relatives other than a parent. Assistance to such relatives is available without regard to a specified time limit.

- **Mentoring services**: This service is designed to provide clients with the support needed to move from welfare to work. Mentoring services will be provided as long as it is deemed appropriate by the worker, coordinator and mentee. If the TEA case closes due to employment, these services may be provided for up to six months after the date of closure.

- **Case Management Services and Extended Case Management Services**: Case management is the process of coordinating and brokering the multiple services needed to achieve progress towards self-sufficiency. Case Managers serve as a point of contact for the client and a point of accountability for the agency. Case management services will be provided to those individuals who need assistance before and after accepting employment. This service will be provided as long as the client is eligible. Extended case management may be provided for up to 12 months after cash assistance has been terminated due to employment.

- **Employment Bonus**: An Employment Bonus cash payment will be made to any family that becomes income ineligible due to employment or who requests the cash assistance case be closed due to employment. Only one Employment Bonus may be authorized to a family within a 12-month period.

- **Transportation Assistance**: When a TEA case closes due to employment (by agency determination or at the family’s request), the family is automatically eligible to receive two months of Extended Support Services (ESS) Transportation assistance. There is no limit to the number of times a family may receive ESS Transportation assistance.

- **Job Retention Payments**: When a TEA case closes due to employment, the family may receive, during the 12-month period following case closure, a cash payment for the purpose of enabling the adult to retain his or her job. The amount of payment will be the actual amount needed to resolve the job-related need.

This list is all-inclusive. Other benefits funded in whole or in part by TANF funds will not confer categorical eligibility. This definition applies to a finding of eligibility by the county office. This means a household cannot be considered categorically eligible under these rules unless at least one household member made application to receive some type of TEA benefit provided through the DHS county office and was found eligible to receive such benefits.

There are two exceptions to the categorically eligible rules:

**Exception 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.
**Certification**
11/01/98
Authorization of eligibility for a household to participate in the Supplemental Nutrition Assistance Program.

**Certification Period**
11/01/98
Length of time in calendar months a household is eligible to receive SNAP benefits.

**Certification Date**
11/01/98
The date the county office worker completes and signs the document authorizing a household to participate in the Supplemental Nutrition Assistance Program.

**Collateral Contact**
06/01/01
A person or agency designated to provide oral or written verification of information provided by a household.

The household normally designates the collateral contact. The county office worker will designate a collateral contact if:

1. The household fails to designate a collateral contact; or
2. Designates a collateral contact that is not acceptable.

An acceptable collateral contact can be expected to provide accurate, unbiased verification of the household’s statements or circumstances. Examples of acceptable collateral contacts that might be expected to provide accurate, unbiased third-party information may include employers, landlords, social service agencies, migrant service agencies, and neighbors of the household.

If the worker chooses to designate the collateral contact, the household will be given prior written or oral notice. The household will be advised of three options:

1. To consent to the contact;
2. To provide acceptable verification in another form; or
3. To withdraw the application.

If the household refuses to select one of these options, the application will be denied or the household’s case will be closed for failure to cooperate.

When advising a household of the designation of a collateral contact, the worker need not name a specific individual. A general designation such as “one of your neighbors” may be used.

**NOTE:** The worker may use records such as Bendex, SDX, or the ESD online screens without the household’s consent. The records of other agencies are not considered collateral contacts when a routine access agreement exists.

When talking with an individual designated as a collateral contact, the county office worker should disclose only the information that is absolutely necessary to get the information being sought. Workers should avoid disclosing that the household has applied for SNAP benefits and should not disclose any information supplied by the household especially if the information is protected under SNAP 530, “Disclosure of Information From the Case Record.” When talking to a collateral contact, workers should not suggest that a household is suspected of any wrongdoing.

**Communal Diner**

11/01/98

An age 60 or older individual or SSI recipient who lives alone or only with a spouse and who uses SNAP benefits to purchase meals prepared at communal dining facilities authorized by FNS.

**Communal Dining Facility**

11/01/98

Facilities authorized by FNS to accept SNAP benefits for meals prepared at the site and served to eligible communal diners.

Examples of such facilities are:

1. Senior citizen centers;
2. Apartment buildings occupied primarily by elderly people;
3. A public establishment or a nonprofit, tax exempt private establishment that prepares meals especially for elderly persons during special hours; or
4. A private establishment under contract with a state or local agency to offer concessionally-priced meals for the elderly.
Customarily
11/01/98

A majority of the time.

Judgments will be made on a case by case basis when a majority of the time is applicable.

Destitute Household (Expedited Case Action Policy)
11/01/98

A migrant or seasonal farmworker household in the job stream who meets one of the income criteria in SNAP 9200.

Such households are entitled to expedited application processing.

Disability
11/01/98

Inability to engage in any substantially gainful activity by reason of a medically determinable physical or mental impairment.

Documentation
11/01/98

Written statements entered in the SNAP case record to substantiate the action taken.

For example, documentation of verification obtained will be entered in the case record. Each case action should be documented so a reviewer can determine the reason for each action taken.

Documentary Evidence
10/01/08

Written confirmation of a household’s circumstances.

Some examples of documentary evidence include wage stubs, rent receipts, utility bills, dependent care costs receipts, recent award letters, and letters from employers confirming wages. Acceptable documentary verification will not be limited to any single type of document.
Any reasonable documentary evidence will be accepted as long as it provides adequate confirmation of the household’s circumstances. The household may provide the required documentary evidence or the County Office may obtain the evidence through other sources.

**EXAMPLE:** If residency is verified through utility bills or rent receipts provided by the household as proof of shelter costs, no additional documentary evidence to confirm residency is necessary.

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**Elderly Person**

11/01/98

A person age 60 or older.

** Eligible Foods**

11/01/98

1. Any food or food product intended for human consumption except alcoholic beverages, tobacco, or hot foods and hot food products prepared for immediate consumption.
2. Seeds and plants to grow foods for the personal consumption of eligible households.
3. Meals prepared and delivered by an authorized meal delivery service to households eligible to use SNAP benefits to purchase meals.
4. Meals served by an authorized communal dining facility to households eligible to use SNAP benefits for communal dining.
5. Meals prepared and served by an alcoholism and/or drug addiction treatment and/or rehabilitation center to eligible households.
6. Meals prepared and served by a group living arrangement facility to residents who are blind or disabled recipients of benefits under Title II or Title XVI of the Social Security Act.
7. Meals prepared by and served by a shelter for battered women and children to eligible residents.
8. Meals prepared and served by an approved homeless meal provider to eligible members of homeless SNAP households.
Eligible Households
11/01/98
Households that meet the Supplemental Nutrition Assistance Program standards of eligibility are eligible households.

Emancipated Minor
11/01/98
A minor who has been given the right to manage his or her own affairs. The two basic types of emancipation are explained below:

1. Judicial Emancipation
   A judicially emancipated minor has been given the right by a court to manage his or her own affairs.

2. Common Law Emancipation
   A minor emancipated through common law has been given the right to manage his or her own affairs by voluntary agreement of parent and child. Common law emancipation may also be implied from acts of conduct which import consent. For example, the establishment of a separate household or, if living in the parent’s household, actually paying an equal share of the household expenses of all family members would import consent.

   **NOTE:** A voluntary agreement to emancipation that exists between a parent and a child under age 18 does not impart real emancipation. The child must be actually responsible for and managerial of his or her own affairs as stipulated in the agreement before he or she may be considered emancipated.

Encumbrance
11/01/98
Debt owed on property.

Equity
11/01/98
Fair market value of property, less any encumbrances on the property.
EXITING - FOOD STAMP ACT

Exiting
08/01/2017

An individual leaving a Prison and/or Half-Way House or Drug and/or Alcohol Rehabilitation Center within the last 90 days.

Expedited Services
11/01/98

The provisions under which certain households are entitled to receipt of SNAP benefits within seven calendar days of application if otherwise eligible.

-F-

Federal Fiscal Year
11/01/98

A period of 12 calendar months beginning October 1 and ending September 30th of the following calendar year.

Field Investigation
11/01/98

An investigation into a household’s circumstances.

A field investigation may be performed by either a county office worker or a field investigator. The investigation may include an unannounced visit to the household’s residence and/or collateral contacts such as household’s neighbors.

Food and Nutrition Service (FNS)
11/01/98

The Division of the U.S. Department of Agriculture (USDA) that administers the Supplemental Nutrition Assistance Program.

Food Stamp Act
11/01/98

The Food Stamp Act of 1977 (P.L. 95-113), including subsequent amendments.
APPENDIX: SNAP GLOSSARY

SNAP Benefit Amount
11/01/98

The total value of SNAP benefits a household is eligible to receive each month.

Group Living Arrangement
11/01/98

A public or private nonprofit residential setting that serves no more than sixteen (16) residents and that is certified by the appropriate agency or agencies of the State (DDS and FNS.)

To be eligible for SNAP benefits, a resident of such a group living arrangement must be disabled as defined in this Glossary, items 2-15 under “Age 60 or Older/ Individual with Disability.”

Home Visit
06/01/01

An on-site visit to an applicant’s residence by a county office worker during the application process.

The purpose of a home visit is to verify the household’s circumstances when documentary evidence cannot be obtained or is insufficient to make a firm determination of eligibility or benefit level. Home visits must be scheduled in advance with the household.

Home visits are to be used on a case-by-case basis where the supplied documentation is insufficient. Fitting a profile that has been determined by the DHS county office staff does not constitute lack of verification. Prior to conducting a home visit the worker must attempt to assist the household in obtaining the needed verification.

This law authorizes the Supplemental Nutrition Assistance Program.
**Homeless Household**
11/01/98

A household composed entirely of homeless individuals.

**Homeless Individual**
11/01/98

An individual who lacks a fixed and regular nighttime residence or an individual whose primary nighttime residence is:

1. A **supervised** shelter designed to provide temporary accommodations - e.g. a welfare hotel or a shelter for the homeless; or
2. A **halfway** house or a similar institution that provides temporary accommodations for individuals as an alternative to institutionalization; or
3. A **temporary** accommodation in the residence of another individual limited to 90 days; or
4. A place not **designed** for, or ordinarily used as a regular sleeping accommodation for human beings. Examples are a hallway, a bus station, a lobby or similar places.

**Homeless Meal Provider**
11/01/98

A public or private nonprofit establishment such as a soup kitchen or a temporary shelter that feeds homeless persons.

Homeless meal providers may accept SNAP benefits in payment for meals served to homeless persons if the provider has received approval through the Department of Human Services and the U.S. Department of Agriculture.

**Household**
11/01/98

Individuals or groups of individuals determined to be a household for purposes of applying for and/or receiving SNAP benefits. See [SNAP 1630](#) for a full explanation.
Household Cooperation
11/01/98

Willingness of the household to work with the Agency in establishing eligibility for the program, at application or during any subsequent case review.

At application, the application form must be completed and signed, the household or the authorized representative must be interviewed, certain information must be verified, and the household must comply with any applicable work registration requirements. If a household refuses to cooperate with the county office in completing this process, the application will be denied at the time of the refusal. Before a determination of refusal can be made, a household must be able to cooperate but clearly demonstrate that no member will take the required actions. If there is a question about whether a household has refused or failed to cooperate, the household’s application will not be denied.

**Example:** To be denied for refusal to be interviewed, a household must clearly refuse to be interviewed rather than simply fail to appear at the scheduled time.

No household will be denied SNAP benefits solely because someone outside the household failed to cooperate with a request for verification. The term “outside the household” will not apply to ineligible students, ineligible aliens, or to individuals disqualified for one of the following reasons: a) intentional program violation; b) failure to provide a social security number; c) noncompliance with the work registration requirements; d) noncompliance with the workforce requirements; or failure to comply with the requirement to work.

A household’s case will be closed if the household refuses to cooperate during any subsequent eligibility reviews including any review generated by a reported change, field investigation or recertification.

Once denied or terminated for refusal to cooperate, a household cannot be determined eligible until the household does cooperate in the process of determining eligibility.

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**Immigrant**
11/01/98

A lawfully admitted alien who entered the U.S. with the expressed intention of establishing permanent residence.
APPENDIX: SNAP GLOSSARY

- Immigration and Naturalization Service (INS) - Meal Delivery Service -

Immigration and Naturalization Service (INS)
11/01/98
A Division of the U.S. Department of Justice.

Ineligible Alien
11/01/98
An alien who does not meet the eligible alien status requirement.

Institution of Higher Education
11/01/98
Any public or private institution that normally requires a high school diploma or equivalency certificate for enrollment.

This includes, but is not limited to, colleges, universities, and vocational or technical schools at the post-high school level. See SNAP 1622.1 for additional information.

Institution of Post-Secondary Education
11/01/98
Any public or private educational institution that admits persons beyond the age of compulsory school attendance for the state in which the institution is located.

Such institutions must be legally authorized or recognized by the state to provide an education in the state or must provide a program of training that prepares students for gainful employment.

Meal Delivery Service
11/01/98
A private organization that prepares and delivers meals and is authorized by FNS to accept SNAP benefits in payment for such meals.
Migrant
11/01/98
An individual who travels away from home on a regular basis with a group of laborers to seek employment in an agriculturally related activity.

Mixed Household
10/01/01
SNAP households in which at least one, but not all members, receive SSI and/or Transitional Employment Assistance (TEA) benefits.

Mixed households are considered to be “categorically eligible” if at least one household member receives a TEA benefit as described in SNAP 1920.

Narrative
11/01/98
An entry in the case record to explain any situation needing clarification or further documentation.

Net Monthly Income
11/01/98
Gross nonexempt income minus the allowable deductions.

Net monthly income is used to determine eligibility and SNAP benefit amount.

Nonprofit Meal Delivery Service
11/01/98
A political subdivision or a private nonprofit organization that prepares and delivers meals and has been approved by FNS to accept SNAP benefits in payment for meals.
Nonpublic Assistance (NA) Household
11/01/98

Any household that does not meet the definition of a PA (Public Assistance) household.
This includes households composed of a single SSI member or SSI recipients and essential person.

Notice of Action
11/01/98

Any notice issued to advise a household of an action or impending action on the SNAP case.

Notices of action are issued:

1. At approval or denial of an application;
2. To notify a household of an impending increase or decrease in SNAP benefits;
3. To notify a household of an impending case closure;
4. To notify a household of information that must be supplied or of a requirement that
   must be met in order for the household to continue participating in the Program; or
5. To notify a household of entitlement to restored or supplemental benefits.

Notices of action are automatically issued in most instances when approval or denial of an
application occurs or when supplemental benefits are issued. See FACTS Data Element Codes
Appendix for information about when automated notices are sent.

Notices of action must be manually issued in all other instances using a Notice of Action (DCO-1).
The DCO-1 will either be an advance notice or an adequate notice.

An advance notice is issued at least ten days before the effective date of the action. Day one of
the advance notice period is the date after the notice is issued. Advance notices are used when
an adverse action such as case closure or reduction in benefits is going to occur. For this reason,
such DCO-1s are referred to as an advance notice of adverse action.

Advance notices of adverse action must be issued when:

a. The county office is acting on a change in circumstances not reported by the household;
b. The household reported the change but all conditions in SNAP 11440 were not met; or
c. The household must provide some information or meet a requirement in order to
   continue participating in the Program.
No action may be taken until the notice has expired. The household may elect to continue receiving benefits at the same level if an administrative hearing is requested during this ten day period.

An **adequate notice** is issued to be received on or before the date the household’s SNAP benefits became available.

An adequate notice will be manually issued:

1. To notify any household of an impending increase in benefits; or
2. To notify any household of entitlement to a restoration.

An adequate notice may serve as a notice of adverse action when a household has reported the information resulting in a decrease in benefits or case closure and all conditions in SNAP 11440 are met. When an adequate notice is issued as a notice of adverse action, the household retains the right to continue receiving benefits at the same level if the adverse action is appealed within ten days of the date of issuance of the notice.

Neither an advance nor an adequate notice is required when:

1. All household members die;
2. A household moves from the county or state;
3. The SNAP benefit amount decreases because all installments of a restoration have been authorized;
4. A household was notified at certification of an expected decrease in benefits; or
5. A household requests case closure.

The county office may always issue an adequate notice as a courtesy or when requested by the household.

Specific information about the issuance and contents of notices of action appear in individual sections of policy.

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**Occasional Reporting**

11/01/98

SNAP households not subject to semi-annual reporting are required to report changes within 10 days of the date the change becomes known to the household.
APPENDIX: SNAP GLOSSARY

Outreach Notice
11/01/98

Any communicative effort performed cooperatively or singularly by Federal, State or local agencies and organizations, or by individuals, to inform low-income households of the availability of the Supplemental Nutrition Assistance Program and to encourage the participation of eligible households.

Overissuance
11/01/98

The amount by which SNAP benefits issued to a household exceed the amount the household was actually eligible to receive.

Program
11/01/98

The Supplemental Nutrition Assistance Program as conducted under the Food Stamp Act and regulations.

Prospective Budgeting
11/01/98

The process of calculating a SNAP budget based on a household’s anticipated monthly income and expenses for the upcoming budgeting period.

Prospective Eligibility
11/01/98

Determining eligibility based on a household’s anticipated circumstances.

Public Assistance (PA) 11/01/98

Transitional Employment Assistance (TEA) as authorized by the Social Security Act of 1935, as amended.
Public Assistance (PA) Household
11/01/98

A household in which all members are receiving TEA Cash Assistance and/or SSI benefits.

Households receiving public assistance from other states will be classified as nonpublic assistance (NA) until the household either applies for or begins receiving TEA Cash Assistance from Arkansas.

Quality Assurance Reviews
11/01/98

An administrative tool used to identify deficiencies in the eligibility process.

Reasonable Compensation
11/01/98

Boarder payments made to SNAP households that meet the minimum payment requirements specified by policy.

Recipient
11/01/98

A member of a household that receives SNAP benefits.

Refugee
11/01/98

A lawfully admitted alien granted conditional entry into the U.S. because he or she has fled a foreign country due to persecution or fear of persecution on account of race, religion or political opinions; or a natural disaster.
Report Month
11/01/98
The month during which a semi-annual report is submitted to and processed by the county office to affect the SNAP benefit amount for the following quarter.

Restored Benefits
11/01/98
SNAP benefits a household should have received in a previous month that were not issued due to an agency error.

Residency
11/01/98
Residing within the county. Does not include persons in the county solely for vacation purposes.

Retail Food Store
11/01/98
An establishment approved by FNS to accept SNAP benefits for eligible foods to be used for home consumption.

The following establishments may be considered retail food stores:

1. An establishment, or a recognized department of an establishment, or a house-to-house trade route whose eligible food sales volume is more than 50 percent staple food items for home preparation and consumption;
2. Public or private communal dining facilities and meal delivery services; private non-profit alcoholism and/or drug addiction treatment and rehabilitation programs; publicly operated community mental health centers that conduct residential programs for drug addicts and/or alcoholics, or an approved public or private non-profit establishment that feeds homeless persons;
3. Any private non-profit cooperative food purchasing venture, including those whose members pay for food prior to receipt; and
4. A farmer’s market.
Retroactive Benefits
11/01/98

SNAP benefits due a household as a result of the certification of an application held pending more than one calendar month.

For example, a household applies in June and is approved in July. June benefits are issued as retroactive benefits.

Roomer
11/01/98

A person to whom a household furnishes lodging, but not meals, for compensation.

Seasonal Farmworker
11/01/98

An individual who travels away from home to seek employment in an agriculturally related activity.

Secretary
11/01/98

The Secretary of the U.S. Department of Agriculture.

Self-Employed Individual
11/01/98

An individual who engages in an enterprise to produce income for himself or herself. See SNAP 5610.

Self-Employed Household
11/01/98

A household in which the primary source of income is self-employment.
Semi-Annual Reporting
11/01/98

Households that are given a 12 month certification period and required to submit a report every sixth month during the certification period.

Other reporting requirements are waived for these households.

Shelter for Battered Women and Children
11/01/98

A public or private non-profit residential facility that serves battered women 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 battered women and children.

Single Language Minority Household
11/01/98

A household in which all members speak the same non-English language and which does not contain an adult fluent in English as a second language.

Sponsored Aliens
11/01/98

Aliens lawfully admitted into the United States for permanent residence who are being sponsored by a U.S. citizen during the period required for the alien to become a permanent resident (3 years from the date of entry).

Spouse
11/01/98

Either of:

1. Two individuals legally married to each other; or
2. Two individuals who are living together and holding themselves out to the community as husband and wife by representing themselves as such to relatives, friends, neighbors or trades people.
**State**
11/01/98

Any one of the 50 states, the District of Columbia, Puerto Rico, Guam and the Virgin Islands of the United States.

**Striker**
11/01/98

Anyone involved in a strike or unified stoppage of work by employees including a stoppage by reason of the expiration of a collective bargaining agreement.

Any concerted slow down or other concerted interruption of operations by employees is also considered a strike.

**Student**
11/01/98

A household member who is enrolled in an institution of post-secondary education.

This includes household members who are enrolled to take correspondence courses. It does not include household members who are attending a high school or a course of study for a GED.

**Supplemental Benefits**
11/01/98

An additional issuance of SNAP benefits provided in the same month as the original issuance to correct an agency error or to process a change in a timely fashion.

**Thrifty Food Plan**
11/01/98

The diet required to feed a family of four persons as determined in accordance with the Secretary’s calculations.
The cost of such a diet is the basis for uniform benefits for all households regardless of the actual composition, except that the Secretary shall make household size adjustments in the Thrifty Food Plan taking into account economies of scale.

**Transitional Employment Assistance (TEA)**

11/01/98

This program, which replaced the AFDC Program in July 1997, helps economically needy families become more responsible for their own support and less dependent on public assistance.

Through employability assessments, employment planning, and the provisions of employment related services, the TEA Program helps recipients recognize their employment possibilities and helps them into jobs as soon as possible.

**Unlawful Strike**

11/01/98

The definition of unlawful strike is provided in **SNAP 1700**.

**Unpaid work**

06/01/18

Work performed in the public or private sector that is meant to improve or gain skills that prepare an individual with experience to enter the workforce. This can include unpaid activities in the public or private, non-profit sector that are for the good of the community. Participants are not monetarily reimbursed for the work performed. Unpaid workers cannot be used by an entity to supplant paid positions.
Verification
10/01/08

The use of third party information or documentation to establish the accuracy or validity of information provided by an applicant for SNAP benefits or a recipient of SNAP benefits.

The types of verification are documentary evidence, collateral contact and home visit.

At initial application (see SNAP 8100), households are required to furnish verification of actual utilities, medical costs, income, dependent care costs, and resources. Alien status and residency will be verified if not previously verified. Household composition, citizenship, utility standard entitlement, dependent care costs, excluded income, and work registration exemption will be verified if questionable.

When processing timely recertifications (see SNAP 10300) and untimely recertifications (see SNAP 10900), changes in income or actual utility expenses will be verified if the source has changed or the amount has changed by more than $25. Previously unreported medical expenses and total nonrecurring medical expenses that have changed by more than $25 will also be verified. Dependent care costs must be verified when the household reports a change in amount paid or change in provider. Income, total medical expenses or actual utility expenses that the household claims have changed by $25 or less will not be verified unless this information is incomplete, inaccurate, inconsistent or outdated. Alien status and residency will be verified if there has been a change. Unchanged information will not be verified unless the reported information is incomplete, inaccurate, inconsistent, or outdated.

Changes reported during the certification period are subject to the same verification procedures that apply at initial application except that reported income, total medical expenses or actual utility expenses which are unchanged or changed by $25 or less will not be verified unless reported information is incomplete, inaccurate, inconsistent, or outdated.

Previously unreported dependent care costs must be verified, as well as changes in amount and provider.

When a semi-annual report is submitted, households must report and verify all earned income. Otherwise, the verification requirements for reported changes will apply.
When a midpoint review is submitted from a household certified for longer than 12 months, all medical expenses must be reported and verified. Otherwise, the verification requirements for reported changes will apply.

General definitions of the terms incomplete, inaccurate, inconsistent, and outdated appear below:

**Incomplete**
Information will be considered incomplete when vital dates, names, figures or other information is missing. For example, information about actual utility costs is incomplete if the household has reported costs for gas, lights and water and has only furnished a gas bill as verification of actual utility costs.

**Inaccurate**
Information will be considered inaccurate when the worker has some reason to question the validity of the household’s statements. For example, a household reports that medical expenses are unchanged, yet the worker is aware that the household member with the deductible medical expenses has been approved for SSI and should now be receiving a Medicaid card.

**Inconsistent**
Information will be considered inconsistent when a review of the case file reveals a conflict between the reported information and the information already documented in the case file. For example, a household reports a $300 per month rent expense. A review of the case record shows that the household has not moved and the last reported rent amount was $50 because the household was receiving rental assistance from HUD.

**Outdated**
Information about fluctuating earned income is usually considered outdated if a month or more have elapsed since the household last furnished current verification. Information about stable earned income, unearned income received on a weekly or a biweekly basis, actual utility costs and medical expenses is outdated if three months or more have elapsed since the household last submitted current verification. Information about unearned income received on a monthly basis or received periodically is considered outdated if eleven months or more have elapsed since the household last submitted current verification. Information about liquid resources is considered outdated if eleven months or more have elapsed since the household last submitted current verification.

When verification is needed, the household has the primary responsibility for providing documents or other suitable information. The household must also provide the name of a collateral contact if necessary. (See the definition of “Collateral Contact” for additional information.)
The county office worker has the following responsibilities:

1. **Advising the household what must be verified and how it must be verified.**
   Recommended sources of verification may be found in the section of policy dealing with the item to be verified. For example, recommended sources of verification for earned income may be found in SNAP 5514.
   The *Request for Assistance* (DCO-215) contains a general list of items that must be verified. When an interview is scheduled on the *Notice of Appointment* (DCO-219), the lower portion of the form will be completed to advise the household of the verification requirements. If it is determined at the interview that additional verification is required, the worker will issue to the household a DCO-191 that clearly indicates the information to be provided. If verification is needed from a currently certified household, a *Notice of Action* (DCO-1) will be issued. See the definition of “*Notice of Action*” in this Glossary for additional information about the requirements for requesting verification from a currently certified household.
   When information from another source contradicts statements made by the household, the household must be so advised and given a reasonable opportunity to resolve the discrepancy.

2. **Assuring that required verification is accomplished and documented.** (See SNAP 314 for instructions on documentation.) Households may supply documentary evidence in person, through the mail, by facsimile or other electronic device, or through an authorized representative. Households will not be required to present verification in person at the County DHS Office. The worker must accept any reasonable documentary evidence provided by the household and will be primarily concerned with how adequately the verification proves the statements on the application.

3. **Assisting the household when the household is cooperating and it is difficult or impossible for the household to obtain the necessary documentary evidence in a timely manner or when the documentary evidence presented by the household is insufficient.**
   Such assistance may include making a collateral contact or making a home visit.
   Assistance with the verification process must be provided to any household upon request; however, at any time a worker becomes aware that a household needs help complying with the verification requirements, the worker must assist the household even if such assistance has not been specifically requested.
   For example, if a household turns in an income statement that has been improperly completed, the worker would contact the employer directly to verify earnings. If a household turns in an outdated statement to verify SSA benefits, the worker would access the SOLQ screen. In the case of an elderly client, a worker might assist in obtaining verification of medical expenses by contacting providers directly.
NOTE: ASSISTANCE TO HOUSEHOLDS WILL NOT BE LIMITED TO SITUATIONS THE SAME AS OR SIMILAR TO THESE SITUATIONS. ASSISTANCE WILL BE PROVIDED WHEN NEEDED.
## Appendix D: Current Standards

### Current Standard Deductions

<table>
<thead>
<tr>
<th>Type of Deduction</th>
<th>Amount</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Earned Income</td>
<td>20%</td>
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</tr>
<tr>
<td>2. Standard Deduction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Based on household size)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household size 1</td>
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<td>10-01-18</td>
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<td>Household size 2</td>
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<td>Household size 6 and up</td>
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<td>3. Utility Standard</td>
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<tr>
<td>4. Maximum Excess Shelter</td>
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<td>10-01-18</td>
</tr>
<tr>
<td>5. Standard Medical Deduction</td>
<td>$138</td>
<td>11-01-11</td>
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### Current SSI Maximum Payments

<table>
<thead>
<tr>
<th>Type of Payment</th>
<th>Amount</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSI Only – Individual</td>
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<td>01-01-19</td>
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<tr>
<td>SSI Only – Couple</td>
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<td>SSA/SSI – Couple</td>
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<td>SSI Only-Individual Reduced</td>
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<tr>
<td>SSI Only – Couple Reduced</td>
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<td>01-01-19</td>
</tr>
<tr>
<td>SSA/SSI-Individual Reduced</td>
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<tr>
<td>SSA/SSI-Couple Reduced</td>
<td>$791</td>
<td>01-01-19</td>
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Current Medicare Premium (Part B Only): $135.50
Current Medicare Premium (Part D Only): $35.02
## Appendix D: Current Standards

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<td>SSA/SSI – Couple</td>
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<td>SSI Only-Individual Reduced</td>
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<tr>
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<tr>
<td>SSA/SSI-Couple Reduced</td>
<td>$770</td>
<td>01-01-18</td>
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Current Medicare Premium (Part B Only): $134
Current Medicare Premium (Part D Only): $35.02
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<tr>
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<td>Household size 2</td>
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<td>Household size 3</td>
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Current Medicare Premium (Part B Only): $109.00
Current Medicare Premium (Part D Only): $35.63
A Guide to Sources of Unearned Income

SNAP MANUAL 07/01/05

Introduction

This Appendix was developed for the purpose of providing general information about guidelines for eligibility for various programs.

Reference may be made to this section when the caseworker suspects that an individual may be receiving benefits from any program specified. It may also be used to determine if an individual may be entitled to benefits. Individuals who appear to be eligible should be referred to the proper office to make application.

The following types of income are described:

- Child Support Enforcement (CSEU) ................................................................. 2
- Government Employees Insurance System .................................................. 3
- The Civil Service Retirement Act ................................................................. 3
- The Federal Employees’ Group Life Insurance Act ........................................ 3
- Railroad Retirement ..................................................................................... 4
- Railroad Unemployment Insurance ......................................................... 5
- Payments through the Social Security Administration ................................ 7
- Social Security Benefits (SSA) .................................................................... 7
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- Medicare ..................................................................................................... 9
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- Retroactive Benefits .................................................................................. 11
- Unemployment Insurance ....................................................................... 12
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**Child Support Enforcement (CSEU)**

The Office of Child Support Enforcement was established for the purpose of enforcing support obligations owed by absent parents to their children. Services are available to anyone, although individuals who do not receive TEA must return 13% of the amount collected as a fee.

Under title IV-D of the Child Support Enforcement Program, the State is assigned the rights to support rights of individuals who receive TEA. This permits the State to bring child support actions on its behalf, while at the same time, providing TEA cash assistance to needy families. Applicants for and recipients of TEA must cooperate in locating absent parents, establishing paternity, and establishing and enforcing support obligations. A nationwide Parent Locator Service is available through OCSE. It may be used by the State to locate absent parents to enforce child or spousal support obligations, to determine child custody, and to assist in cases of parental kidnapping.

The distribution rules for child support are as follows:

- If the family receives TEA, and the OCSE collects child support, the amount of the monthly TEA cash payment is deducted from the child support collected and retained. The balance of the child support payment, if any, is applied to arrearages that are assigned to the state. If there are no arrearages, the balance is sent to the family.

- If the family is not receiving TEA, the amount of the current support and any additional payment for arrearages owed to the family is paid to the family first. Any arrears owed to the State are collected by offsetting the noncustodial parents federal income tax refund, or collected after the child emancipates.

OCSE may collect past due child support by intercepting monies scheduled to be paid in:

- Federal income tax refunds;
- State income tax refunds; and
- Unemployment checks.

Federal payroll checks and certain Federal pension checks may be garnisheed to collect child support or alimony.
Government Employees Insurance System

The Federal Government, State Government and many local entities have retirement systems that cover some or all of their employees. Most of the systems make payments to qualified employees who are disabled or who retire because of age. Some also provide annuities for survivors.


The Civil Service Retirement Act

Provides annuities to qualified employees who retire because of age and years of service, involuntary separation not for cause, or disability. Annuities are also payable to the widows and minor children of employees who die and, in certain cases, to the survivors of annuitants. Deferred annuities are payable at age 62 to persons who have been in government service but left it before retirement age if they have not withdrawn their contributions. A minimum of five years civilian service is required for entitlement to annuity benefits on the basis of age or disability retirement. A minimum of 18 months is required for survivor annuities. The Compensation Group, Office of Personnel Management, Washington, DC 20415 administers this Act.

The Federal Employees’ Group Life Insurance Act

This Act provides insurance benefits for survivors of deceased Federal employees who have not waived coverage under this Act. Generally, life insurance coverage stops 31 days after separation from Federal service, but insured employees may retain coverage if they retire on an immediate annuity either for disability or after at least 12 years of creditable service. Claims are handled by the office of Federal Employee’s Group Life Insurance, 4 E. 24th Street, New York, New York 10010.

Conditions for receiving benefits and the amounts of the benefit vary considerably. Usually an employee must have had a considerable period of service to receive a substantial annuity. A person leaves a job after considerable service, but before retirement age may have the option of having his contributions returned or leaving them in the plan so that they may count toward an annuity at retirement age.
Other systems, especially those for police officers and firefighters provide monthly benefits to survivors, particularly aged widows. Generally, however, provision for survivor consists either of a refund of contributions or continuing payments to the survivors of an annuitant.

**Railroad Retirement**

The Railroad Retirement Act and the Railroad Unemployment Insurance Act provide protection for persons who work for railroads and certain companies closely connected with the railroad industry. These programs are administered by the Railroad Retirement Board.

The Railroad Retirement Act (RRA) provides railroad retirement annuities to qualified railroad employees and their spouses.

Railroad annuities, which are paid in the event of retirement, disability or death, are payable as early as age 60. Age and length of service determines the points of eligibility.

Disability annuities are payable if:

- An individual have at least 10 years of railroad employment or effective January 1, 2002, if less than 10 years or railroad employment have at least 5 years of railroad employment after December 31, 1995; Service months need not be consecutive, and in some cases military service may count. Credit for a month of railroad service is given for every month in which an employee has had some compensated service, even if only one day’s service is performed during the month.
- For occupational disability, with 10 or more years of railroad service, have attained age 60 but not yet full retirement age and is disabled for your regular railroad job;
- Or, any age, with at least 20 years of service and become partially disabled (unable to perform your regular job). An occupational disability is one that prevents you from performing your job with the railroad. It does not necessarily prevent you from working at some other kind of job.
- For survivors to be eligible for benefits, the employee must also have been insured at death.
- Total disability benefits are available at any age if you have become permanently disabled and have at least 10 years of railroad service. Total disability means that you must be unable to perform any kind of substantial gainful employment.

Annuities are also payable to:

- Spouses or divorced spouses;
- Widows/ers and surviving divorced spouses;
- Remarried widow(er)s;
- Mothers/fathers;
Railroad Unemployment Insurance

A Guide to Sources of Unearned Income

• Children;
• Grandchildren; and
• Parents of deceased railroad workers.

A lump sum may be payable because of your death if there are no survivors immediately eligible to receive a monthly annuity upon the individual’s death. As with Social Security, work after entitlement to any type of annuity affects eligibility to receive monthly payments.

Some employees may qualify for both a Railroad Retirement annuity and a Social Security benefit. If a determination is made that an employee is entitled to both, a combined payment will be made. A certificate of Award will be issued to the beneficiary indicating the Social Security benefit amount and advising that the Railroad Retirement Board will handle the combined payment.

Railroad Unemployment Insurance

The Railroad Unemployment Insurance Act provides benefits to qualified workers who are ill or unemployed. These payments are possible only after other payments have been exhausted (i.e. salary vacation pay, etc).

Qualifications which must be met are based upon:

• Length of service;
• Regency of employment;
• Past earnings;
• Availability for work;
• Incapacity; and
• Work registration or application.

The duration of payments and the total amounts payable are limited. The Railroad Retirement Board initiates eligibility determination and payment authorizations.

There are several requirements for getting unemployment insurance benefits.

You must:

• Register for work at a State employment service office and file a claim for benefits;
• Have worked before on a job covered by the State law. This includes most types of paid employment in industry and government, except certain agricultural and domestic employment;
• Have a certain amount of employment or earnings in covered employment during a specified “base period,” generally a year, before you claim;
• Be able to work. In general, unemployment insurance benefits are not payable to workers who are sick or unable to work for any other reason. However, a few States continue to pay the benefits within the legal limits to workers who became ill after they had established their claims.

• Be available for work and must be ready and willing to take a suitable job if one is offered; and

Not have:

• Quit your job voluntarily without good cause; (In some States the law says “without good cause attributable to the employer” or “connected with the work.”)
• Been discharged for misconduct in connection with your work;
• Refused or failed, without good cause, to apply for or accept an offer of suitable work. “Suitable” work is generally decided by the State.

However, under Federal law no worker may be denied benefits for refusing to accept a new job:

• Under substandard labor conditions;
• Where a labor dispute is involved; or
• Where you would be required to join a company union or to resign from or refrain from joining any bona fide labor organization.
• Become unemployed because of a stoppage of work as the result of a labor dispute, in which you are interested or participating, that occurred at the establishment where last employed.

Railroad annuities are subject to Federal income tax in the following way:

a) The Social Security equivalent portion of tier I benefit (These benefits are taxed the same way as Social Security benefits);

b) Tier II and the non-Social Security equivalent portion of tier I benefits are taxable in the same way as contributory private and public service pensions; and vested dual benefits and the supplemental annuity are taxable in the same way as non-contributory private and public service pensions.

For future information regarding the Railroad Retirement contact:

Information Service
U.S. Railroad Retirement Board
844 Rush Street
Chicago, Illinois 60611
Payments through the Social Security Administration

The Social Security Administration operates offices on a local level to administer the programs authorized by the Social Security Act.

At the Social Security office a person may:

- Apply for a Social Security Number;
- Check on his/her earnings record;
- Apply for Social Security Benefits;
- Apply for a hospital insurance protection (Medicare –Part A);
- Enroll for medical insurance (Medicare- Part B);
- Obtain information about individual and family rights and obligations under the Social Security Act; and
- Apply for Supplement Security Income (SSI).

The Social Security Administration provides these services free of charge.

Social Security Benefits (SSA)

- Retirement Insurance;
- Survivors Insurance; or
- Disability Insurance.

To receive benefits, a person must file an application and meet certain eligibility requirements. The Treasury Department makes payments on a monthly basis. Mode of payment may be:

- By check to the beneficiary;
- By direct deposit to a financial institution; or
- To a representative payee if the beneficiary is incapable of managing his or her own funds.

The following individuals may be entitled to receive Social Security checks

- Disabled, insured workers under the age of 65
- Retired, insured workers age 62 or over; or
- The spouse of a retired or disabled worker entitled to benefits who:
  - Is age 62 or over; or
  - Has in care a child under 16 (or over 16 and disabled), who is entitled to benefits on the worker’s Social Security record.
- The divorced spouse of a retired or disabled worker who is entitled to benefits if the spouse is age 62 or over and was married to the worker for at least 10 years.
The dependent, unmarried child of retired or disabled worker who is entitled to benefits if the child is:

- Under age 18; or
- Age 18 or over with a disability which began before age 22.
- The surviving spouse (including the surviving divorced spouse) of a deceased, insured worker if the widow (er) is age 60 or over.
- The disabled, surviving spouse (including surviving divorced spouses in some cases) of a deceased, insured worker if the widow (er) is age 50-59 and becomes disabled within a specified period of time.
- The surviving spouse (including a surviving divorced spouse) of a deceased, insured worker, regardless of age, if caring for an entitled child (under age 16 or disabled) of the deceased.
- The dependent parents of a deceased insured worker if age 62 or over.

Disability is defined as:

The inability to engage in any substantial gainful activity because of a medically determinable physical or mental impairment. The impairment must be expected to result in death or must last or be expected to last for a continuous period of not less than 12 months.

NOTE: There is a special blindness provision for a blind worker who has reached age 55.

A disabled worker is entitled to monthly cash benefits beginning with the first month in which the disabled worker meets all of the following conditions:

- Is disabled as previously defined;
- Has filed application for disabled workers benefits;
- Has disability insured status;
- Has completed a 5-month waiting period or is exempt from the requirement; or
- Has not attained age 65.

The waiting period consists of 5 full consecutive calendar months. It begins with the earliest full calendar month (not more than 17 months before the application was filed) throughout which the worker:

- Was disabled; and
- Had disability insured status.
- The worker is not entitled to benefits for any month in the waiting period. However, no waiting period is required when a worker was previously entitled to disabled worker’s benefits or to a period of disability, either of which ended within five years before the
month he became disabled. The waiting period is not applicable to eligibility for SSI benefits.

Social Security checks paid to retired workers may be adjusted to reflect earnings by the retired worker.

**Lump Sum Death Payments**

A lump-sum death payment of $255 is payable upon the death of an insured worker in the following order of priority:

- To the spouse who was living in the same household;
- To the spouse (excluding a divorced spouse) who is eligible for widow(er’s) benefits for the month of death; or
- To the children who are eligible for benefits on the worker’s record for the month of death.

Applications for lump-sum death benefits must be filed by the beneficiary within a two-year period unless the beneficiary is the widow(er) of the deceased worker, and was entitled to spouse’s benefits before the month in which the worker died.

**Medicare**

“Hospital Insurance Protection” means that insured persons may have benefits paid for certain hospital, physician, and related care services, (including surgery), home health services, and some items and services not covered under Part A, hospital insurance protection.

The medical insurance protection is financed through premiums paid by each person who enrolls (or by the state where the person is enrolled under a Federal/State agreement) and through contributions appropriated from federal general revenues.

Persons eligible for Medicare are listed below:

- Age 65 or over, and;
  - Eligible for monthly Social Security benefits on the basis of covered work under the Social Security Act; or
  - Not eligible for monthly Social Security or railroad retirements benefits, but meet the requirements of a special transitional provision; or
  - Not eligible for monthly Social Security benefits or Railroad Retirement benefits, but voluntarily enroll and pay a monthly premium; or
  - Would be eligible for monthly Social Security benefits if their Federal employment had been covered under the Social Security Act; or
  - Qualified Railroad Retirement beneficiaries.
A Guide to Sources of Unearned Income

Supplemental Security Income (SSI)

- Under age 65, and;
  - Entitled to or deemed entitled to Social Security benefits for 24 months;
  - Would have been entitled to Social Security benefits for 24 months due to a disability if their Federal employment had been covered under the Social Security Act; or
  - Entitled to Railroad Retirement benefits because of disability under certain circumstances.
  - Any age and have an end-stage renal disease, which requires a kidney transplant or a regular course of dialysis and meets the special insured status requirements.

A health insurance identification card is issued to each person entitled to hospital insurance protection. This is known as Part A coverage. No premium is paid for Part A coverage.

A person is generally eligible to enroll in the medical insurance plan if he or she is:

- Entitled to premium-free hospital insurance protection; or
- Age 65 or older, a resident of the U.S., and either:
  - A citizen of the U.S.; or
  - An alien lawfully admitted for permanent residence that has resided in the U.S. continuously during the 5 years immediately prior to the month in which he applied for enrollment.

Supplemental Security Income (SSI)

SSI is a cash assistance program available to the general public and administered by the Social Security Administration. U.S. citizens or legally admitted aliens residing in this country who qualify as aged (65 or older), blind, or disabled and who meet income and resource criteria may receive SSI.

Supplemental Security Income (SSI) is a program financed through general tax revenues. SSI disability benefits are payable to adults or children who are disabled, meet the income, resource and living arrangement requirements, and are otherwise eligible. The monthly payment is standardized in all States, but not everyone gets the same amount because it may be supplemented by the State or decreased by other income and resources.

To be eligible for SSI an individual may not have monthly countable income more than the Federal Benefit Rate (FBR). The FBR is established for eligible individuals and eligible couples. The FBR is reduced by one-third when an individual or couple resides in the household of another. This reduction is applicable only if support and maintenance in the form of both food
and shelter are provided. The reduction applies only for the months in which the living arrangement exists.

The FBR is also reduced if a beneficiary receives food, clothing, or shelter from others. The reduction, which depends on the value of the support received, generally does not exceed one-third of the FBR.

Countable resources may not exceed:

- $1,500 for an individual, or
- $2,250 for a couple.

Individuals may be disqualified for receiving SSI due to:

- Residence in a public institution if not receiving Medicaid;
- Failure to accept treatment for drug addiction or alcoholism;
- Absence from the U.S.;
- Refusal to accept vocational rehabilitation services; or
- Failure to apply for other benefits, pensions, etc., for which the individual is potentially eligible.

Individuals may qualify for both SSI benefits and Social Security benefits if they meet the requirements of each. Individuals who became entitled to a minimum Social Security benefit prior to 1982 continue to receive that benefit. Those who became entitled to a Social Security benefit after 1981 receive an amount based on their earnings in covered employment or self-employment. The amount of an SSI benefit is reduced if other income (including Social Security benefits) is received.

The eligibility of each SSI recipient is re-determined periodically to insure that eligibility continues and that payments are in the proper amount.

**Retroactive Benefits**

A person may be retroactively entitled to monthly SSA or SSI benefits before the month in which the application was filed. Retirement and survivor claims may be paid retroactively for up to 6 months and disability benefits may be paid retroactively for up to 12 months. Entitlement begins with the first month in which all the requirements were met during the designated period.

In some cases, a person may receive retroactive benefits even if he is no longer eligible when the application is filed. In these situations, benefits begin 6 months (or 12 months in certain cases involving disability) prior to the month when the application was filed and end with the month prior to the month eligibility ends.
When a person requests benefits in a written statement but dies before filing the application, benefits may be payable for certain months to a survivor whose eligibility depended upon the claimant’s entitlement to benefits.

Unemployment Insurance
The unemployment insurance program provides partial income replacement for a limited period to persons who become unemployed. It is a State-administered program with Federal participation.

ESD (Unemployment Security Department)
ESD is responsible for handling the claims of unemployed workers, deciding in each case whether the claimant is entitled to unemployment benefits, and issuing checks to eligible unemployed workers.

The general requirements for receiving unemployment insurance (UI) benefits are listed below.

- The worker must register for work and file a claim at the local ESD office.
- The worker must have previously worked on a job covered by the State law. This includes most types of paid employment in industry and government. Certain agriculture and domestic employment is not covered.
- The worker must have a prescribed amount of earnings during a specified “base period”, generally a year prior to the time a claim is submitted.
- The worker must be able to work. Unemployment Insurance benefits are not payable to workers who are sick or unable to work for any other reason.
- The worker must be available for work and must be ready and willing to take a suitable job if one is offered.

The worker must not have:

a) Quit his job voluntarily without good cause; been discharged for misconduct in connection with the work;

b) Refused or failed without good cause, to apply for or to accept an offer of suitable work; or

c) Become unemployed because of a work stoppage at the last place of employment due to a labor dispute in which he is interested or participating.

The amount of the weekly UI payment varies according to the benefit formula. Minimum limits and maximum benefits are stipulated. Benefits are payable for partial unemployment.
Unemployment benefits can be paid for a maximum of 26 weeks. Additional benefits may be paid for a limited period to workers who have exhausted their regular unemployment benefits during a period of high unemployment.
How To File a UI Claim

A claim for Unemployment Insurance may be filed in person at any Employment Security Department Office or on forms for filing claims by mail, which have been placed in most public buildings.

Eligibility for Benefits

Claims must be filed with a State Employment Security Department office. Certain conditions must be met during each week for which benefits are payable.

To be eligible, you must be:

• Unemployed,
• Physically and mentally able to perform suitable work,
• Available for suitable work,
• Making a reasonable effort to find work,
• Free of participation or direct interest in a labor dispute, and
• Free of disqualification

In addition to the above, a waiting period of one (1) week must be served before benefits are payable to you. A week to be used as a valid waiting period must be a valid week of unemployment. A valid week of unemployment must be a week you have claimed subsequent to filing your Initial Claim, in which you did not have any earnings or had earnings of less than 140% of your Weekly Benefit Amount, met all Eligibility Requirements, and week for which you are not disqualified.

ABLE TO WORK means being physically and mentally able to perform work similar to work you performed in the past or other work for which you are fitted by experience and training to perform and have a reasonable expectancy of obtaining.

AVAILABILITY FOR WORK means being ready to accept work at once, and there are not circumstances, personal or otherwise, which would prevent you from accepting suitable work.

REASONABLE EFFORT TO FIND WORK means making personal efforts to secure suitable work by contacting persons with hiring authority, union local, etc., or doing those things reasonable for you to do in regard to your occupation which would result in your finding employment as soon as possible.

After a reasonable period of time, you must expand your efforts and seek work in related fields, which utilize a lesser skill.
Veteran’s Benefits

Veterans of service in the U.S. Armed Forces who were discharged under conditions other than dishonorable, are provided more than 40 different benefits and services by the Federal government. Benefits are also paid to a veteran’s survivor and, in some circumstances, to the families of living veterans.

Some of the benefits administered by the Veterans’ Administration are listed below.

1. Compensation for service-connected disability.
2. Pension for non-service-connected disabilities for veterans of World Wars, the Korean conflict, and the Vietnam era. (There is no special service pension for Spanish-American War veterans.)
3. Compensation to survivors of service members who died in service or from a service-connected cause.
4. Pensions for survivors of veterans who served during the Spanish-American War, the World Wars, the Korean conflict or the Vietnam era and died from a non-service-connected cause.
5. U.S. government and National Service Life Insurance including protection against disability, Veterans Special Life Insurance. Under commercial programs supervised by the Veteran’s Administration, Serviceman’s Group Life Insurance and Veterans Mortgage Life Insurance is available.
6. Payment toward the veteran’s burial expenses, plus an American flag to drape the casket.
7. Medical service, such as hospitalization, nursing home care, examinations, outpatient medical and dental treatment, and prosthetic devices.
8. Domiciliary care.
9. Home, farm and business loans.

An individual’s financial status may impose limitations on available services and benefits when the basis of eligibility is not a service-connected disability.

Special payments are made by the Veteran’s Administration to a widow, widower, divorced wife, parent, or child of a deceased veteran if all of the following conditions are met.

*The veteran died after 1956:*

1. While in the service; or
2. As a result of service performed after September 15, 1940; and
3. The veteran was not insured under the Social Security Act; or
4. The survivors are entitled to monthly Social Security benefits if the veteran had been insured under the Social Security Act; and the survivor is not disqualified from receiving
Social Security benefits because the Railroad Retirement Board has jurisdiction of the survivor’s claim.

The term “service” means active duty, active duty for training or inactive duty training.

**Worker’s Compensation**

Worker’s compensation laws ensure medical care and cash benefits to a worker injured in connection with a job or cash benefits to dependents if the worker is killed.

All employers with three or more employees must carry worker’s compensation insurance with the following exceptions:

- Agricultural farm laborers; and
- Employees of totally charitable, non-profit organizations.
- It is against the law for the employee to pay any portion of the Worker’s Compensation Insurance premium.
- The employee must be off work more than 7 seven days as a result of a job related injury to be eligible for weekly benefits. Weekly benefits are paid at 66-2/3 percent of the employee’s average weekly wage with a maximum of $175.00 per week.
- Weekly benefits will continue until the employee is completely healed. If the disability is permanent, compensation will be paid according to the degree of disability.

Worker’s Compensation will also pay all reasonable and necessary medical costs related to the injury. Death benefits to a widow are usually provided throughout her lifetime unless she remarries and may also be provided to surviving children until they reach a given age.
Introduction

Child support received through the Office of Child Support Enforcement (OCSE) will be verified through the DCO-OCSE Inquiry Interface on ANSWER. (This interface may also be accessed through DHS Share.) Authorized DCO staff may utilize this interface to inquire OCSE child support collections and distributions where necessary to determine eligibility for DCO programs. Instructions for using this inquiry interface are provided in this Appendix.

Log-On Process

The DCO-OCSE Inquiry Interface may be accessed through ANSWER or through DHS Share.

Log-on instructions are provided at the interface link.
Field Definitions

Terms are defined in order of appearance on the child support screen.

Fields under DHS Case Summary

SSN – This is the DHS client’s social security number.

View All – When the screen is accessed, “View All” is visible. Click on “View All” to open all the tabs. Also, click on “View All” to print all of the available information.

Case ID – This is the OCSE case number. After the SSN has been submitted, the “Case ID” number is available.

Status – This is case status – open or closed. A code “O” appears if the case is open. A code “C” appears if the case is closed.

CP – This is the name of the custodial parent; the person who has custody of the dependent child.

NCP – This is the name of the non-custodial parent; the parent who does not have custody of the child.

Dependents – This is a list of the names of all the children the custodial parent and the non-custodial parent have in common.

Fields under Case Details

Case ID – This is the OCSE case number. It appears after the SSN of the DHS client has been submitted.

Interstate Ind – This code indicates whether or not more than one state is involved in child support collection activities. If the word “Interstate” appears, child support collection activities are handled by Arkansas and at least one other state. If all child support collection activities are handled within Arkansas, the words “Not an Interstate Case” appear.

Recovery Ind – This code indicates when child support arrearages are owed to the custodial parent or the state. The following codes indicate recovery status:

“N” No recovery support is owed.
“Y” Recovery support is owed.
“A” Arrearages owed to the State
“T” Arrearages owed to TANF (TEA)
“B” Arrearages owed to both the State and the custodial parent
Status – This is case status – open or closed. A code “O” appears if the case is open. A code “C” appears if the case is closed.

Case Type – The case types are Non-TANF (TEA), TANF (TEA), and Medicaid.

Est Type – There are three establishment types:
- “P” Establish Paternity
- “S” Set Support Amount
- “O” Court Order established

Assigned County – This is the county to which the child support case is assigned.

Worker ID – This is the worker number of the child support worker assigned to the case.

Information Provided about the Non-Custodial Parent (NCP)

Name – This is the name of the NCP, usually the father.

Member ID – This is the number assigned to the NCP by OCSE.

Primary SSN – If an SSN is listed here, this SSN has been verified as belonging to the NCP.

Secondary SSN – If an SSN is listed here, the NCP’s SSN has NOT been verified.

DOB – This is the NCP’s date of birth.

Gender – This indicates the sex of the NCP.

Home Phone – This is the NCP’s home phone number.

Relation to Child – This indicates the relationship of the NCP to the child.

Work Phone – This is the NCP’s work phone number.

MSG Phone – This is a phone number where a message may be left for the NCP.

Mailing Address – This is the NCP’s mailing address.

Residential Address – This is the NCP’s home address.

Primary Employer – This is the name and address of the NCP’s main employer.

Secondary Employer – This is the name and address of any other employers.
SNAP Certification Manual – Appendix O

Office of Child Support Enforcement

Field Definitions

Information Provided about the Custodial Parent (CP)

**Name** – The name of the CP, usually the mother.

**Member ID** – The number assigned to the CP by OCSE.

**Primary SSN** – If an SSN is listed here, this SSN has been verified as belonging to the CP.

**Secondary SSN** – If an SSN is listed here, the CP’s SSN has NOT been verified.

**DOB** – This is the CP’s date of birth.

**Gender** – This indicates the sex of the CP.

**Home Phone** – This is the CP’s home phone number.

**Relation to Child** – This indicates the relationship of the CP to the child.

**Work Phone** – This is the CP’s work phone number.

**MSG Phone** – This is a phone number where a message may be left for the CP.

**Mailing Address** – This is the CP’s mailing address.

**Residential Address** – This is the CP’s home address.

Information Provided about the DEPENDENT Child

**Name** – This is the child’s name.

**Member ID** – This is the number assigned to the child by OCSE.

**Primary SSN** – If an SSN is listed here, this SSN has been verified as belonging to the CP.

**Secondary SSN** – If an SSN is listed here, the CP’s SSN has NOT been verified.

**DOB** – This is the child’s date of birth.

Information Provided about the Support Order

**Order ID** – This is the support order ID number.

**Docket ID** – This is the court docket ID number.

**Court City** – This is the city where the support order was filed.

**Order Type** – This indicates the type of support order such as court order or agreed order.
Field Definitions

Obligation Details

Order Issued Date – This is the date the court order was issued.

Effective Date – This is the date the court order became effective.

End Date – This indicates the end date on the court order. NOTE: The system assigned date for future end dates is 2099.

W/A Ind – This is the wage assignment indicator.

No W/A Reason – This indicates that the client is not eligible for wage assignment.

Exception Date – If there is not a wage assignment reason, then there has to be an exception reason and a date.

Installment Amt – This means that a driver’s license has been suspended and the NCP has made an agreement to pay child support so he or she may keep their license.

Frequency – This indicates the frequency of the child support payment.

Order Medical – This indicates that the NCP has been ordered to pay the child’s medical expenses.

Obligation Details

Member ID – This is the child’s member ID number.

Debt Type – CS: Child support – the debt being paid.

Obligation Amount – The amount that the NCP is obligated to pay. (Small amounts indicate that arrearages are being paid.)

Effective Date – This is the date that the court order to pay support became effective.

Frequency – This indicates the frequency of the child support payment.
SNAP Certification Manual – Appendix O

Office of Child Support Enforcement

Field Definitions

RCTD – Information about Receipt of Child Support from the NCP

NOTE: Everything listed in this section applies only to the non-custodial parent (NCP).

**Receipt No.** – The date and the receipt number of the payment made by the NCP. The date listed in this column is the date the payment was disbursed.

**Source** – This is the source of the payment. Due to IRS confidentiality rules, OCSE is no longer allowed to divulge information that could identify IRS refunds. Therefore, all information has been removed from the “Source” field. Neither will the local OCSE office verify for DHS case managers that the source of a payment is an IRS refund. However, they will provide this information to the individual who received the payment.

**Type** – This is the way that money is sent from an employer to OCSE: check, electronic fund transfer (EFT), cash, etc.

**Collect Date** – This is the date the payment was collected.

**Case ID** – This is the OCSE case identification number.

**Amount** – This is the amount that was collected.

**Status** – This is the status of the payment:

- **ID** – The payment has been identified and will be posted.
- **Research** – The payment has been placed on hold for some reason. When the check has been released from hold, the receipt number in the “Receipt No.” column of the check released will match the receipt number of the check that was placed on hold.
CHKV – Information about Payment of Child Support to the CP

**NOTE:** Everything listed in this section applies to the custodial parent (CP) only.

**Check No.** – The check number of the check issued to the CP.

**Disburse Date** – The date that the check was mailed to the CP.

**Amount** – The amount of the check mailed to the CP.

**Offset Amount** – The Offset Amt column will show the amounts that were deducted from the child support check. See Offset Type.

**Offset Type** – The Offset Type explains why the amount listed under “Offset Amt” was deducted from the child support check. There are three offset types:

1. **Cost** – This is the amount charged to the household for collection activities. DO ADD this amount back to the child support check amount when determining the gross child support amount for SNAP purposes.
2. **Overpayment** – This amount was deducted by OCSE as the result of a prior overpayment to the CP. DO NOT ADD this amount back to the child support check amount when determining the gross child support amount for SNAP purposes.

**NOTE:** If both COSTS and OVERPAYMENTS were deducted, then this column will only show the COSTS. So, if COSTS appear to be higher than normal, the county office should clarify the situation with OCSE.

3. **Advanced** – The CP was issued a check in advance. When the money from the NCP comes in, OCSE will recoup this amount in full.

**Status** – This is the status of the check that was issued to the CP.

- **Issued:** A check was issued to the CP.
- **Cleared:** The check has been cashed; it has cleared the bank.
- **Stale Dated:** The check was not cashed within 90 days.
Explanation of Screen Example:

1. The first line in the RCTD portion of the screen shows that child support was collected from the absent parent on 04/08/02 in the amount of $568.

2. The first eight digits in the “Receipt No.” column indicate the date the money was disbursed to the client (custodial parent). This date should match up with the “Disburse Date” in the CHKV portion of the screen. In the first line of the CHKV portion of the screen, the “Disburse Date is the date the check was issued to the client.

3. The next column, “Amount”, shows the net amount of the check that was issued.

4. The “Offset Amt” column shows amounts that were deducted for “COSTS” and/or “OVERPAYMENTS”.

5. The “Offset Type” identifies the “Offset Costs”. If both COSTS and OVERPAYMENTS were deducted, then this column will only show the COSTS.

Since this income is received on a monthly basis, $568 would be counted in the SNAP budget.
Introduction

On August 22, 1996, Public Law 104-193, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 was enacted. Under this law, only certain categories of aliens are eligible for Supplemental Security Income (SSI) and SNAP benefits.

One of the categories of eligible aliens includes aliens who have been lawfully admitted to the United States for permanent residence under the Immigration and Nationality Act (i.e., qualified aliens) and who have worked or who can be credited with 40 qualifying quarters of work under Social Security Administration guidelines.

The Social Security Administration, which is the primary source of information on qualifying quarters of work, has developed an automated system to provide an array by year beginning with 1937 of all quarters of coverage derived from work covered by the Social Security Act and all Federal, State, or local Medicare only wages beginning with 1983. Information about the months in which a title XVI (SSI) payment was received will also be provided. This is important because after December 31, 1996, a qualifying quarter will not be credited if the alien received a Federal means-tested public benefit in that quarter.

This guide is not intended to replace the citizenship policy at SNAP 1621 - 1621.7.4. It is intended to provide instructions for verification of using the SSA Quarters of Coverage History System.
Glossary
The following terms will be used throughout these guidelines:

**Applicant** - The person who is applying for benefits.

**Covered Earnings** - Wages or self-employment income which require payment of FICA/SECA (Social Security) taxes.

**LAG Quarters** - Up to seven quarters of coverage earned in the current year and the year preceding the current year may not appear on the QCHS when the employer report or self-employment tax return has yet to be processed by SSA.

**Non-covered Earnings** - Wages or self-employment which do not require payment of FICA/SECA (Social Security) taxes.

**Number Holder** - An individual who has a social security number assigned to him or her.

**QCHS** - The Quarters of Coverage History System will provide verification of all covered earnings or non-covered earnings assigned to a calendar quarter.

**Quarter** - A period of three calendar months ending March 31, June 30, September 30 and December 31.

**Quarter of Coverage** - Credit for covered earnings assigned to a calendar quarter. Quarters of coverage are earned by working at a job or as a self-employed individual. A maximum of four quarters can be earned each year.

**QQ History** - A display of qualifying quarters by quarter and year.
Accessing the System
There is no charge for information provided through QCHS.

The Social Security Administration (SSA) will be the primary source of verification for quarters of coverage information.

The following procedures will be used to determine if the alien has been in the U.S. long enough to have 40 qualifying quarters of work under Title II of the Social Security Act:

- Determine how many years of possible SSA coverage this alien has. (Years alien lived in the U.S. or otherwise paid social security taxes + years spouse lived in the U.S. + years alien’s parents lived in the U.S. before alien’s 18th birthday = years of possible coverage.) Include any work outside the U.S. if alien paid U.S. social security taxes on the wages. Do not include quarters of work earned by the alien’s minor child or children.
- If the total is less than 10 years, STOP. It is not necessary to verify quarters of coverage through the WQRY screen. The alien is not eligible to participate in the Supplemental Nutrition Assistance Program. See SNAP 1621.6.
- If the total is 10 years or more, obtain the alien’s written consent to access SSA’s records for information about the alien’s qualifying quarters of work.

Obtaining The Alien’s Consent To Access SSA Records
Each alien must provide the full name, social security number, date of birth and sex of each individual whose earnings will be used to establish the alien’s qualifying quarters.

A Consent for Release of Information (SSA-3288) must be completed for each alien claiming eligibility based on 40 qualifying quarters of work. The alien must sign the consent. An SSA-3288 must also be completed for any spouse or parent whose earnings will be used to establish the alien’s qualifying quarters of work. Unless the spouse or parent is deceased, he or she must sign the consent allowing SSA to access his or her earnings record.

Consent forms must meet the following conditions:

- The consent form must indicate that information about the alien, parent or spouse can be released to your agency, and in the case that the individual is the parent or spouse of an alien, to the applicant.
- The consent form must authorize release of the individual’s social security number, identifying information, information about benefit payments and (under other) quarters of coverage history.
The alien must sign and date the form. If the individual is the parent or spouse of an alien, the individual must state their relationship to the alien and sign and date the form.

A copy of the Consent for Release of Information (SSA-3288) and the instructions appear in the FORMS Section of this appendix. Also provided is an example of a properly completed consent form. You may duplicate the form as you need to use it.

If someone refuses to sign the consent form, you must request information about this person’s qualifying quarters of work via a Request for Quarters of Coverage (SSA-513). A form SSA-513 and instructions for its completion are located in the FORMS section of this appendix. You may duplicate the SSA-513 and use it when needed.

YOU MUST RETAIN THE CONSENT FORM IN YOUR CASE RECORD. SSA WILL REQUEST TO SEE THESE FORMS IF A QUESTION IS RAISED OR IF THERE IS A REVIEW OF THE QCHS DATA PROVIDED.

ONCE THERE IS A PROPERLY COMPLETED CONSENT FORM IN THE CASE RECORD, SSA QCHS DATA MAY BE ACCESSED THROUGH THE SSA QUERY SCREEN (WQRY).

Go to the next page for instructions on accessing and reading the WQRY screen.

SSA will code the quarter fields with the following types of earnings/entries:

- **A** Agricultural
- **C** Wage
- **D** Military
- **G** Gift
- **J** Japanese Internment
- **M** Military
- **R** Railroad
- **S** Self-employment
- **X** Wage
- **F** Federal, State, or Local Wage QC
- **N** Quarter with no earnings, a non-QC
- **#** Questionable QC that can occur 1952 through 1977
- **Z** Questionable QC that can occur 1952 through present
Resolving Discrepancies

The minimum number QCs 1937-1950 field and maximum number QCs field provide information on qualifying quarters of work for individuals whose earnings records do not contain specific breakouts for quarters of coverage from 1937-1950. For these individuals, SSA will do calculations and provide a range of possible quarters of coverage. The minimum number QCs field will contain the result of dividing total earnings 1937-1950 by $400, and the maximum number QCs field will contain the result of dividing total earnings 1937-1950 by $50. There should not be entries in the Qualifying Quarters Pattern for 1937-1950 if there are entries in the minimum and maximum number QCs fields.

Resolving Discrepancies

Whenever an applicant, or another individual whose qualifying quarters of work are being credited to the applicant, does not agree with the QQ pattern provided on the WQRY screen, it will be necessary to resolve the discrepancy.

Current earnings will not usually appear on the WQRY until mid to late summer of the year following the year of earnings. Earnings for this period are called LAG earnings. The LAG period always covers the current year. It also covers the year just before the current year for the period September through December.

If the disputed earnings do not fall within the LAG period, SSA is responsible for investigating the discrepancy and correcting the record.

Determining Lag Earnings

You may accept a current employer prepared wage statement as proof of earnings. If the quarters in question are not in current year but were earned in the year before the current year, you may accept a W-2 (Wage and Tax Statement), W-2c (Statement of Corrected Income and Tax Amount), or an IRS copy of the individual’s tax return as proof of earnings.

The total number of qualifying quarters of work each year (up to 4) will be obtained by dividing the individual’s total earnings by the increment amount for the year. See the chart below for this information.

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
<th>Year</th>
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<th>Year</th>
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</thead>
<tbody>
<tr>
<td>1996</td>
<td>$640</td>
<td>1999</td>
<td>$740</td>
<td>2002</td>
<td>$870</td>
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<td></td>
</tr>
<tr>
<td>1998</td>
<td>$700</td>
<td>2001</td>
<td>$830</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Chart revised 01-01-02)
Problems with the Social Security Number (SSN)
If the alien indicates that he or she used more than one SSN or allowed others to use his or her SSN, then he or she will need to contact the local Social Security Office to resolve the issue or call 1-800-772-1213 to set up an appointment. Provide the individual with a copy of the WQRY screen and tell him or her to take the copy when he or she goes for the appointment. The alien may participate in the Supplemental Nutrition Assistance Program, if otherwise eligible, for up to six months while awaiting information from SSA.

Inadequate Information on File
Sometimes there is not enough information on the SSA record to determine whether there is a potential qualifying quarter of work. If so, you will see the following codes:

# - Questionable QC that can occur 1952 through 1977.

Z - Questionable QC that can occur 1952 through present.

If you see these codes in a quarter and the applicant does not meet the 40 qualifying quarters requirement without them, SSA will investigate the earnings and either confirm or deny the quarter. Refer the case to SSA Office of Central Records Operations via a Request to Resolve Questionable Quarters of Coverage (SSA-512). A form SSA-512 may be found in the FORMS section of this appendix. You may duplicate this SSA-512 and use it when needed. The SSA-512 must contain the following information:

- Name
- Social Security Number
- Date of Birth
- Year or Years in Question
- Return Address
- Copy of the WQRY screen

A separate form SSA-512 is required for each SSN to be investigated.

Mail the request and the copy of the WQRY screen to:

SSA, OCRO
P.O. Box 33015
Baltimore, Maryland 21290-3015

Allow 45 days for processing. If, after 45 days, you need to follow up on the status of the request, you should once again access the WQRY screen. If the entry has been updated, the # or Z will be overlaid with a code N or C. If the QQ pattern has not been updated after 60 days, call
Applicant Does Not Agree with Information Provided by SSA
If the applicant indicates his or her record is missing quarters or the code Z on WQRY is 1978 or later, the applicant must complete a Request for Correction of Earnings (SSA-7008). A copy of the SSA-7008 may be found in the FORMS section of this appendix. You may duplicate this form and provide it to the applicant. If the applicant needs assistance completing the form, such assistance should be provided. The SSA-7008 must be accompanied by proof of earnings for the period in question. Acceptable proof of earnings include, but is not limited to W-2 forms, check stubs, tax returns, and statements from the employer. Write “Welfare Reform” on top of the SSA-7008.

**NOTE:** If the discrepancy lies in the records of an alien’s parent or spouse, the parent or spouse must complete the SSA-7008 and provide proof of earnings.

If the applicant has no documentation, he or she should contact the local Social Security Office or call 1-800-772-1213 to arrange an appointment.

All SSA-7008s along with the documentation should be mailed to:

**SSA, OCRO**  
P.O. Box 33016  
Baltimore, Maryland 21290-3016

Allow 45 days for processing. After 45 days, you may follow up on the status of the request by accessing the WQRY screen. The alien may participate in the Supplemental Nutrition Assistance Program, if otherwise eligible, for up to six months while awaiting information from SSA.

**There is Non-Covered Employment**
SSA’s requirements for developing covered earnings are based on insured status rules and Title II entitlement. Therefore, occasionally, SSA will not be able to verify and credit covered wages and self-employment. In these instances, you may use the following guidelines to determine if an applicant has enough qualifying quarters of work.

**Step 1.** Review the WQRY screen with the applicant to determine whether qualifying quarters of work (QQs) are missing from the record. If QQs are not missing from the response, make your determination based on the information already obtained. If QQs appear to be missing from the screen, go to Step 2.
Step 2. Interview the applicant to determine if the alleged earnings are covered or non-covered. You should ask:

- Name and address of employer
- Dates of employment
- Amount of earnings
- Type of business or self-employment
- Rate of pay
- Work performed

Step 3. Based on the information gained in the interview, determine if the employment is covered. Generally speaking, about 97% of all employment is now covered under the Social Security Act. This includes all wages on which there is FICA withheld. The following charts provide general guidelines for certain types of employment on which an FICA may not be withheld.
## SSA Quarters of Coverage History System

### Chart1: Covered Employment – Non-Typical Wages

<table>
<thead>
<tr>
<th>Type of Employment</th>
<th>Year Coverage Began</th>
<th>Type of Employment</th>
<th>Year Coverage Began</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agricultural farm labor including domestics</td>
<td>1937</td>
<td>State and local elected official under a state or local retirement system</td>
<td>1955</td>
</tr>
<tr>
<td>Domestic service over $50 a calendar quarter through 1994</td>
<td>1951</td>
<td>State and local government, compulsory for non-members of employee’s retirement system</td>
<td>7/2/1991</td>
</tr>
<tr>
<td>Domestic service over $1000 per year</td>
<td>1995</td>
<td>Nonprofit organizations, elective</td>
<td>1951</td>
</tr>
<tr>
<td>Federal government civilians not under civil service</td>
<td>1951</td>
<td>Nonprofit organizations, compulsory</td>
<td>1984</td>
</tr>
<tr>
<td>Federal government - uniformed services</td>
<td>1957</td>
<td>Railroads - service less than 10 years covered by transfer of credits</td>
<td>1951</td>
</tr>
<tr>
<td>Homeworkers ($50 per quarter, state license)</td>
<td>1951</td>
<td>Tips - Cash tips of $20 or more in a month from one employer</td>
<td>1966</td>
</tr>
<tr>
<td>Homeworkers ($50 per quarter, no license needed)</td>
<td>1955</td>
<td>Vow of poverty members of religious orders if order elects to cover lay employees and members of the order</td>
<td>1972</td>
</tr>
<tr>
<td>State and local elected official not under a state or local retirement system</td>
<td>1951</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Chart 2 – Covered Self-Employment

<table>
<thead>
<tr>
<th>Type of Self-Employment</th>
<th>Year Coverage Began</th>
</tr>
</thead>
<tbody>
<tr>
<td>Farmers</td>
<td>1955</td>
</tr>
<tr>
<td>Materially participating (contributing) farmers</td>
<td>1956</td>
</tr>
<tr>
<td>Professional groups excluding lawyers, dentists, doctors, and other medical groups</td>
<td>1955</td>
</tr>
<tr>
<td>Ministers - elective</td>
<td>1955</td>
</tr>
<tr>
<td>Ministers - compulsory</td>
<td>1968</td>
</tr>
<tr>
<td>Lawyers, dentists and other medical groups excluding doctors of medicine</td>
<td>1965</td>
</tr>
<tr>
<td>Doctors of medicine</td>
<td>1965</td>
</tr>
<tr>
<td>American citizens employed in the US by foreign governments</td>
<td>1961</td>
</tr>
<tr>
<td>Direct Sellers (house to house salespersons)</td>
<td>1983</td>
</tr>
<tr>
<td>Real estate agents</td>
<td>1983</td>
</tr>
<tr>
<td>Newspaper and shopping news distributors</td>
<td>1994</td>
</tr>
</tbody>
</table>
Chart 3 – Employment Outside the United States

Employment outside the United States became covered according to the following schedule:

<table>
<thead>
<tr>
<th>Country of Employment</th>
<th>Year Coverage Began</th>
</tr>
</thead>
<tbody>
<tr>
<td>Puerto Rico</td>
<td>1951</td>
</tr>
<tr>
<td>Virgin Islands</td>
<td>1951</td>
</tr>
<tr>
<td>On American Ships and Aircraft</td>
<td>1951</td>
</tr>
<tr>
<td>Guam</td>
<td>1961</td>
</tr>
<tr>
<td>American Samoa</td>
<td>1961</td>
</tr>
</tbody>
</table>

If you determine that the missing QQs appear to be from covered employment, SSA must resolve the discrepancy as instructed above in the section entitled, “Applicant Does Not Agree with Information Provided by SSA.”

If you determine that the earnings are from uncovered employment, you must obtain satisfactory evidence that the earnings exist before you can use the earnings to credit QQs. The following list provides examples of evidence you may use to establish earnings from sources other than self-employment. This list is not all inclusive. You may accept other evidence if it appears to be legitimate and accurate.

- Form W-2 (Wage and Tax Statement)
- Form W-2c (Statement of Corrected Income and Tax Amount)
- Employer prepared statements
- Statements of earnings signed by the custodian of the employer’s records
- IRS copy of the employee’s tax return
- Individual’s copy of a Federal or State tax return
- Pay envelopes, vouchers and similar unsigned employer earnings statements to the employee or to a State or Federal agency
- Union records
- Records of state unemployment insurance agencies (e.g., ESD)
- An individual’s personal records

To establish QQs based on self-employment income, you may accept timely filed tax returns for the self-employed person. Be sure that the proof of filing, canceled check, money order or copy of Schedule C bearing the IRS time stamp indicates that the return was filed within 3 years, 3 months and 15 days after the year in which the self-employment income was derived. If a tax return is not available, you may accept other evidence to establish that the business did exist.
and that a profit was earned. Comparison of bills, vouchers and receipts are examples of evidence you might use to make this determination.

Chart 4 – Qualifying Quarters
After you are satisfied that the non-covered earnings exist, you may use the following chart to determine the number of QQs that can be credited.

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
<th>Year</th>
<th>Amount</th>
<th>Year</th>
<th>Amount</th>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1979</td>
<td>$260</td>
<td>1987</td>
<td>$460</td>
<td>1995</td>
<td>$630</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1980</td>
<td>$290</td>
<td>1988</td>
<td>$470</td>
<td>1996</td>
<td>$640</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1982</td>
<td>$340</td>
<td>1990</td>
<td>$520</td>
<td>1998</td>
<td>$700</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1983</td>
<td>$370</td>
<td>1991</td>
<td>$540</td>
<td>1999</td>
<td>$740</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1984</td>
<td>$390</td>
<td>1992</td>
<td>$570</td>
<td>2000</td>
<td>$780</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1985</td>
<td>$410</td>
<td>1993</td>
<td>$590</td>
<td>2001</td>
<td>$830</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The dollar amount on the chart indicates the amount needed to credit one qualifying quarter. You can combine covered and uncovered earnings to determine the total earnings for a year. You may use current year’s earnings; however, you may not use the current quarter’s earnings.

If you need to determine QQs based on quarters 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 1951-1954).
- Four credits were earned for each taxable year in which an individual’s net earnings from self-employment were $400 or more.
- A credit was earned for each $100 (limit to a total of four) for agricultural wages paid during the year for the years 1955-1977.

Normal Processing standards will apply if the alien must provide additional information to establish QQs. If the alien does not provide required verification by the end of the processing period, he or she will be treated as an ineligible alien until the information is provided. See SNAP 1621.6 for additional information.
**Voter Registration Appendix**

The National Voter Registration Act of 1993 (P. L. 103-31) requires each state’s public assistance agency to provide the customer the opportunity to complete an Voter Registration Application at any time a request for assistance is made. This requirement became effective January 1, 1996.

Voter registration is not a part of program eligibility requirements. Therefore, an application for assistance will not be denied nor will a case be closed due to failure to complete any forms in relation to voter registration. No forms or other documents related to voter registration except for the DHS-131 and Voter Registration Change of Status will be filed in the customer’s case record.

**DCO Employees will not:**

1. Seek to influence a customer’s political preference or party registration;
2. Display any such political preference or party allegiance;
3. Make any statement to a customer or take any action, the purpose or effect of which is to discourage the customer from registering to vote; or
4. Make any statement to a customer or take any action, the purpose or effect of which is to lead the customer to believe that a decision to register or not to register has any bearing on the availability of services or benefits.

**Explanation & Offer**

Each customer must be offered an opportunity to apply to register to vote when visiting the county office for purposes of applying for assistance, recertification/reevaluation, or for reporting changes of name or address. If a customer is applying for more than one service and is interviewed by two or more Program Eligibility Specialists on the same day, the offer has to be made at least once. The County Office will put into place a procedure that will ensure that the offer has been made.

Subsequent visits to the County Office for the purpose of completing the application/recertification process (e.g., customer returns the next day to furnish check stubs) will be considered part of the same application. Therefore, it is not necessary to make another offer for voter registration.

**Who Can Make The Offer**

The offer can be made by any employee or volunteer. If the offer is made by someone other than the Program Eligibility Specialist, a procedure must be in place to notify the worker that the offer was made to avoid duplication of effort during the program eligibility interview.

A Voter Registration Application form must be provided to anyone who requests one. If someone is not applying for DHS services but requests a Voter Registration Application form, the
worker will give him/her the form with instructions to mail it directly to the Secretary of State’s office. A declaration form will not be given in this instance, nor will it count on the daily recap report.

Customer Acceptance
If a customer states she/he wishes to register to vote, she/he will be given a Voter Registration Application to complete. The voter registration application can be completed at the county office and given back to the receptionist or the customer can take it with him or her and mail directly to the designated address. Assistance in completing the form will be provided if requested. It is a local decision as to whether the Agency-Based Declaration Statement will be completed. If it is completed, a copy may be given to the customer if requested. It is a local decision as to whether the "yes" declarations will be kept in the county office. Do not mail the declaration forms to the Secretary of State’s Office. The customer will be advised that a decision on his/her Voter Registration Application will be provided by the County Clerk’s Office. If there are other adult household members a Voter Registration Application may be given to the customer for the other adult(s) to complete. However, if the other adult(s) chooses not to register, a declination form is not needed.

The worker will put the agency code on the voter registration application that applies at the time it is being completed. For example, if the customer is applying for Supplemental Nutrition Assistance Program benefits at the time a voter registration application is being completed, the worker would use the SNAP code. If the customer is applying for several programs, just use one code (worker choice).

Telephone Interviews and Authorized Representatives
Applicants who are interviewed by phone and indicate a desire to register to vote should be mailed a Voter Registration Application no later than the date that a determination (approval or denial) is made on the case. This applies to both initial applications and reevaluation/recertifications.

The Voter Registration Application form will be mailed to the applicant/recipient any time an authorized representative is interviewed on the customer’s behalf. If a customer makes a telephone request for a Voter registration Application form, one will be mailed to his/her mailing address.

Access Arkansas
Applicants who apply through Access Arkansas may apply directly online by following a link to the Secretary of State’s website to register to vote.
SNAP/MSP Annual Review

Mail in applicants should be mailed an Arkansas Voter Registration Application no later than the date that a determination (approval or denial) is made on the case. This applies to both reevaluation/recertifications.

Customer Declination

If the customer declines to register to vote, then she/he will be asked to make the declination by checking "no" on the Agency-Based Declaration Statement. She/he should also sign and date the statement. If the customer refuses to complete the form, the DCO employee will print the customer’s name on the statement, date, and make a note of "refused to sign" in the comment section. A copy of the Agency-Based Declaration Statement may be provided to the customer if requested. A daily count of the declinations must be provided to the Secretary of State’s office when completing the Agency Daily Recap Reporting Form. The Agency Based Declaration Statement will be kept for 2 years in the County Office in a chronological file by month and year.

Change of Address or Name Change

If a customer reports a change of address or name change, a DCO-131, Voter Registration change of Status form and a Voter Registration Application will be sent to the customer advising that the change can be reported to the County Clerk’s office for voter registration purposes or that she/he can register to vote. A declaration statement will not be completed in this instance.

Submitting Applications

Completed Voter Registration Applications must be submitted no later than the date that a determination (approval or denial) is made on the case. This applies to both reevaluation/recertifications. The customer may mail his/her application; the address is on the back of the application. An envelope is not needed. An Agency Daily Recap Reporting Form will be completed and sent with the voter registration application. This form advises the Secretary of State’s Office of the number of declination and number of completed voter registration applications being submitted. A single report including all programs will be submitted. The County Office will retain a copy of the Daily Recap Reporting form for 24 months in a chronological file by month and year.

The County office must maintain a record of the number of Voter Registration applications mailed to the Secretary of State’s Office each day. No later than the 10th calendar day of each month, the county will report to the DCO Field Operations, via the DHS-132, Voter Registration Application Monthly Report, the number of voter registration applications and declinations submitted to the Secretary of State’s office in the prior month.