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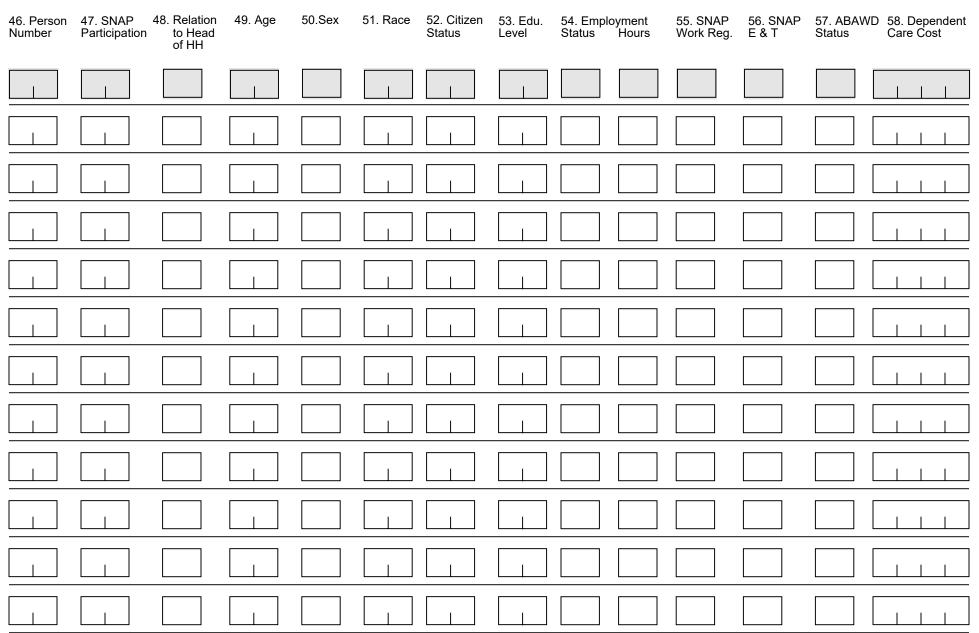
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QUALITY CONTROL REVIEW SCHEDULE

This information is being collected to assist the Food and Nutrition Service with the Supplemental Nutrition Assistance Program's Quality Control Reviews. This is a mandatory collection and FNS uses the information for program monitoring, evaluation, corrective action, and characteristics. This collection does request personally identifiable information under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0299. The time required to complete this information collection is estimated to average 1.056 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306 ATTN: PRA (0584-0299). Do not return the completed form to this address. PRIVACY ACT NOTICE: This report is required under provisions of 7 CFR 275.24 (SNAP). This information is needed for the review of State performance in determining recipient eligibility. The information is used to determine State compliance, and failure to report may result in a finding of non-compliance.

Section 1 - Review Summary

1. QC Review Number
2. Case Number
3. State
4. Local Agency
5. Sample Month and Year
6. Stratum

7. Disposition
8. Findings
9. SNAP Allotment Under Review
10. Error Amount
11. Case Classification

Section 2 - Detailed Error Findings

	12. Element	13. Nature	14. Cause	15. Error Finding	16. Error Amount	17. Discovery	18. Verified	19. Occurrence a. Date	b. Time Period
1									
2									
3									
4									
5									
6									
7									
8									

FORM FNS-380-1 (05-19) Previous Editions Obsolete
(RIN 0584-AE79)

Electronic Form Designed in AEM 6.4 Version

Section 3 - Household Characteristics

20. Most Recent Cert. Action Month, Day, Year	21. Type of Action	22. Length of Cert. Period #of months	23. Allotment Adjustment	24. Amount of Allotment Adjustment

25. Number of Household Members	26. Receipt of Expedited Service	27. Authorized Representative Used at Application	28. Categorical Eligibility	29. Reporting Requirement

Resources:

30. Liquid	31. Property (excluding home)	32a. Vehicle	32b. Status 2nd Vehicle	33. Countable Vehicle Assets	34. Other Non-liquid

Income:

35. Gross	36. Net

Deductions:

37. Earned Income	38. Medical	39. Dependent Care	40. Child Support	41. Shelter	42. Homeless

Additional Information on Shelter Costs:	43. Rent/Mortgage	44. Use of SUA a. Usage b. Proration	45. Utilities (SUA or Actual)

Section 4 - Information on Each Household Member

46. Person Number	47. SNAP Participation	48. Relation to Head of HH	49. Age	50. Sex	51. Race	52. Citizen Status	53. Edu. Level	54. Employment Status	Employment Hours	55. SNAP Work Reg.	56. SNAP E & T	57. ABAWD Status	58. Dependent Care Cost

You may record information on up to 16 individuals using additional pages.

Section 5 - Income Identified by Household Member

59. Person Number	Source 1 60. Income Type	61. Amount	Source 2 62. Income Type	63. Amount	Source 3 64. Income Type	65. Amount	Source 4 66. Income Type	67. Amount

You may record income on up to 10 individuals by using additional pages.

Section 6 - Reserved Coding

68. Application Proc.Timeliness	69.QC Interview	70.Recert Timeliness	71.Allotment Test	72. Household Zip code	73.	74.	75.	76.

Section 7 - Optional For State Use

1.
2.
3.
4.

INSTRUCTIONS FOR COMPLETING FORM FNS 380-1, QUALITY CONTROL REVIEW SCHEDULE

GENERAL INFORMATION

The Quality Control Review Schedule (QCRS) is the data entry form to record the results of SNAP Quality Control reviews.

The schedule consists of <u>seven</u> sections:

1 - Review Summary
2 - Detailed Error Findings
3 - Household Characteristics
4 - Information on Each Household Member
5 - Income Identified by Household Member
6 - Reserved Coding
7 - Optional - For State Systems Only

All entries in the QCRS are dollar amounts, dates, or numeric codes.

Dates - Use six or eight-digit numbers as the entry requires. For example, October 3, 2003 would be coded:

1	0	0	3	2	0	0	3

The October sample month would be coded:

1	0	2	0	0	3

Dollar Amounts - Round all dollar amounts to the nearest dollar; leading zeros are not required. For example, $165.00 is entered:

0	1	6	5

Not Applicable - If an item does not apply to the case reviewed, leave the applicable boxes blank.

Unknown - If an item is known to exist but the specific amount is not known, fill in all boxes for that item with 9's:

9	9	9	9

If no information is available or if the item does not apply to the household, leave the boxes blank. Do not enter zeros to indicate no information.

Stratum - States with stratified samples should submit to the FNS regional office a listing of the numeric codes utilized to identify stratum. Stratum codes are assigned by the State agency when the sample is stratified. If stratum codes are not used, leave blank or enter other identifying information at State option.

Local Agency Code - States must assign each SNAP local office and any call center unit with the ability to make eligibility determinations or redeterminations, a unique three-digit local agency code (LAC). The system requires a three-digit code.

The State may use Federal Information Processing Standards (FIPS) codes or use an alternative method to designate the local agency code. Once a State has selected a method, submit to the FNS regional office a listing of the local agencies and call center units and corresponding codes. Any updates to the LAC codes require a resubmission of the listing to FNS with the updates identified.

    FIPS Codes - The National Institute of Standards and Technology has developed codes for classification of counties and county equivalents. These codes were devised by listing counties alphabetically and assigning sequentially odd integers; e.g., 001, 003, 005.

QUALITY CONTROL REVIEW SCHEDULE

SECTION 1 - REVIEW SUMMARY

This section records the final determination of the QC review. It is used to compute the States payment error rate.

1. QC Review Number - Enter the number assigned to the Quality Control review.

2. Case Number - Enter the number assigned by the local agency to the household that was certified and has been reviewed.

3. State code - Enter the two digit State code from the following list of codes of National Institute of Standards and Technology.

State	Code	State	Code
Alabama	01	Montana	30
Alaska	02	Nebraska	31
Arizona	04	Nevada	32
Arkansas	05	New Hampshire	33
California	06	New Jersey	34
Colorado	08	New Mexico	35
Connecticut	09	New York	36
Delaware	10	North Carolina	37
District of Columbia	11	North Dakota	38
Florida	12	Ohio	39
Georgia	13	Oklahoma	40
Guam	66	Oregon	41
Hawaii	15	Pennsylvania	42
Idaho	16	Rhode Island	44
Illinois	17	South Carolina	45
Indiana	18	South Dakota	46
Iowa	19	Tennessee	47
Kansas	20	Texas	48
Kentucky	21	Utah	49
Louisiana	22	Vermont	50
Maine	23	Virgin Islands	78
Maryland	24	Virginia	51
Massachusetts	25	Washington	53
Michigan	26	West Virginia	54
Minnesota	27	Wisconsin	55
Mississippi	28	Wyoming	56
Missouri	29		

4. **Local Agency Code** – Enter the three-digit numeric LAC that represents the SNAP local office or call center unit that finalized the most recent certification action.

5. **Sample Month and Year** - Enter the month and year for which the case eligibility and benefit level were reviewed.

6. **Stratum** - Enter the two-digit stratum codes if sampling is stratified. If not stratified enter a State optional code or leave blank.

7. **Disposition** - Enter one of the following codes:

   1 - Complete
   2 - Not subject to review
   3 - Incomplete
   4 - Case deselected

   If codes 2, 3, or 4 are used, reviewers must also enter coded for items 9 in Section 1, 20-29 in Section 3, 46-53 in Section 4, and 68 and 70 (when applicable), in Section 6.

8. **Review Findings** - Enter one of the following codes:

   1 - Amount correct
   2 - Overissuance
   3 - Underissuance
   4 - Ineligible for not meeting conditions of eligibility (gross/net income tests, resources, citizenship, ineligible ABAWD, etc.)
   5 - Ineligible for non-compliance with a required process for issuing or continuing benefits [household never submitted an application, household participating with an expired certification, or household never submitted (or submitted an incomplete) mandatory report form]

   Enter actual finding regardless of whether it is below the error threshold. Do not complete sections 4 and 5, if ineligible codes 4 or 5 are used.

9. **SNAP Allotment Under Review** - Enter the authorized amount of SNAP subject to review for the sample month.

10. **Error Amount** - Enter the dollar amount of any identified error. The dollar amount of the error is the difference between the benefits the State authorized and the benefits the State should have authorized regardless of the error threshold. Use the lower error amount from comparison one or comparison two.

    - For overissuance or underissuance errors, enter the actual error amount whether or not it exceeds the QC error tolerance threshold.

    - For ineligible errors, enter the full amount of the error.

11.   Case Classification - Enter one of the following codes:

1 - Included in error rate calculation.
2 - Excluded from error rate calculation.
3 - Excluded from error rate calculation, as designated by FNS (e.g. demo project).

SECTION 2 - DETAILED ERROR FINDINGS

When a variance or variances exist for the final error determination, this section provides for the detailed coding of each variance identified during the QC review. If additional lines are needed to code error findings, attach an additional page. Since the information recorded in this section is the basis for corrective actions, the accuracy of the information is important. If more than one variance is identified, the variance that the agency believes is most significant in leading to the error should be listed first.

12.   Element - Enter the appropriate element number of the review for each variance identified.

13.   Nature codes - Enter the appropriate code for the nature of each variance.

The following provides the element and nature codes to be used in items 12 and 13.

These nature codes may be used in any element:

Nature code (97) - Change was not required to be reported by the household or acted upon by the State agency based on timeframes and reporting requirements.

Nature code (98) - Transcription or computation errors.

Nature code (99) - Use this nature code when 97,98, or none of the listed nature codes under an element apply to the error being recorded.

Element 111 - Student Status

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 130 - Citizenship and Non-Citizen Status

Nature codes:

<u>Citizens</u>

6 - Eligible person(s) excluded
7 - Ineligible person(s) included
124 - Variance resulting from use of automatic Federal information exchange system

<u>Non-Citizens</u>

200 - Eligible non-citizen excluded
201 - Ineligible non-citizen included
124 - Variance resulting from use of automatic Federal information exchange system

Element 140 - Residency

Nature codes:

99 - Other

Element 150 - Household Composition

Note: Variances should be coded under this element if a person or persons are unreported or incorrectly reported, unprocessed or incorrectly processed, and these persons also have income, resources or deductible expenses, which must be considered in the error determination.

For example: the discovery of an unreported 62-year-old with earned income, a bank account, and medical expenses would be recorded under Element 150 (Household Composition), not Elements 211 (Bank Accounts or Cash on Hand), 311 (Wages and Salaries), and 365 (Medical Deduction).

Variances should not be coded under this Element for persons with characteristics that are specifically addressed under other 100 Series Elements (Student Status through Social Security Number). For example: the discovery of an eligible non-citizen in the household who was improperly excluded would be coded under Element 130 (Citizenship and Non-Citizen Status), not under Element 150 (Household Composition).

Nature codes:

7 - Ineligible person(s) included
12 - Eligible person(s) with no income, resources, or deductible expenses excluded
13 - Eligible person(s) with income excluded
14 - Eligible person(s) with resources excluded
15 - Eligible person(s) with deductible expenses excluded
16 - Newborn infant improperly excluded

Element 151 - Recipient Disqualification

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 160 - Employment & Training Programs

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 161 - Time-limited Participation

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 162 - Work Registration Requirements

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 163 - Voluntary Quit/Reduced Work Effort

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 164 - Workfare and Comparable Workfare

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 165 - Employment Status/Job Availability

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 166 - Acceptance of Employment

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Element 170 - Social Security Number

Nature codes:

6 - Eligible person(s) excluded
7 - Ineligible person(s) included

Liquid Resources

🕐 **Element 211 - Bank Accounts or Cash on Hand**

Nature codes:

24 - Resource should have been excluded
30 - Resource should have been included

🕐 **Element 212 - Nonrecurring Lump-sum Payment (includes non-substantial lottery or gambling winnings)**

Nature codes:

24 - Resource should have been excluded
30 - Resource should have been included

🕐 **Element 213 - Other Liquid Assets**

Nature codes:

24 - Resource should have been excluded
30 - Resource should have been included

• **Element 214 – Substantial Lottery or Gambling Winnings**

Nature codes:

29 – Exceeds prescribed limit

Non-Liquid Resources

🕐 **Element 221 - Real Property**

Nature codes:

24 - Resource should have been excluded
30 - Resource should have been included

🕐 **Element 222 - Vehicles**

Nature codes:

24 - Resource should have been excluded
30 - Resource should have been included

🕐 **Element 224 - Other Non-Liquid Resources**

Nature codes:

24 - Resource should have been excluded
30 - Resource should have been included

🕐 **Element 225 - Combined Resources**

Nature codes:

20 - Incorrect resource limit applied
29 - Exceeds prescribed limit

INCOME (300)

Earned Income

🕐 **Element 311 - Wages and Salaries**

Nature codes:

32 - Failed to consider or incorrectly considered income of an ineligible member
33 - Failed to consider the income of an eligible member
35 - Unreported source of income (do not use for change in employment status)
36 - Rounding used/not used or incorrectly applied
37 - All income from source was known but not included
38 - More income was received from this source than budgeted
39 - Employment status changed from unemployed to employed
40 - Employment status changed from employed to unemployed
41 - Change only in amount of earnings
42 - Conversion to monthly amount not used or incorrectly applied
43 - Averaging not used or incorrectly applied
44 - Less income received from this source than budgeted
46 - Failed to consider/anticipate month with extra pay date
123 - Income incorrectly prorated

🕐 Element 312 - Self-Employment

Nature codes:

32 - Failed to consider or incorrectly considered income of an ineligible member
33 - Failed to consider the income of an eligible member
35 - Unreported source of income (do not use for change in employment status)
36 - Rounding used/not used or incorrectly applied
38 - More income received from this source than budgeted
39 - Employment status changed from unemployed to employed
40 - Employment status changed from employed to unemployed
41 - Change only in amount of earnings
42 - Conversion to monthly amount not used or incorrectly applied
43 - Averaging not used or incorrectly applied
44 - Less income received from this source than budgeted
45 - Cost of doing business not used or incorrectly applied

🕐 Element 314 - Other Earned Income

Nature codes:

32 - Failed to consider or incorrectly considered income of an ineligible member
33 - Failed to consider the income of an eligible member
35 - Unreported source of income (do not use for change in employment status)
36 - Rounding used/not used or incorrectly applied
38 - More income received from this source than budgeted
39 - Employment status changed from unemployed to employed
40 - Employment status changed from employed to unemployed
41 - Change only in amount of earnings
42 - Conversion to monthly amount not used or incorrectly applied
43 - Averaging not used or incorrectly applied
44 - Less income received from this source than budgeted
45 - Cost of doing business not used or incorrectly applied

Deductions

🕐 Element 321 - Earned Income Deductions

Nature codes:

52 - Deduction that should have been included was not
53 - Deduction included that should not have been
56 - Incorrect deduction amount included-budgeted too much
57 - Incorrect deduction amount included-budgeted too little

🕐 **Element 323 - Dependent Care Deduction**

Nature codes:

52 - Deduction that should have been included was not
53 - Deduction included that should not have been
56 - Incorrect deduction amount included-budgeted too much
57 - Incorrect deduction amount included-budgeted too little

Unearned Income

🕐 **Element 331 - RSDI Benefits**

Nature codes:

33 - Failed to consider the income of an eligible member
35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
124 - Variance resulting from use of automatic Federal information exchange system

🕐 **Element 332 - Veterans Benefits**

Nature codes:

35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
124 - Variance resulting from use of automatic Federal information exchange system

🕐 **Element 333 - SSI and/or State SSI Supplement**

Nature codes:

33 - Failed to consider the income of an eligible member
35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
124 - Variance resulting from use of automatic Federal information exchange system

🕐 **Element 334 - Unemployment Compensation**

Nature codes:

33 - Failed to consider the income of an eligible member
35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
124 - Variance resulting from use of automatic Federal information exchange system

🕐 **Element 335 - Worker's Compensation**

Nature codes:

33 - Failed to consider the income of an eligible member
35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
124 - Variance resulting from use of automatic Federal information exchange system

🕐 **Element 336 - Other Government Benefits**

Nature codes:

33 - Failed to consider the income of an eligible member
35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
124 - Variance resulting from use of automatic Federal information exchange system

🕐 **Element 342 - Contributions**

Nature codes:

35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
124 - Variance resulting from use of automatic Federal information exchange system

Note: Errors in Child Support Payments should not be recorded in this Element. See Element 350 (Child Support Payments Received from Absent Parent).

Element 343 - Deemed Income

Nature codes:

35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
124 - Variance resulting from use of automatic Federal information exchange system

Element 344 - TANF, PA, or GA

Nature codes:

35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
120 - Variance/errors resulting from noncompliance with this means-tested public assistance program
124 - Variance resulting from use of automatic Federal information exchange system

Element 345 - Educational Grants/Scholarships/Loans

Nature codes:

35 - Unknown source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
124 - Variance resulting from use of automatic Federal information exchange system

Element 346 - Other Unearned Income

Nature codes:

35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
58 - Income should have been excluded (no other coding option applies)
120 - Variance/errors resulting from noncompliance with this means-tested public assistance program
124 - Variance resulting from use of automatic Federal information exchange system

Element 350 - Child Support Payments Received from Absent Parent

Nature codes:

35 - Unreported source of income
37 - All income from source was known but not included
38 - More income received from this source than budgeted
44 - Less income received from this source than budgeted
111 - Child support payment(s) not considered or incorrectly applied for initial month(s) of eligibility
112 - Retained child support payment(s) not considered or incorrectly applied
124 - Variance resulting from use of automatic Federal information exchange system
127 - Pass through not considered or incorrectly applied

Element 361 - Standard Deduction

Nature codes:

52 - Deduction that should have been included was not
53 - Deduction included that should not have been
54 - Incorrect standard used (not as a result of a change in household size or move)
65 - Incorrect standard used resulting from a change in household size

Element 362 – Homeless Shelter Deduction

Nature codes:

51- Actual expenses exceeded standard; household opted for use of actual
52 - Deduction that should have been included was not
53 - Deduction included that should not have been

⏱ Element 363 - Shelter Deduction

Nature codes:

52 - Deduction that should have been included was not
53 - Deduction included that should not have been
56 - Incorrect deduction amount included-budgeted too much
57 - Incorrect deduction amount included-budgeted too little
64 - Incorrect amount used resulting from a change in residence

⏱ Element 364 - Standard Utility Allowance

Nature codes:

52 - Deduction that should have been included was not
53 - Deduction included that should not have been
54 - Incorrect standard used (Not as a result of a change in household size or move)
64 - Incorrect amount used resulting from a change in residence
123 - Incorrectly prorated

⏱ Element 365 - Medical Deductions

Nature codes:

51- Actual expenses exceeded standard; household opted for us of actual
52 - Deduction that should have been included was not
53 - Deduction included that should not have been
56 - Incorrect deduction amount included-budgeted too much
57- Incorrect deduction amount included-budgeted too little

⏱ Element 366 - Child Support Payment Deduction

Nature codes:

52 - Deduction that should have been included was not
53 - Deduction included that should not have been
56 - Incorrect deduction amount included-budgeted too much
57 - Incorrect deduction amount included-budgeted too little

⏱ Element 371 - Combined Gross Income

Nature codes:

28 - Incorrect income limit applied
29 - Exceeds prescribed limit

🕐 **Element 372 - Combined Net Income**

Nature codes:

28 - Incorrect income limit applied
29 - Exceeds prescribed limit

OTHER - (500 and 800)

🕐 **Element 520 - Arithmetic Computation**

Nature codes:

75 - Benefit/allotment/eligibility incorrectly computed
79 - Incorrect use of allotment tables
80 - Improper proration of initial month's benefits

🕐 **Element 530 - Transitional Benefits**

Nature codes:

75 - Benefit/allotment/eligibility incorrectly computed
77 - Household not entitled to transitional benefits

🕐 **Element 540 – Missing Reports**

Nature codes:

310 - Household did not return report
311 - Household was never provided mandatory report form (no other nature code applies)
312 - Household returned incomplete report
313 - Household returned report, report is missing

🕐 **Element 542 – Expired Certification Period**

Nature codes:

314 - Household receiving benefits without proper recertification

🕐 **Element 560 - Reporting Systems**

Note: This element should be used to record errors resulting from the household being certified under an incorrect reporting system given the household's characteristics and the State agency's chosen options. Possible Reporting Systems include: Monthly Reporting, Quarterly Reporting, Simplified Reporting, Change Reporting, and transitional benefits.

Nature codes:

303 - Household improperly participating under Monthly Reporting
304 - Household improperly participating under Quarterly Reporting
305 - Household improperly participating under Simplified Reporting
306 - Household improperly participating under Change Reporting
309 - Household improperly participating under Transitional benefits

Element 810 - SNAP Simplification Project

Nature codes:

98 - Transcription or computation errors

Element 820 - Demonstration Projects

Nature codes:

98 - Transcription or computation errors

14. Cause - Enter one of the following codes to indicate the primary cause for each variance identified.

1 - Information not reported. (Client failed to report information or changes that are required to be reported. Use this code only if the State could not know this information from another source or could not have anticipated the change.)

2 - Incomplete or incorrect information provided. (Client provided information that is incorrect or incomplete and the agency was not required to verify.)

3 - Information withheld by client. (Case being referred for IPV investigation.)

4 - Incorrect information provided by client. (Case being referred for IPV investigation.)

7 - Information reported by a collateral contact inaccurate. (The agency acted upon information provided by a collateral contact, which was verified by QC to be inaccurate, i.e. the client's employer reported incorrect salary information.)

8 - Acted on incorrect Federal computer match information that was not required to be verified. (This variance is excluded from the error determination but must be recorded.)

10 - Policy incorrectly applied. (The agency used the wrong policy/incorrectly applied policy when determining eligibility or processing change information.)

12 - Reported information disregarded or not applied. (The agency failed to take action on information reported by the client or information that became known through some other source, such as non-federal match information.)

14 - Agency failed to follow up on inconsistent or incomplete information. (Information provided by the household or collateral source was inconsistent with other information in the case record or incomplete but the agency failed to request verification.)

15 - Agency failed to follow up on impending changes. (The agency failed to take follow up action on a change that was anticipated, i.e. unemployment ending within the certification period, pregnancy, etc.)

15. **Error Finding** – This item provides a means for reviewers to identify the impact of individual variances. If only one variance is recorded for an error case, the error finding code for this item and item 8, finding, should be the same. Enter the appropriate code for each variance:

2 - Overissuance
3 - Underissuance
4 - Ineligible

16 - Agency failed to verify required information. (The agency failed to use third party information or documentation to establish the accuracy of statements on the application or change report form which are required to be verified. If the agency is not required to verify reported information use code 2.)

17 - Computer programming error. (The agency eligibility system caused the error due to a programming related problem, i.e. an incorrect amount for standard deduction was programmed into the system, the agency authorized the use of workarounds to the computer system that resulted in an error, etc.)

18 - Data entry and/or coding error. (The agency made a data entry error when keying into the State/local agency eligibility system, includes selection of incorrect codes.)

19 - Mass Change. (The error was due to a problem with a computer generated mass change, i.e. mass change was run late or incorrectly updated the case.)

20 - Arithmetic computation. (The agency made an error in computation or transcription, which was not related to computer programming or data entry.)

21 - Computer user error. (The EW failed to use computer system properly or used an unauthorized process to work around the system.)

22 - Agency budgeted an incorrect amount (Not a transposing or arithmetic error, agency budgeted incorrectly)

23 - Agency failed to follow recertification procedure related to notices/forms

24 - Agency failed to follow recertification procedure related to interviews

25 - Agency failed to follow recertification procedure related to timeframes

26 - Item 13 was coded 97- Change was not required to be reported by the client or acted upon by the State agency based on time-frames and reporting requirements.

99 - Other. (Variance caused by the agency, which does not fall under any of the specific causes listed above.)

16. Error Amount - Compute and enter the dollar amount of each separate variance. If one variance is coded, then the amount in this item should be the same as the error amount in item 10. If more than one variance is coded, the agency may use the optional guidance provided in Chapter 12 or use State developed procedures for assigning dollar amounts. Some agencies find this calculation helpful as an aid in prioritizing error causes for corrective actions.

17. Discovery - Enter one of the following codes to indicate how the variance was discovered:

1 - Variance clearly identified from case record: documentation is not from an automated match
2 - Variance clearly identified from case record: documentation is from an automated match
3 - Variance discovered from recipient interview
4 - Employer (present or former)
5 - Financial institution, insurance company, or other business
6 - Landlord
7 - Government agency or public records, not automated match
8 - Government agency or public records, automated match
9 - Other

18. Verified - Enter one of the following codes to indicate how the variance was verified:

1 - From case record: verification is not from an automated match
2 - From case record: verification is from an automated match
3 - From information provided by recipient
4 - Employer (present or former)
5 - Financial institution, insurance company, or other business
6 - Landlord
7 - Government agency or public records, not automated match
8 - Government agency or public records, automated match (may not apply to tax information)
9 - Other

19. Occurrence - Complete the following for each variance:

a. Date - Enter the date (month and year) the variance occurred.

b. Time Period - Enter the appropriate code to indicate the time period during which the variance occurred.

1 - Before most recent action by agency (The most recent action would be either a certification or a recertification.)
2 - At time of most recent action by agency
3 - After the most recent action by agency
9 - Time of occurrence cannot be determined

This section collects information about the household's processing and specifics about resources, income, and deductions that were the basis of their SNAP benefits.

Some specific items come from the case record (Items 20-24, and 26-27). These items are: most recent action, type of action, length of certification period, allotment adjustment, amount of adjustment, receipt of expedited service, and authorized representative.

For all other items use information from the final QC determination.

20. Most Recent Certification Action - Enter the effective date (month, day and year) of the most recent certification or recertification action prior to or concurrent with the review date. This date cannot be prior to the start of the most recent certification period and should be in the case record.

21. Type of Action - Based on information in the case record, indicate the type of action by entering one of the following codes:

1 - Certification
2 - Recertification

Certification means the first time a case has been certified or a certification action following a break in participation.

Recertification means the initial certification period has expired and the agency has (a) completed a reexamination of all factors of eligibility subject to change following a period of time during which the recipient has been determined eligible and (b) made a decision to continue eligibility.

22. Length of Certification Period - Enter the number of months the household was certified to participate during the current certification or recertification. For households that are participating in months for which they have not been certified enter the code 98. This information should be found in the case record.

23. Allotment Adjustment - This item records whether there was any adjustment from the standard amount for the household size and income level of the household. Proration is providing less than a full month's allotment due to the date of application or receipt of verification. Other adjustments include claims recoupment, sanctions, and adjustments for failure to comply with other means tested programs. Supplements included in the allotment are not considered as allotment adjustments for this item.

Enter the code that indicates whether or not the allotment was adjusted or prorated. If more than one adjustment was made, enter the code for the adjustment with the greatest impact on the SNAP allotment. Supplements included in the allotment are not considered as allotment adjustments for this item.

1 - No adjustment
2 - Prorated benefit
3 - Other adjustment

24. Amount of Allotment Adjustment - Enter the amount of the allotment adjustment from the record. If more than one adjustment was applied, enter the total amount of the difference between the allotment for the household size and income of the household and the amount the household actually received. If item 23 is coded 1, no adjustment, leave this item blank. Enter 9 if the amount of adjustment is unknown.

25. Number of Household Members - Enter the number of person(s) determined to be a part of the SNAP household and eligible to receive benefits based on the final QC determination. Include persons who should have been in the household but were not in the State's original determination. Do not include persons whose income/resources are considered but are not receiving SNAP benefits or SNAP household members who have been disqualified from the program. If the household was ineligible for benefits, enter zero.

26. Receipt of Expedited Service - Expedited service for initial applications requires that participants who are entitled based on their income and/or resources have the opportunity to participate within 7 days from the date of application.

Using information from the case record, enter the appropriate code for the household's entitlement to expedited service at the most recent certification in effect at the time of the sample month:

1 - Entitled to expedited service and received benefits within the Federal timeframe.
2 - Entitled to expedited service but did not receive benefits within the Federal timeframe
3 - Not entitled to expedited service.
4 - Not applicable- recertification action

27. Authorized Representative Used at Application - Enter the appropriate code using information from the case record. An authorized representative is a responsible adult designated by the household, in writing, to apply for benefits on behalf of the household. Did an authorized representative make application for the household?

1 - Yes
2 - No

28. Categorical Eligibility Status - Was the household categorically eligible for benefits based on the final QC determination?

1 - Yes, traditional categorical eligibility conferred through SSI, TANF cash assistance, or general assistance (GA)
2 - Yes, categorical eligibility (including BBCE) conferred through any non-cash or in-kind TANF/MOE benefit
3 - No

29. Reporting Requirement - Select the code that describes the reporting system used to certify the household. If the household was certified under six-month reporting enter code "3" or"4", simplified reporting (also called six-month reporting or semiannual reporting), even if QC determined that the appropriate reporting system should have been something else.

1 - Change Reporting
3 - Simplified Reporting (no periodic report required)
4 - Simplified Reporting (periodic report required)
5 - Quarterly Reporting
6 - Monthly Reporting
7 - Transitional benefits
9 - Other

30. **Liquid Assets** - Enter the dollar value of liquid assets such as cash on hand, checking and savings accounts, money market accounts, stocks, bonds, income tax refunds using information from the final QC determination. For amounts greater than $99,998 enter the code 99998. When there is an indication that a resource type was present but that amount is unknown, enter the code 99999. If an approximate amount is known, enter that amount.

31. **Real Property (Excluding Home)** - Enter the dollar value of land and buildings owned, excluding the primary residence using information from the final QC determination. For amounts greater than $99,998 enter the code 99998. When there is an indication that a resource type was present, but that amount is unknown, enter the code 99999. If an approximate amount is known, enter that amount.

32(a). **Vehicle** - Code information on up to two vehicles in items (a) and (b). Use information from the final QC determination. Vehicles should be entered in descending order based on the fair market value.

1 - No vehicles
2 - Vehicle exempt because used for producing income, as a home, to transport a physically disabled member, for long distance travel (other than commuting), or to carry fuel or water.
3 - Vehicle exempt because inaccessible resource (equity value is $1,500 or less)
4 - Vehicle exempt due to categorical eligibility
5 - Vehicle excluded under State TANF standard (vehicle of non-categorically eligible household members only)
6 - Vehicle is registered and is attributable to an adult household member or is used by a person under 18 for employment or education (subject to fair market value only)
7 - Vehicle not registered (equity test only)
8 - Vehicle is not excluded and is not included in code 6 (subject to fair market value or equity test, whichever is greater)

32(b). **Status 2nd Vehicle** - Use the codes 2 through 8 from 32(a).

33. Countable Vehicle Assets - Record that portion of a vehicle's value counted toward the household's resource limit using information from the final QC determination.

34. Other Non-liquid Assets - Enter the dollar value of non-liquid assets such as boats and trailers using information from the final QC determination. For amounts greater than $99,998 enter the code 99998. When there is an indication that a resource type was present, but that amount is unknown, enter the code 99999. If an approximate amount is known, enter that amount.

<u>**Income:**</u>

35. Gross Countable Income - Enter the countable gross monthly income of the SNAP household before applying any deductions to the income from the final QC determination. Enter all countable income. Include prorated amounts from ineligible household members.

36. Net Countable Income - Enter the countable net monthly income from the final QC determination used to compute the amount of the SNAP allotment for the sample month after application of all appropriate deductions.

<u>**Deductions:**</u>

37. Earned Income - Enter the amount of the earned income deduction that the household was eligible to receive based on the final QC determination.

38. Medical - Enter the amount of the allowable medical expenses for elderly and disabled household members based on the final QC determination.

Do not record the value of the allowable medical deduction ($35). Enter those medical expenses in excess of $35 per month.

For example, if a household was billed $100 for medical expenses, enter $65 ($100 minus the medical deduction of $35).

39. Dependent Care - Enter the total dependent care deduction to which the household was entitled based on the final QC determination.

40. Child Support - Enter the dollar value of the child support payment deduction from the final QC determination only if the deduction is used instead of the income exclusion.

41. Shelter - Enter the dollar value of the shelter deduction from the final QC determination.

42. Homeless - Select the code that applies to this household based on the final QC determination.

1 - Not homeless
2 - Homeless, not receiving standard homeless shelter deduction
3 - Homeless, receiving standard homeless shelter deduction
4 - Homeless, applying actual expenses toward excess shelter deduction

Additional Information on Shelter Costs:

43. Rent/Mortgage - Enter the amount the household was billed for rent/mortgage from the final QC determination. Include taxes, insurance, condo fees and homeowner association fees.

44. Use of SUA - This entry has two boxes that are used to collect different information about the SUA. Do not complete 44(b) if 44(a) is coded 1.

a. Usage - Enter the code which describes usage and entitlement to the SUA based on the final QC determination:

1 - No utilities and no LIHEAP
2 - Uses actual expenses
3 - Uses HCSUA based on LIHEAP of more than $20
4 - Uses HCSUA and does not receive LIHEAP
5 - Uses lower standard
6 - Uses phone only standard
7 - Uses individual standards
9 - Other

LIHEAP is the Low-Income Home Energy Assistance Act, your state program may have another name such as Home Energy Assistance Program (HEAP)

HCSUA is Heating/Cooling Standard Utility Allowance

Lower Standard is a SUA based upon all utilities but is for households who do not incur heating or cooling or receive LIHEAP.

b. Proration - Select the code that identifies whether the SUA amount was prorated if the State does not mandate the use of SUAs (e.g. prorated among non-household members of the residence).

  1 - Not prorated
  2 - Prorated

45. Utilities (SUA or Actual) - This item should be completed for all cases. For eligible SNAP households using actual utility expenses, enter the actual amount that was billed for all utilities (gas, water, phone, electric, etc.) based on the final QC determination. For households using an SUA, enter the amount of the SUA that was used, based on the final QC determination. Enter $0 if there were no utility expenses.

Complete the following section, using information from the final QC determination, for eligible SNAP households. Enter information on each household member, including individuals whose income and resources were considered in establishing SNAP benefit level. If the number of household members exceeds the number of lines available, attach an additional page to allow for coding detailed person-level information on all SNAP household members. You may currently enter information on up to 16 individuals on the automated system, but you may record information on all household members using the paper form. If the entire household is ineligible do not enter any information in this section.

For disqualified or ineligible SNAP household members, items 46, 47, 48, and 58, if applicable, (person number, SNAP program participation, relationship to head of household, and dependent care costs) of this section must be completed. Information on income for these members must also be recorded in Section 5. For disqualified or ineligible members, the rest of the information in this section should be completed based on information known through observation or available in the case record.

NOTE: Do not enter zeros in items 48, 50-52, and 54-58 (Relationship to Head of Household, Sex, Race, Citizenship Status, Employment Status, Work Registration, Employment and Training Program Status, ABAWD Status, and Dependent Care Cost).

46. Person Number - Assign and enter a number for each SNAP household member (1, 2, etc.). This will include ineligible SNAP household members whose resources and income are considered in the eligibility determination. Use this assigned number to identify household members with income in Section 5. Code the head of the household as person 1.

47. SNAP Program Participation - For each person indicate his/her eligibility or ineligibility for participation in the SNAP (i.e., either eligible for participation and entitled to benefits or a reason for ineligibility. For ineligible non-citizens, whether they participate in a State funded SNAP).

1- Eligible member of SNAP case under review and entitled to receive benefits
2- Ineligible member - Ineligible non-citizen and is participating in a State-funded SNAP Program.
3- Ineligible member – Ineligible non-citizen and is not participating in a State funded SNAP
5- Ineligible member - Not paying/cooperating with Child Support agency
6- Ineligible member - Striker
7- Ineligible member - Student that does not meet exemptions
8- Ineligible member - Disqualified for intentional program violation
9- Ineligible member - Due to disqualification for failure to meet work requirements (work registration, E&T, acceptance of employment, employment status/job availability, voluntary quit/reducing work effort, workfare/comparable and workfare).
10- Ineligible member - ABAWD time limit exhausted and the ABAWD is ineligible to participate due to failure to meet the work requirement at 7 CFR 273.24(a)(1). The ABAWD can regain eligibility to participate in SNAP by doing any of the following: work at least 80 hours per month; work and participate in a qualifying work program for a total of at least 80 hours per month; participate in workfare, become verified by the State
11- Ineligible member - Fleeing felon or parole and probation violator
12- Ineligible member - Convicted drug felon
13- Ineligible member - Social Security Number disqualified
14- Ineligible member - Prisoner in detention center
15- Ineligible member - Foster care
99- Unknown

48. **Relationship to Head of Household** - Enter the code that shows the relationship (including by marriage) of the person indicated in item 46 (person number) to the head of the household, as defined by the SNAP Program from final QC determination.

1 - Head of household
2 - Spouse
3 - Parent
4 - Daughter, stepdaughter, son, stepson
5 - Other related person (brother, sister, niece, nephew, grandchild, great-grandchild, cousin)
6 - Foster Child
7 - Unrelated person

49. **Age** - Enter the age (in years) from the final QC determination, of each household member. For children less than 1 year old, enter 0. For persons 98 and older enter 98. If exact age is unknown, enter the best available information.

50. **Sex** - Enter the appropriate code:

1 - Male

2 - Female
3 - Prefer not to answer

51. Race - Enter the race of each person living in the household.

This is to collect racial and ethnic data on household members when the information is available in the case record.

Use codes 1 through 22 to record information if it has been collected. QC reviewers are to collect only the information that has been recorded on the application.

Information Not Available

1 - The application was not found during the QC review therefore racial/ethnic data is not available.
2 - Not recorded on the application for this individual.

Not Hispanic or Latino

3 - American Indian or Alaska Native
4 - Asian
5 - Black or African American
6 - Native Hawaiian or other Pacific Islander
7 - White

Multiple races reported

8 - (American Indian or Alaska Native) and White
9 - Asian and White
10 - (Black or African American) and White
11 - (American Indian or Alaska Native) and (Black or African American)
12 - Respondent reported more than one race and does not fit into the above categories (code 8 through 11)

Hispanic or Latino

13 - (Hispanic or Latino) and (American Indian or Alaska Native)
14 - (Hispanic or Latino) and Asian
15 - (Hispanic or Latino) and (Black or African American)
16 - (Hispanic or Latino) and (Native Hawaiian or Other Pacific Islander)
17 - (Hispanic or Latino) and White

Multiple races reported

18 - (Hispanic or Latino) and (American Indian or Alaska Native) and White
19 - (Hispanic or Latino) and Asian and White
20 - (Hispanic or Latino) and (Black or African American) and White
21 - (Hispanic or Latino) and (American Indian or Alaska Native) and (Black or African American)
22 - (Hispanic or Latino) and Respondent reported more than one race and

does not fit into the above categories (code 18 through 21)

52. Citizenship Status - Enter the appropriate code.

1 - U.S. born citizen
2 - Naturalized Citizen
3 - Legal permanent resident with 40 quarters, military service, five years legal United States residency, disability, or under 18 years of age.
4 - Person admitted as refugee, granted asylum or given a stay of deportation.
5 - Other eligible non-citizen
6 - Non-citizen legally in US who does not meet one of the above codes and who is not receiving SNAP but whose income and resources must be considered in determining benefits
7 - Other ineligible legal non-citizen (e.g. visitor, tourist, student, diplomat)
8 - Undocumented non-citizen
10 - Non-citizen, status unknown
99 - Unknown

53. Educational Level - Enter highest educational level completed for each member of the household from the final QC determination:

0 - None
1 - Grade 1
2 - Grade 2
3 - Grade 3
4 - Grade 4
5 - Grade 5
6 - Grade 6
7 - Grade 7
8 - Grade 8
9 - Grade 9
10 - Grade 10
11 - Grade 11
12 - High school diploma or GED*
13 - Post secondary education (e.g. technical education or some college)
14 - College graduate or post-graduate degree
99 - Unknown

* If member attended grade 12 but did not graduate, use code 11.

54. Employment - Enter information on the current employment status of all persons based on the final QC determination

First box: Status

1 - Not in labor force and not looking for work
2 - Unemployed and looking for work
3 - Active duty military
4 - Migrant farm laborer
5 - Non-migrant farm laborer
6 - Self-employed, farming
7 - Self-employed, non-farming
8 - Employed by other

Second box: Hours Worked

1 - Not employed
2 - 1-19 hours per week
3 - 20-29 hours per week
4 - 30-39 hours per week
5 - 40+ hours per week
6 - On medical or parental leave

55. SNAP Work Registration Status - Enter information on the work registration status at the time of application, recertification, or when a change is reported of all persons as known by the State agency based on the final QC determination:

0 - Not required - (younger than 16, a 16 or 17-year-old high school student, or 60+years old)
1 - Work Registrant
2 - Federal exemption, physically or mentally unfit for employment
3 - Federal exemption, care of a child under 6 or an incapacitated person
4 - Federal exemption, working and/or earning the equivalent of 30 hours per week
5 - Federal exemption, other
6 - Federal exemption, complying with work requirement under Title IV of the Social Security Act
7 - Federal exemption, applied for or receiving unemployment compensation
8 - Federal exemption, regular participant in a drug addiction or alcoholic treatment and rehabilitation program
9 - Federal exemption, student enrolled at least half-time in any recognized school, training program, or institution of higher education

56. SNAP Employment and Training (E&T) Program Status - Enter information on the current E&T program status of all household members as known by the State agency based on the final QC determination:

0 - Not participating in any employment and training activity
1 - Participating in non-SNAP E&T activity (such as TANF)
2 - Participating in a SNAP job search/job search training as a mandatory participant
3 - Participating in a SNAP job search/job search training as a voluntary participant
4 - Participating in a SNAP E&T workfare/work experience as a mandatory participant
5 - Participating in a SNAP E&T workfare/work experience as a voluntary participant
6 - Participating in a SNAP E&T education/training (basic education, remedial education, career/technical education, or other postsecondary) as a mandatory participant

7 - Participating in a SNAP E&T education/training (Basic education, remedial education, career/technical education, or other postsecondary) as a voluntary participant

8 - Participating in other SNAP E&T component as a mandatory participant

9 - Participating in other SNAP E&T component as a voluntary participant

57. ABAWD Status - An able-bodied adult without dependents (ABAWD) is a non-disabled adult aged 18 through 50 (for FFY 2023), 18 through 52 (for FFY 2024), or 18 through 54 (for FFY 2025 through FFY 2030). An ABAWD who does not meet the work requirement at 273.24(a)(1) is only eligible for 3 months in a 36- month period unless the ABAWD resides in an area where the time-limit is temporarily waived, receives a discretionary exemption from the State, receives 3 additional consecutive months of eligibility under 7 CFR 273.24(e), or becomes exempt. For individuals who have been deemed an ineligible ABAWD, the reviewer must first document the individual's status under item 47 by selecting Code 10, then by selecting Code 1 under item 57. To document the ABAWD status of an individual, enter one of the following codes from the final QC determination:

1- Ineligible household member (ABAWD has exhausted time-limited months)

2- ABAWD meeting work requirement at 7 CFR 273.24(a)(1); includes good cause situations

3- ABAWD in waived area

4- ABAWD exempt for one month based on discretionary exemption

5- ABAWD receiving a time-limited month and is not meeting work requirement

6- Not an ABAWD (meets Veteran exception)

7- Not an ABAWD (meets exception for homeless individuals)

8- Not an ABAWD (meets exception for individuals aged 24 or younger and in foster care on their 18th birthday or higher age if the State offers extended foster care to a higher age)

9- Not an ABAWD (meets another exemption listed at 7 CFR 273.24(c))

58. Dependent Care Cost - For each child/adult with associated dependent care expenses enter the amount of the expense that the household is responsible for paying using information from the final QC determination. If the cost for more than one child/adult is combined, divide the cost evenly amongst each child/adult receiving care.

This section collects detailed information on known income sources, by type and amount, based on the final QC determination. Information can be collected on up to four sources of income for up to ten household members. If income exists but is not attached to any specific member, assign the income to the payee. Enter all income amounts rounded to the nearest dollar.

59. Person Number - Enter the person number from Section 4 for each SNAP household member with income based on information from the final QC determination.

(This number is assigned in Section 4, item 46).

Source 1

60. Income Type - (This instruction applies to items 60, 62, 64, and 66). Based on the final QC determination, identify the type of countable income as listed below for each type of income received by a SNAP household member.

Earned Income (Not Subsidized)

11 - Wages and salaries
12 - Self-employment
13 - Rental Income when managing the property for an average of at least 20 hours a week
14 - Other earned income

Subsidized Earned Income

16 - Wage supplementation - enter earnings that are above cash assistance and/or SNAP amount

Unearned Income

15 - Energy Assistance income
31- Retirement, Survivors, and Disability Insurance (RSDI) benefits
32 - Veterans benefits
33 - SSI
34 - Unemployment Compensation
35 - Workmen's Compensation
36 - Other government benefits (no other option applicable)
37 - Foster care income
42 - Contribution
43 - Deemed income
44 - State general assistance or other State-funded welfare (don't include TANF here)
45 - Educational grants/scholarships/loans
46 - Other (no other option applicable)
47 - TANF
48 - State only diversion payment
49 - Interest income
50 - Court ordered child support payment received from absent parent or responsible person
51 - Annuities
52 - Pensions
53 - Old Age benefits
54 - Survivor's benefits
55 - Striker benefits
56 - Rental income when not managing the property for an average of at least 20 hours a week
57 - Alimony
58 - Government - sponsored royalties
59 - Government - sponsored dividends
60 - Government - sponsored interest
61 - Trust funds monies
99 - Unknown

61. **Amount** - (This instruction applies to Items 61, 63, 65, and 67.) Enter the gross amount of countable income received by the SNAP household member for the month from the final QC determination.

Source 2

62. **Income Type -** Second type of income. See item 60.

63. **Amount -** Second amount of income. See item 61.

Source 3

64. **Income Type -** Third type of income. See item 60.

65. **Amount -** Third amount of income. See item 61.

Source 4

66. **Income Type -** Fourth type of income. See item 60.

67. **Amount -** Fourth amount of income. See item 61.

68. Timeliness of Application Processing (Expedited and 30-Day Requirement) - A determination of timeliness of application processing is to be made for the most recent application which is for or prior to the sample month in the last 12 months. If there is more than one application in the last 12 months, measure timeliness for the most recent application. Only use this process to review an active case in which the most recent application was a new/initial application. If the most recent application was a recertification application, the case will not be used in the timeless of application processing rate.

NOTE: QC policy does not write or develop timeliness of application processing review procedures. Please refer to SNAP policy guidance and staff with inquiries about the timeliness measure.

Timeliness of application processing according to Federal processing standards:

- A household entitled to expedited service must be provides the opportunity to participate within 7 days.

- Households not entitled to expedited service must be provided the opportunity to participate by 30th day following the date of application.

An opportunity to participate consists of providing households with an active electronic benefit transaction (EBT) card and personal identifying number (PIN), benefits have been posted to the household's EBT account and are available for spending.

A case that meets the applicable Federal processing standard is coded 1 - Timely. A case that fails to meet the applicable Federal processing standard is coded 2 or 3- Not timely. For example, cases that were delayed due to a late determination for expedited service, whether the State agency failed to properly screen the case or the client provided incorrect information, the reviewer should use code 2 - Not timely: 7-day time frame.

The following cases should be coded 4 - Other: cases where no new application was filed within the last 12 months prior to the sample month, the most recent application was a recertification (including those filed within 30 days after the certification period expired), and cases in which the new application was properly pended for incomplete verification. (Cases in which a new application was improperly pended will be coded 3 - Not timely.)

If after a thorough review of case circumstances and records there is no documentation, application or other information to determine timeliness, the case should be coded 4. For cases with this problem, every effort should be made to determine the timeliness of the case before deciding to use the "Other" code.

Please indicate the appropriate code:

1 - Timely
2 - Not timely: 7-day time frame
3 - Not timely: 30-day time frame.
4 - Other

69. **QC Interview** - Enter the appropriate code from the following:

1 - Telephonic personal interview with household
2 - No Interview with household - Failure or Refusal to Cooperate OR Not Subject to Review
3 - No Interview with household (Ineligible determination prior to interview)
4 - Alaska - remote area - no interview or telephone interview
5 - Person interviewed in own home
6 - Person interviewed in local office
7 - Person interviewed in mutually agreed upon location
8 - Video interview - person interviewed in own home
9 - Video interview - person interviewed in local office
0 - Video interview - person interviewed in mutually agreed upon location

70. **Timeliness of Recertification Processing** - A determination of timeless of application recertification processing is to be made for the most recent application which is for or prior to the sample month in the last 12 months. If there is more than one application in the last 12 months, measure timeliness for the most recent application. Only use this process to review an active case in which the most recent application was a recertification application, including applications submitted within 30 days after the end of the certification period. If the most recent application was a new/initial application, the case will not not be used in the timeless of recertification rate.

NOTE: QC policy does not write or develop timeliness of recertification processing review procedures. Please refer to SNAP policy guidance and staff with inquiries about the timeliness measure.

Cases where benefits were issued by the household's normal issuance date must be coded 01- Timely. Cases where benefit were issued after the household's normal issuance date must be evaluated for cause of the delay and coded accordingly.

If multiple causes are identified, code the not timely agency or client caused delay that most appropriately reflects the first cause of the delay. For example, if the agency sent out the Notice of Expiration (NOE) late and household applied for recertification after the 15th of the month, the reviewer should use code 11- Not Timely- Agency Caused.

Indicate the appropriate code for 70:

01 - Timely

Not Timely - Agency Caused

11 - Agency failed to contact or did not contact client timely. This would include situations in which the agency failed to contact or did not contact client timely with notice of expiration (NOE), with recertification packet, to schedule interview, or to request verification.

12 - Agency lost or misfiled the verification or application for recertification. This would include any lost or misfiled application completed or otherwise.

13 - Agency failed to act on completed recertification application. This would include any completed recertification application that a caseworker failed to act on for whatever reason.

Not Timely - Client Caused

24 - Client did not file the recertification application by the 15th of the last month of the certification period.

25 - Client missed the first scheduled interview.

26 - Client did not return the required verification timely.

27 - Other client caused delay.

Neither timely nor untimely

30 - Benefits issued outside the certification period.

40 - Not yet due for recertification.

50 - No recertification within the 12 months prior to the sample month.

71. **Allotment Test** - Enter the appropriate code that reflects which of the Allotment Tests (Comparison I or Comparison II) has been recorded in Item #10. Enter one of the following codes:

1 - Comparison I recorded, Comparison II was not needed

2 - Did Comparison II, recorded Comparison I

3 - Did Comparison II, recorded Comparison II

4 - Comparison I equaled Comparison II

5 - Case ineligible, no Comparison I or Comparison II needed

72. **Household Zip Code** - Enter the household's five-digit zip code for their physical address. If a homeless household receives mail, the zip code should be for the location mail is received. QC cases in which the homeless household does not have a mailing address should use the zip code for the household's last known location. If the reviewer is unable to determine a homeless household's 'last known location', code 99999.

SECTION 7 - OPTIONAL FOR STATE USE

There are 4 lines of spaces available to the State to code additional information.