

QUALITY CONTROL REVIEW SCHEDULE

This information is being collected to assist the Food and Nutrition Administration with the Supplemental Nutrition Assistance Program's Quality Control Reviews. This is a mandatory collection and FNA 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 Administration, Planning and Regulatory Affairs Office, 5601 Sunnyside Ave, Bldg 4, FL 2; Beltsville, MD 20705 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								

Section 3 - Household Characteristics

20. Most Recent Cert. Action
Month, Day, Year

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21. Type of Action

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22. Length of Cert. Period
#of months

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23. Allotment Adjustment

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24. Amount of
Allotment Adjustment

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25. Number of
Household Members

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26. Receipt of
Expedited Service

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27. Authorized Representative
Used at Application

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28. Categorical Eligibility

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29. Reporting Requirement

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Resources:

30. Liquid

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31. Property
(excluding home)

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32a. Vehicle

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32b. Status
2nd Vehicle

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33. Countable
Vehicle Assets

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34. Other Non-liquid

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Income:

35. Gross

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36. Net

--	--	--	--	--	--

Deductions:

37. Earned Income

--	--	--

38. Medical

--	--	--	--

39. Dependent Care

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40. Child Support

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41. Shelter

--	--	--	--	--

42. Homeless

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Additional
Information on
Shelter Costs:

43. Rent/Mortgage

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44. Use of SUA
a. Usage b. Proration

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45. Utilities (SUA or Actual)

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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	54. Employment Hours	55. SNAP Work Reg.	56. SNAP E & T	57. Time-Limited Part. Status	58. Dependent Care Cost

(16 individuals max)

(10 individuals max)

Section 6 - Reserved Coding

Section 7 - Optional For State Use

INSTRUCTIONS FOR COMPLETING FORM FNA 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 seven 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
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The October sample month would be coded:

1	0	2	0	0	3
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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
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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
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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 must submit to FNA 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, the State must submit to FNA 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 FNA 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 Codes - National Institute of Standards and Technology

<u>State</u>	<u>Code</u>	<u>State</u>	<u>Code</u>
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:

- 0- Case deselected
- 1- Complete
- 2- Incomplete
- 3- Not subject to review – Non-participation
- 4- Not subject to review – Pending a hearing
- 5- Not subject to review – Under active investigation
- 6- Not subject to review – Oversampling
- 7- Not subject to review – Case Listed in Error
- 8- Not subject to review – Disaster Case
- 9- Not subject to review – Unable to Interview or Moved out of State or All Household Members Have Died

If codes 0,2 through 9 are used, reviewers must enter codes for item 9 in Section 1, 20-29 in Section 3, 46-53 in Section 4, and 68 and 70, in Section 6. For these cases, reviewers will use information from the case record to complete the items.

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]
- 6 Ineligible- over income

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

9. SNAP Allotment Under Review - Enter the authorized dollar amount of SNAP allotment 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 absolute 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 allotment under review to reflect the total amount sampled is an error.

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

1 - Included in error rate calculation.

2 - Excluded from error rate calculation, as designated by FNA (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 (98) - Transcription or computation errors.

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

BASIC PROGRAM REQUIREMENTS - (100)

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:

Citizens

6 - Eligible person(s) excluded

7 - Ineligible person(s) included

124 - Variance resulting from use of automatic Federal information exchange system

Non-Citizens

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

RESOURCES - (200)

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

OTHER INCOME

ELEMENT 342 - CONTRIBUTIONS

Note: Errors in Child Support Payments should not be recorded in this Element. See 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
- 58 - Income should have been excluded (no other coding option applies)
- 124 - Variance resulting from use of automatic Federal information exchange system

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

MORE DEDUCTIONS

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

INCOME ELIGIBILITY TESTS

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
- 312 - Household returned incomplete report

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.)
- 11- Policy incorrectly applied- (The agency did not implement a mandatory program change on time)
- 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.)
- 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, including 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- Other. (No other cause code applicable)

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

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:

- 1- Overissuance
- 2- Underissuance
- 3- Ineligible- Over-income

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

SECTION 3 - HOUSEHOLD CHARACTERISTICS

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 re-examination of all factors of eligibility subject to change following a period during which the recipient has been determined eligible and (b) decided 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 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 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

Resources:

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 codes 1 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 known amounts less than \$99,998 enter the amount. For amounts greater than \$99,998 enter 99998. When there is an indication a resource type was present, but the amount is unknown, enter 99999. If an approximate amount is known, enter that amount.

Income:

- 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.

Deductions:

- 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 utility expenses
- 2 - Uses actual utility expenses (no standard allowance)
- 3 - Uses HCSUA based on LIHEAP or other similar energy assistance program payment of more than \$20 (only allowed for a household with an elderly or disabled member)
- 4 - Uses HCSUA due to heating and/or cooling expense
- 5 - Uses limited utility allowance due to expenses other than heating or cooling
- 6 - Uses phone-only individual standard
- 7 - Use another individual standard
- 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

Limited Utility Allowance is a SUA that includes all utilities other than heating and cooling costs and is for households who do not qualify for the HCSUA.

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 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.

SECTION 4 - INFORMATION ON EACH HOUSEHOLD MEMBER

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
- 4- Ineligible member - Not paying/cooperating with Child Support agency
- 5- Ineligible member - Striker

- 6- Ineligible member - Student that does not meet exemptions
- 7- Ineligible member - Disqualified for intentional program violation
- 8- 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).
- 9- 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.
- 10-Ineligible member - Fleeing felon or parole and probation violator
- 11-Ineligible member - Convicted drug felon
- 12-Ineligible member - Social Security Number disqualified
- 13-Ineligible member - Prisoner in detention center
- 14-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- Non-citizen U.S. National
- 4- Lawful permanent resident (LPR) who met or is excepted from the 5-year waiting period
- 5- Cuban and Haitian entrant
- 6- Compacts of Free Association (COFA) citizens, also known as citizens of Freely Associated States (FAS)
- 7- Lawfully present Non-citizen (no other code applies)
- 8- Undocumented non-citizen
- 9- Non-citizen, status unknown
- 10- Citizen who is not receiving SNAP but whose income and resources must be considered in determining benefits
- 11- Non-citizen who is not receiving SNAP but whose income and resources must be considered in determining benefits

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. Time-limited Participation Status – Non-disabled adults aged 18 through 64 are subject to a time limit and are time-limited participants. Time-limited participants are only eligible for 3 months in a 36-month period (the time-limit) unless they reside 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), are excepted or exempt from time-limits. For i time-limited participants identified as ineligible, 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 status of a time-limited participant as of the review date, enter one of the following codes:

- 1- Ineligible household member (Time-limited participant has exhausted time-limited/countable months)
- 2- Time-limited participant meeting work requirement at 7 CFR 273.24(a)(1) (includes good cause situations)
- 3- Resides in a waived area
- 4- Exempt based on a discretionary exemption documented in the case record
- 5- Time-limited participant receiving a time-limited/countable month (not meeting requirements, has not exhausted countable months)
- 6- Time-limited participant only eligible for a partial month of benefits
- 7- Excepted person- Not a time-limited participant (meets Indian", "Urban Indian" and "California Indian" exception as defined in the Indian Health Care Improvement Act.)
- 8- Excepted person- Not a time-limited participant (Responsibility to care for a dependent child to those with a child under 14 years of age
- 9- Excepted person- Not a time-limited participant (meets another exception listed at 7 CFR 273.24(c)
- 10- Good Faith Exemption- AK or HI only

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.

SECTION 5 - INCOME IDENTIFIED BY HOUSEHOLD MEMBER

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 fund money
- 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.

SECTION 6 - RESERVED CODING

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 timeliness of application processing rate.

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

Timeliness of application processing according to Federal processing standards:

- A household entitled to expedited service must be provided 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 timeliness 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 be used in the timeliness 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, not QC, 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.

73. Household Interview- A household interview is required for certifications and recertifications. Enter the code that accurately reflects the interview method that occurred between State eligibility and the household at the most recent certification or recertification action.

- 1- Face-to-face in local office.
- 2- Face-to-face in mutually agreed upon location (not own home or local office).
- 3- Face-to-face in household's home.
- 4- Telephone interview.

- 5- No interview required based on an approved FNA waiver.
- 6- No interview required based on an approved FNA demonstration project.
- 7- Household not interviewed, recertification interview not required since previous interview was within the previous 12 months.
- 8- Household was not interviewed (no other codes apply)

74. Waiver 1- Enter the code that accurately reflects a waiver applicable to the household's case. Do not identify waivers associated with demonstration projects in this item. Select- "2" if the household participated in a demonstration project.

- 1- No waivers applicable to case
- 2- Demonstration project
- 3- Interview Waiver (no other code applies)
- 4- Waiver of the Time Limit
- 5- Disaster Related
- 6- Other Waiver

75. Waiver 2- Enter the code that accurately reflects an additional waiver applicable to the household's case. Do not identify waivers associated with demonstration projects in this item. Select- "2" if the household participated in a demonstration project.

- 1- No additional waivers applicable to case
- 2- Demonstration project
- 3- Interview Waiver
- 4- On-Demand Interview Waiver(no other code applies)
- 5- Waiver of the Time Limit
- 6- Disaster Related
- 7- Other Waiver

76. Demonstration Project - Enter the code that accurately reflects if a demonstration project applied to the household's case.

- 1- No Demonstration Project applicable
- 2- Elderly Simplified Application Project (ESAP)
- 3- Combined Application Project (CAP)
- 4- Standard Medical Deduction Project (SMD)
- 5- Other Demonstration Project

77. Demonstration Project 2- Enter the code that accurately reflects if an additional demonstration project applied to the household's case.

- 1- No Additional Demonstration Project applicable
- 2- Elderly Simplified Application Project (ESAP)
- 3- Combined Application Project (CAP)
- 4- Standard Medical Deduction Project (SMD)
- 5- Other Demonstration Project

78. Household Veteran/ Active Servicemember Status- Enter the code that accurately reflects if the household includes a U.S. Veteran, Active Servicemember, or both.

- 1- No U.S. Veteran or Active Servicemember in household
- 2- Includes a U.S. Veteran
- 3- Includes an Active Duty U.S. Servicemember
- 4- Includes both a U.S. Veteran and an Active Duty U.S. Servicemember
- 5- Unable to determine from case record and/or interview

SECTION 7 - OPTIONAL FOR STATE USE

There are 4 lines of 23 spaces available to the State to code additional information.