

## 2.2 FOOD STAMP BENEFITS

Case maintenance and corrective procedures specific to the Food Stamp program are outlined in this Section.

**NOTE:** When the Worker receives information about the Food Stamp AG during the certification period which requires additional clarification or verification, the Worker may request, but not require, that the client come into the office for an interview.

When reported information results in a change in benefits, proper notification is sent to the AG. See Chapter 6. Along with this notification, the Worker requests additional verification needed, if any, and states that failure to provide verification will result in **any** increased benefits reverting to the original allotment.

**EXAMPLE:** An AG is receiving a \$400 rental deduction which has been previously verified. On April 2<sup>nd</sup>, they report they are now paying \$600 to the same landlord. This information appears to be inconsistent based on rental amounts in the same area. The new amount is entered in RAPIDS and an ES-6 or verification checklist is sent for verification. If the new amount is not verified, the previously verified amount of \$400 is used as the rental deduction.

When additional or clarifying information is needed, the Worker must first request the information by using the ES-6 or verification checklist. If the client does not provide the information within the time frame specified by the Worker, the appropriate action is taken after advance notice. Changes reverting to the original benefit amount because of the client's failure to verify are subject to advance notice. See Section 6.3.

When a reported change results in a change in the certification period and the reporting requirements listed below, the client must receive notice of these changes. This is also included on the change in benefit notice.

### A. SOURCES OF INFORMATION

In addition to the sources listed in Section 2.1, the following are specific to the Food Stamp Program.

#### 1. Report Form, DFA-FS-2

The DFA-FS-2 is mailed with computer-generated notification letters and provides the client with a means to report changes.

When the Worker receives an DFA-FS-2, he makes any appropriate changes in the data system. When the information is unclear or follow-up is needed, the Worker contacts the client before taking action. Another DFA-FS-2 must be sent to clients who submit a completed DFA-FS-2.

## 2. Data **Exchange**, Reports, and Alerts

See Chapter 3 for IEVS information. All Food Stamp benefit reports are found in MOBIUS.

### B. REPORTING REQUIREMENTS

**All Food Stamp AG's must report changes related to eligibility and benefit amount at application and redetermination. The reporting requirements in this Section apply to recipient AG's only.**

The reporting requirements for Food Stamp recipients depend on the AG composition and length of certification. These reporting requirements are only for Food Stamp benefits and do not affect the reporting requirements of any other program of assistance that the AG also receives.

Regardless of the AG's reporting requirements, all changes reported directly by an AG member, the AG's authorized representative and/or authorized EBT cardholder, or from a source that is listed as verified upon receipt below must be acted on, even if the AG is not required to report the information.

**EXCEPTION:** The AG is not required to report any periodic cost-of-living increases (COLA's) in federal benefits, such as the yearly increase in RSDI, SSI, Black Lung or VA benefits. This exception does not apply to an individual change affecting the level of a client's benefits, only to mass changes. See item D,8 below.

The following outlines the 2 different reporting groups, their requirements and reporting timeframes. These requirements only apply to recipients.

#### 1. Reporting Groups

##### a. Change Reporting AG's

All Food Stamp AG's in which all adults are at least age 60 and/or disabled with no earnings or only excluded earnings are certified for 24 months. These AG's may include individuals under age 18 as long as all adults are elderly and/or disabled. See Section 12.15,B for disability determination. **Changes which occur between the interview and approval must be reported within 10 days of the date of the approval notice. Once approved, these** AG's must **also** report the following changes which include, but are not limited to:

- Changes in AG composition;

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- **Changes in residence when the AG moves;**
- Changes **in shelter and utility expenses** when the AG moves;
- Changes in the **total** amount of **cash on hand, stocks, bonds or money in a bank account or savings institution that reach or exceed \$3,000;**
- Changes in a legal obligation to pay child support;
- Changes in the AG's income, including:
  - The onset of any non-excluded earned or unearned income
  - A change in unearned income of more than \$50.

Change Reporting AG's must report all required changes within 10 days of onset or knowledge of the change.

**b. Limited** Reporting AG's

All **other AG's which do not meet the requirements in 1,a for a 24-month certification are certified for 6 months. For this group, changes which occur between interview and approval must be reported and acted on prior to approval. Once approved, these AG's** must report when the total gross earned and unearned income of the AG and all other individuals who reside with the AG exceeds the AG's gross income limit. This must be reported no later than the 10<sup>th</sup> calendar day of the month following the month in which the change occurs. In addition, an ABAWD in an ILC must report when his work hours are reduced to less than 20 hours per week, averaged monthly, **or less than 80 hours a month.** See item D,7 below.

**No other changes are made for these AG's unless the information is reported by an AG member, comes from a source which is verified upon receipt, or from a source which is considered reported. See Item 2 below.**

**EXAMPLE: A 2-person AG is certified for 6 months beginning in April. On May 20<sup>th</sup>, one of the AG members begins working full-time. When the AG calculates the income received in May, it is below the gross limit. In the middle of June the client receives a raise. He receives one pay check in June with his**

**new rate of pay. When the AG calculates the income received in June it is still below the gross limit. No changes are required to be reported at this point. When the AG calculates its income in July, it exceeds the limit. The AG is required to report this by August 10<sup>th</sup>.**

**EXAMPLE:** An AG consists of a mother and 2 children and is certified for 6 months. The AG is required to report when the household's income exceeds the gross income limit for a 3-person AG. In the 3<sup>rd</sup> month, the children's father moves into the **residence**. At the end of each month, the AG must consider all income sources. The father's income, when combined with the AG's, exceeds the limit for the original 3-person AG. The AG must report this by the 10<sup>th</sup> day of the 4<sup>th</sup> month. The mother calls to report that the household's combined income exceeds the limit. The Worker determines the cause of the income change and must add the children's father since he is required to be included in the AG. See Section 9.1.

Even when the new household member is not required to be included in the AG, the excessive income must still be reported. When there is no required change to the AG, a recording must be made in case comments to explore other possible changes at the next redetermination.

**EXAMPLE:** Using the same situation above, if the man who moved in was not related to any of the AG members, and purchased and prepared his meals **separately**, the AG is still required to report the income change since the combined income exceeds the AG's limit. Once the Worker determines the cause of the income change, since no change is made to the AG, a recording is made and the situation is explored at the next redetermination.

## 2. Changes Acted On For All Reporting Groups

### a. Information Verified Upon Receipt

Action must be taken for all AG's when information is received from a source that is considered verified upon receipt. Verified upon receipt sources are not subject to independent verification and the provider is the primary source of the information. The only sources considered verified upon receipt are:

- BENDEX and SDX from SSA
- COLA Mass Change and reports in Appendix B
- SAVE from INS and 40 Qualifying Quarters information from SSA
- Unemployment Compensation from WV BEP data exchange
- Workers' Compensation from WV Workers' Compensation data exchange
- FSE&T's information that a client did not comply with work requirements
- IFM's determination of an IPV
- Notification of application for benefits in another state

**NOTE:** See Chapter 3 for data exchange sources.

b. Changes Which are Considered Reported

The following are considered reported changes for the Food Stamp Program and require follow up and/or action for all AG's.

- Communication from an AG member, such as an office visit, telephone call or written statement to report a change for any program of assistance in RAPIDS; or
- Communication from the AG's documented authorized representative and/or authorized EBT cardholder on behalf of the AG. See Sections 1.4,E and 1.4,T. This does not include SSI/RSDI payees, unless they are also the authorized representative or EBT cardholder.

**EXAMPLE:** An AG member calls to report that HUD has decreased their rental obligation for the same residence. Although neither reporting group is required to report this information, the change is made since it was reported by an AG member.

- Changes reported during an application for burial assistance **or** an application or redetermination for any program of assistance, **including Food Stamp benefits**, which is entered in RAPIDS **and includes an AG member**.

**EXAMPLE:** A child is included in a Limited Reporting Food Stamp AG with his mother. The next month the grandparents apply for Food Stamp benefits including the child of whom they now have physical custody.

Although the child's previous AG was not required to report this change, the child is removed from the AG so that he may be included with the grandparents.

EXAMPLE: A man applies for Food Stamp benefits in April and reports that he moved in with his sister in March. He pays her \$200 rent and is approved as a separate AG. The sister was previously approved Food Stamp benefits in January and is subject to Limited Reporting. The \$200 does not put her over the gross income limit and the change occurred during the certification period. No change is made to the sister's benefits except to note the income and living arrangements in case comments.

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- Information received on behalf of a client that results in changes being made in RAPIDS for another program of assistance.

**EXAMPLE:** A call is received from the hospital informing the agency of the birth of a baby for Medicaid purposes. If the baby is added to the Medicaid AG, **he** is also added to the FS AG.

**NOTE:** This does not include information reported solely to verify eligibility for a TANF supportive service. See Section 24.14.

- Information received from any source which the client was required to report for his Food Stamp benefits. See item 1 above.

**EXAMPLE:** A report is received from **QC** that the income of a **Limited** Reporting AG exceeds the gross limit. The information is acted on because the client is required to report it.

**EXAMPLE:** Mail is returned with a Postal Service sticker which indicates that the client moved out of West Virginia. For Change Reporting AG's, the case is closed after proper notice. For **Limited** Reporting AG's, if the Medicaid benefit is updated, the FS benefit is also updated.

### 3. Timely Reporting And Follow-Up

To determine if a claim must be established or a lost benefit restored, a decision must be made as to whether or not a change was reported in a timely manner.

**NOTE:** When a client fails to report household expenses which would normally result in a deduction, the AG loses their entitlement to that deduction. They have a right to the expense once it is reported and verified, if necessary. Retroactive benefits are not issued.

**NOTE:** Change Reporting AG's are required to report shelter/utility expenses when they move, even if the AG has not previously reported any expenses.

Reported changes are not effective the month they are reported. See item C below to determine when a reported change is effective.

When the client does not report in a timely manner and the change could have been made earlier, a claim may be established. See Chapter 20.

Benefits are not restored when the change which would have increased benefits is not reported within the AG's appropriate time limit. See item 1 above.

4. Contact Reviews and Redeterminations for 24-Month AG's

a. 12-Month Contact Review Of Eligibility

All FS AG's certified for 24 months must have a review completed in the 12th month of eligibility. This review differs from a full-scale redetermination as follows:

- The 12-month contact review may be completed by mail or by inROADS; and
- No interview is conducted unless the client requests one; and
- Form DFA-FS-12 or inROADS is used.

RAPIDS automatically mails a DFA-FS-12 to the 24-month AG's in the 11th month. It must be returned by the 1<sup>st</sup> business day of the 12th month. The Worker must check the form after it is returned to determine if any changes are required. Changes reported on the DFA-FS-12 are treated as changes reported during the certification period, not as changes reported during the completion of a redetermination, and all adverse actions require advance notice.

The form is considered complete when an AG member initials item number 8 on the form. If item 8 is initialed, the form must be logged in RAPIDS as complete. Verification is not requested on the DFA-FS-12, nor is it required for the form to be considered complete. If a change is reported that requires verification, it must be requested using form ES-6. Failure to provide requested verification results in AG closure or loss of a deduction after advance notice.

Failure to return a completed DFA-FS-12, or complete the review through inROADS, results in case closure, after advance notice.

When the DFA-FS-12 is returned late, but is returned by the last day of the 12th month, no new application is required. Benefits are



not prorated when the form is returned by the last day of the 12th month. The AG must be scheduled for its next redetermination at the same time it would have been due had the form been returned on time.

When the DFA-FS-12 is returned by the last day of the 13th month, no OFS-2 is required for reapplication. Instead, the DFA-FS-12 is used as the application form. Benefits for the 13th month must be prorated from the date the DFA-FS-12 is received. The AG must be scheduled for its next redetermination at the same time it would have been due had the form been returned on time.

When the DFA-FS-12 is returned after the last day of the 13th month, full application procedures must be followed, including completion of the OFS-2 and establishment of a new redetermination cycle.

When the 12-month contact review is completed through inROADS, no additional form is required. The client completes the signature requirement electronically. This function in inROADS is only available to the client during the 12<sup>th</sup> month.

If the client wishes to complete the contact during the 13<sup>th</sup> month, he must complete form DFA-FS-12.

b. 24-Month Redetermination

All FS AG's certified for 24 months must have a redetermination completed by the end of the 24<sup>th</sup> month of eligibility. Under no circumstances are benefits continued beyond the last month of certification period, unless a redetermination is completed and the AG is determined eligible. The 24-month redetermination differs from the 12-month contact review as follows:

- The 24-month redetermination may be completed by mail or by inROADS.
- An interview is required regardless of the method in which the redetermination is completed. A telephone interview is conducted unless the client requests a face-to-face interview. When the redetermination is submitted, the Worker completes the interview based on the client's choice of interview methods. When a face-to-face interview is selected, the Worker must schedule the appointment. When

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a telephone interview is selected, the Worker must attempt to contact the client as soon as possible. When the client chooses to complete a telephone interview, but no telephone number is available, a face-to-face interview must be scheduled. When the client chooses to complete a telephone interview, but the client cannot be reached in a reasonable amount of time, a telephone interview appointment must be scheduled.

- Form DFA-FS-24 or inROADS is used. The DFA-FS-24, inROADS redetermination or the OFS-2 and DFA-RR-1 may be used for redetermination in the 24<sup>th</sup> month. If the DFA-FS-24 is issued in the 23<sup>rd</sup> or 24<sup>th</sup> month, but not returned until the 25<sup>th</sup> month, no OFS-2 is required for reapplication. Instead, the DFA-FS-24 is used as the application form. Benefits are prorated from the date the application is submitted in the 25<sup>th</sup> month and a new certification period is established. Otherwise, the OFS-2 and DFA-RR-1 or inROADS application must be used if the client does not return the DFA-FS-24 by the end of the 25<sup>th</sup> month and wishes to reapply after the 24<sup>th</sup> month. The client is only required to complete one redetermination form.

RAPIDS automatically mails the DFA-FS-24 in the 23<sup>rd</sup> month. It must be returned by the 1<sup>st</sup> business day of the 24<sup>th</sup> month. The redetermination must be processed within the same timeframes used for a 6-month redetermination. Changes reported on the DFA-FS-24 are treated as changes reported during the completion of a redetermination.

The form is considered complete when signed by the client or his representative. The redetermination is not complete until an interview is conducted. If the completed form is received before the end of the last month of the certification period, and requested verification is received by the given due date, the client must receive uninterrupted benefits.

Failure to complete a redetermination and interview results in case closure. Notice of closure is required, but advance notice is not required.

### C. AGENCY TIME LIMITS

The first month that a reported change is effective is the month following the month the change is reported. The only exception to this is when the Department had the information prior to the month it is reported and failed to act on the information in a timely manner.

#### 1. Increase In Benefits

##### a. Addition of an AG Member or a Decrease in Income of \$50 or More

The change must be effective no later than the month following the month in which the change is reported. When the change is reported after the data system deadline, supplemental benefits must be issued and received by the 10th of the following month or by the AG's usual issuance cycle in that month, whichever is later.

The supplemental benefits are issued based upon the date the information is reported, regardless of whether or not the report is timely. Supplemental benefits issued in this situation are not considered restored benefits **and, therefore, not used to offset a repayment** as described in item E,1 below.

b. All Other Changes

For all other changes which result in an increase in benefits, except those described in item a above, changes are made as follows.

- If the next issuance date is more than 10 days after the date the change is reported, the change is effective the month following the report month.
- If the next issuance date is within 10 days of the date the change is reported, the change is effective 2 months after the report month.

The 10-day count includes the date of the report and takes the staggered benefit issuance date into consideration.

**EXAMPLE:** An AG reports an income decrease of \$30 on May 15th and next issuance is due on June 1. The change increases the benefit and is effective June.

**EXAMPLE:** An AG reports an increase in the rent amount on May 28th and the next issuance is due June 6th. Benefits will increase and the change is effective for July.

2. Decrease In Benefits

When the reported change results in a decrease in benefits, the change is effective the following month, if there is time to issue advance notice. If not, the change is effective 2 months after it occurs. No claim is established unless the client failed to report in a timely manner and this is the only reason the change could not be made within 13 days. See Chapter 20 for benefit repayment.

D. TYPES OF CHANGES

1. Change In Case Name

The case may be changed from one payee to another at the request of the individuals involved or when a change in circumstances requires it. This

includes, but is not limited to, marriage, divorce, or when the payee leaves the home.

The Worker must adhere to advance notice requirements when the name change involves an adverse action.

There are three types of primary EBT cardholders designated in RAPIDS: primary person (PP), legal guardian (LG) and protective/substitute payee (PS). When the Worker changes the primary cardholder, the existing EBT card is deactivated and a new card and new PIN is automatically issued. This includes a change from one type of primary cardholder to another. The EBT benefits cannot be accessed until the new card is received. This occurs even when the Worker changes the primary cardholder back to the original cardholder on the same day.

Any changes to spelling, middle initial or last name do not deactivate the existing EBT card. If the payee requests a new card to reflect the name change, it is requested on AIRQ the same day the RAPIDS change is entered or through the EBT Helpline the next day.

In addition, if the client reports non-receipt of the newly-issued card and the Worker issues another, the newly-issued card is deactivated and cannot be used if or when the client receives it.

Any time a new card is requested, the original card is deactivated. All EBT cards are mailed the next business day, excluding federal holidays, and should be received 5 to 7 days from the date requested.

Workers must inform all clients at the time of a change in payee that the current card will be deactivated and they must plan for this benefit inaccessibility if there is not an authorized cardholder who can access benefits during this time. The Worker may delay the entry of the change to give the client time to access enough benefits to provide for the AG until the new card is received.

For EBT, changes in the payee, address and authorized cardholder are sent to the vendor overnight and are not restricted to RAPIDS deadlines. Although the demographic change is sent and updated by EBT, a new card is only issued when there is a change in the primary cardholder or the Worker specifically requests a card on AIRQ.

## 2. Change In EBT Authorized Cardholder

When the client wishes to change the authorized cardholder for EBT, the Worker must delete the current cardholder on RAPIDS screen AIRQ and

enter the new cardholder's information, including the benefit(s) to which the cardholder has access. The client may terminate cardholder access immediately by calling the EBT Helpline or the DHHR Customer Service Center. Only EBT Helpline Customer Service Representatives and DHHR Customer Service Center staff can deactivate a card.

When the client calls the EBT Helpline first to stop cardholder access, he must still notify the DHHR Customer Service Center or the local office Worker of the cardholder change.

3. Change In Categorical Eligibility

When the client becomes eligible for WV WORKS or SSI, Categorical Eligibility may apply. See Chapter 1.

When case circumstances change so that the AG becomes eligible for additional disregards or deductions, the Worker must make data system changes and determine if supplemental benefits are required. See Chapter 10.

4. Change In AG

See item C,1,a above for changes in the AG which increase benefits. See item C,2 for changes in the AG which decrease benefits.

5. Change In Income

See item C,1,a and b above for changes in income which increase benefits. See item C,2 for income changes which decrease benefits.

**NOTE:** When a reported change in income results in a \$0 benefit amount, the AG is closed after proper notice. This applies whether or not the AG is categorically eligible.

6. Change In Work Requirement Status

When a change is reported that results in a change in an individual's Food Stamp work requirements, the Worker must ensure on an ongoing basis that the status of each recipient, mandatory or exempt, is correct in RAPIDS. See Chapter 13.

7. Change In Work Hours (ILC Only)

Regardless of the AG's reporting requirement, an ABAWD **in an issuance-limited county** must report when his work hours are reduced to less than 20 hours per week, averaged monthly **or 80 hours a month**. Upon receipt of such a report, the Worker must immediately determine if the client remains eligible. See Section 9.1.A.

8. Cost-Of-Living Increases In Federal Benefits

Recipients of federal benefits such as RSDI, SSI, Black Lung or VA Benefits may receive periodic cost-of-living increases (COLA's). RSDI/SSI increases are handled in accordance with instructions in Appendix B of this Chapter. All other federal benefit cost-of-living increases are treated as any other change, except that the client is not required to report the change nor is repayment required when the client fails to do so.

9. Change Of Address

A change of address is made in the data system as soon as the client reports it. Any other changes which the client reports, in addition to the address change, are also acted on at the same time, when notice requirements permit.

A change of address after deadline does not affect receipt of Food Stamp benefits in an EBT account. When the client requests a replacement EBT card and his address has changed, the address change must be made in RAPIDS before the new card is issued to insure the card is sent to the correct address.

**NOTE:** For EBT, changes in the payee, address and authorized cardholder can be made immediately since files are sent to the vendor overnight and changes are not restricted to RAPIDS deadlines.

10. Continuation Of Benefits

When a WV WORKS or Medicaid AG, also certified for Food Stamps, is closed, and there is enough information to continue Food Stamps, the Food Stamps must continue with no interruption in benefits. When notification of the closure is sent, it must also state that the AG continues to be eligible for Food Stamps. See Chapter 6. It is expected most AG's will continue to be eligible.

A new OFS-2 is not required. See Chapter 1 for establishing the redetermination date.

contacts the local office. The letter also informs the client that if he does not contact the local office within 13 days, benefits in the account will be applied to any outstanding Food Stamp claim(s). If the client contacts the local office, the Worker resets the account activity date and benefits cannot be applied to a claim(s) unless the client so requests.

If there are no claims and the client does not contact the local office, the benefits remain in the account.

If the account activity date is not reset, the RI, after contact with the local office Worker to check for client contact, takes action to apply the benefits to any outstanding claim(s). Any benefits which are not applied to a claim(s) remain in the account until expunged. See item c.

Once the account is dormant, any deposit into the account will not reset the activity date. At application or redetermination, the Worker must reactivate dormant accounts, if applicable.

c. Expunged Accounts - 270 Days

When the AG does not use Food Stamps for 270 days, benefits are expunged, i.e., removed, from the EBT account. An alert is sent to the Worker in the local office and to the RI, when there is an open claim(s) indicated on RAPIDS screen BVCL. A letter is sent automatically from RAPIDS to notify the client that all benefits in his account have been expunged. Expunged benefits may be used to reduce any outstanding Food Stamp claims.

After benefits are expunged, any deposit into the account will not reset the activity date. At application or redetermination, the Worker must reactivate dormant accounts, if applicable.



#### 14. EBT Cards Received In The Local Office

The local office may receive an EBT card and/or PIN from any number of sources, including the client, the Postal Service or other individuals. Regardless of the manner in which the card and/or PIN is received, it must be handled as a negotiable and secured by the Financial Clerk. The local office must not retain an EBT card for a client to claim unless he receives his mail at the office. When a replacement card is required, the Worker can request it through RAPIDS or the client can request it by using the EBT Helpline. The following procedures are used for EBT cards received in the local office.

##### a. Client Receives Mail in Local Office

When a client receives his EBT card and/or PIN by mail in the local office, it must be secured by the Financial Clerk and entered on the negotiable log. When claimed, the client must sign for the card and/or PIN. If not claimed within 5 calendar days, the Financial Clerk notifies the Worker. If not claimed in 30 calendar days, the Financial Clerk must contact the EBT Project Office (WV EBT) by GroupWise with the card name and number and how it was received to have the card deactivated. The card and/or PIN are then destroyed, noted on the negotiable log and the Worker is notified.

##### b. Client Returns EBT Card

EBT cards are not accepted by the Worker. When the client mails his EBT card to the local office with or without a request to return benefits, or intentionally/unintentionally leaves his card at the local office, the Financial Clerk must secure the card and contact the EBT Project Office (WV EBT) by GroupWise with the card name and number and how it was received to have the card deactivated. The card is then destroyed, noted on the negotiable log, and the Worker is notified. This includes cards found in the office lobby or a store parking lot and returned by another person.

If the client wishes to return benefits from the EBT account, he must complete and sign the IFM-EBT-1 indicating the amount to be returned. When the client is unable or unavailable to sign the IFM-EBT-1, the Worker must write "Signature Not Available" and record the reason. Benefits are removed from the account by a Supervisor or IFM Repayment Investigator. The client retains the card, unless the request to return benefits is mailed to the local office along with the card. In this instance, the card is destroyed using the above procedures.