Division of Family Support

Operation Manual

Volume 2

Supplemental Nutrition Assistance Program (SNAP)

Table of Contents R. 9/1/26 OMTL - 709

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2000 – R. 6/15/26 – OMTL – 698
Definitions

Active Case: A household that was certified for and received SNAP benefits during the month.

Adequate Notice: A written notice that includes:

A. A statement of the action the agency has taken or intends to take;

B. The reason for the intended action;

C. The household's right to request a fair hearing;

D. The name of the person to contact for additional information;

E. The availability of continued benefits; and

F. The liability of the household for any over issuance received while awaiting a fair hearing if the hearing official's decision is adverse to the household.

    This notice must be received no later than when the reduced benefits are received. If benefits are terminated, the notice must be received at the time benefits would have been received if they had not been terminated. Participants are allowed 10 calendar days from the date the notice is mailed to request a hearing and continuation of benefits. If the 10-day period ends on a weekend or a holiday and a request is received the day after the weekend or holiday, consider the request to be timely.

Adult: Any individual aged 18 or over, or an emancipated child under the age of 18.

Allotment: The total value of SNAP benefits a household is authorized to receive.

Application: The form signed by a household member or the household's representative to apply for SNAP benefits.

Authorized Representative (AR): A person or persons designated in writing by the head of the household, spouse, or other responsible member of the household to act on behalf of the household in applying for, obtaining, and using the SNAP benefits. The AR can complete work registration for those household members required to register for work. The household has the option of selecting one AR to apply for program benefits, and another to obtain and use the SNAP benefits (Electronic Benefit Transfer (EBT) representative), or one to perform both functions.

Basis of Issuance: Tables or charts used by the agency to determine monthly benefit amounts based on the Thrifty Food Plan.

Boarder: An individual or multiple individuals residing with a household and paying reasonable compensation to the household for lodging and meals or residing in a commercial boarding house.

Boarding House: An establishment licensed as a commercial enterprise that offers meals and lodging for payment. In areas without licensing requirements, a boarding house is a commercial establishment that offers meals and lodging for payment with the intent of making a profit. The number of boarders residing in a boarding house is not used to determine if a boarding house is a commercial enterprise. The household of the operator of a boarding house may participate in the program separately and apart from the residents of a boarding house if that household meets all other eligibility requirements.

Cafeteria Plan: Under some pay/benefit plans, an employee may choose to have the employer withhold money from wages to pay expenses such as childcare, medical expenses, etc. If the benefit plan involves money owed to the recipient, it is countable income. As each cafeteria plan is unique, it must be reviewed thoroughly to determine if the funds would otherwise be available to the household.

Call Services Worker (CSW): CSWs are responsible for incoming and outgoing calls related to all benefit programs. Their goal is to resolve the concern or request on the first call whenever possible. This job function may include application and recertification phone interviews, resolving complaints, providing information or answering questions, processing case changes, etc.

Capital Gain: Profit resulting from the sale of capital investments such as stocks, real estate, etc.

Collateral Contact: A verbal or written confirmation of a household's circumstances by a person outside of the household.

Communal Dining Facility: One of the following:

A. A public or nonprofit private establishment approved by the Food and Nutrition Administration (FNA) which prepares and serves meals for elderly persons or for Social Security Insurance (SSI) recipients and their spouses;

B. A public or private nonprofit establishment (eating or otherwise) that feeds elderly persons or SSI recipients and their spouses;

C. Federally subsidized housing for the elderly, where meals are prepared for and served to the residents; and

D. Private establishments that contract with a State or local agency to offer meals at concessional prices to elderly persons or SSI recipients and their spouses.

Date of Admission: The date established by the U.S. Citizenship and Immigration Services (USCIS) as the date a sponsored alien is admitted for permanent residence into the United States.

Disabled: An individual determined eligible for or receives the following benefits. This includes instances in which the entire benefit is recouped to recover an overpayment.

A. SSI or presumptive SSI under Title XVI of the Social Security Act or disability/blindness payments under Titles I, II, X, XIV, or XVI of the Social Security Act. A description of these titles is as follows:

1. Title I - Old-Age and Medical Assistance for the Aged;

2. Title II - Federal Old-Age, Survivors and Disability Insurance Benefits;

3. Title X - Aid to the Blind;

4. Title XIV - Aid to the Permanently and Totally Disabled;

5. Title XVI - Aid to the Aged, Blind or Disabled or for such Aid and Medical Assistance for the Aged;

B. State Supplementation;

C. Disability retirement benefits from a Federal, State, or local governmental agency because of a disability considered permanent under Section 221(i) of the Social Security Act. This includes Federal Employees Compensation Act (FECA) payments that an individual elects to receive in place of Civil Service Retirement (CSR) benefits. This does not include FECA payments received pending a determination of eligibility for Civil Service disability;

D. Annuity payments under:

1. Section 2(a)(1)(iv) of the Railroad Retirement Act of 1974 **and** is determined to qualify for Medicare by the Railroad Retirement Board; or

2. Section 2(a)(i)(v) of the Railroad Retirement Act of 1974 **and** is disabled based upon the criteria used under Title XVI of the Social Security Act;

E. A veteran with a service-connected or nonservice-connected disability rated by the Veterans Administration (VA) or paid as total (100%) by the VA under Title 38 of the United States Code;

F. A veteran considered by the VA to require regular aid and attendance or to be permanently housebound under Title 38 of the United States Code;

G. A surviving spouse of a veteran considered by the VA to be in need of regular aid and attendance or permanently housebound, or a surviving child of a veteran and considered by the VA to be permanently incapable of self-support under Title 38; or

H. A surviving spouse or child of a veteran considered by the VA to be entitled to compensation for a service-connected death or pension benefits for a nonservice-connected death under Title 38, who has a disability considered permanent under Section 221(i) of the Social Security Act. Disabilities considered permanent under the Social Security Act include:

1. Permanent loss of use of both hands, both feet, or one hand and one foot;

2. Amputation of the leg at the hip;

3. Amputation of leg or foot because of diabetes mellitus or peripheral vascular disease;

4. Total deafness, not correctable by surgery or hearing aid;

5. Statutory blindness, except if due to cataracts or detached retina;

6. IQ 59 or less, established after attaining age 16;

7. Spinal cord or nerve root lesions resulting in paraplegia or quadriplegia;

8. Multiple sclerosis, in which there is damage to the nervous system because of scattered areas of inflammation that recur and have progressed to varied interference with the function of the nervous system, including severe muscle weakness, paralysis, and vision and speech defects;

9. Muscular dystrophy with irreversible wasting of the muscles, with a significant effect on the ability to use the arms and/or legs;

10. Impaired renal function due to chronic renal disease (documented by persistent adverse objective findings) resulting in severely reduced function, which may require dialysis or a kidney transplant; and

11. Amputation of a limb, current age 55 or older.

I. Disability related medical assistance under Title XIX of the Social Security, including a determination by the Medical Review Team (MRT) that the person is disabled. A Kentucky Transitional Assistance Program (KTAP) incapacity determination is not evidence of disability for this reason.

Documentation: An explanation maintained in the case record of the household's circumstances. The documentation must be in sufficient detail to support the accuracy of any case determination.

Drug Addiction and Alcohol (DAA) Treatment Center: Any drug addiction or alcoholic treatment and rehabilitation program conducted by a public agency pursuant to Part B of Title XIX of the Public Health Service Act, or a private nonprofit organization or institution which is certified by the State agency or agencies designated by the Governor as responsible for the administration of the State’s programs for alcoholics and drug addicts pursuant to P.L. 91-616, Comprehensive Alcohol Abuse and Alcoholism Prevention Treatment and Rehabilitation Act of 1970 and P.L. 92-255, Drug Abuse Office and Treatment and Rehabilitation Act of 1972 as providing treatment that can lead to the rehabilitation of drug addicts or alcoholics. Please refer to MS 2600.

Elderly: An individual aged 60 or older. If a member is 59 years of age at the time of application but will turn 60 before the end of the month of application, consider that member elderly.

Electronic Income Verification (EIV): A method of verifying income through the transmission of information by various electronic systems.

Eligibility Advisor (EA): An electronic system used to locate and verify an individual's current wages, job start or end, bank accounts and balances, and property holdings.

Eligible Food: Any of the following:

A. Food or a food product intended for human consumption, including bottled water. Alcoholic beverages, including "non-alcoholic" beer, tobacco, and hot food products prepared for immediate consumption, do not fall within this definition;

B. Seeds and plants to grow foods for the personal consumption of eligible households;

C. Meals prepared and delivered by an authorized meal delivery service to households eligible to use SNAP benefits to purchase delivered meals;

D. Meals served to households eligible to use benefits for communal dining, by an authorized communal dining facility for the elderly, SSI households, or both;

E. Meals prepared and served by a drug addiction or alcohol treatment and rehabilitation center to eligible households;

F. Meals prepared and served by a certified public or private non-profit group living arrangement facility to residents who are blind, aged, or disabled and meet the definition of "disabled";

G. Meals prepared by and served by a shelter for battered women and children to its eligible residents; and

H. Meals prepared and served by a public or private, nonprofit establishment that feeds homeless individuals, e.g., soup kitchen, shelter for the homeless, and which is approved by FNA and the appropriate state or local agency.

Eligibility and Enrollment: This job function completes in-person application/recertification interviews for assigned programs, including processing and disposing applications during the interview when all verification is provided and no additional actions are needed, such as a supervisor case review.

Entitlement: The amount of SNAP benefits the household would receive if one or more members disqualified for an Intentional Program Violation were included in the calculation of benefits.

Fleeing Felon: An individual convicted of Federal aggravated sexual abuse, murder, sexual exploitation and abuse of children, sexual assault, or similar State laws, **and** who is not in compliance with the terms of their sentence **or** parole.

Flexible Benefits: Under some pay/benefit plans, an employer awards the employee fringe benefits. This is usually an employer-paid benefit and, in most cases, is not monetary, such as a point system redeemable for merchandise. These are not considered countable income unless determined to be wages owed to the employee.

Fluctuating Income: Pay amounts differ every pay period.

Group Living Arrangement (GLA): A public or private nonprofit residential setting that serves no more than sixteen residents and is certified by the State under regulations issued under Section 1616(e) of the Social Security Act or under standards determined to be comparable to the standards implemented by appropriate state agencies under Section 1616(e) of the Social Security Act. To be eligible for SNAP benefits, a resident of a GLA must be blind, aged, or disabled and meet the definition of "Disabled" contained in this section.

Head-Of-Household (HOH): The person in whose name the application is made for participation in the Program.

Homeless Individual: A homeless individual is one who:

A. Lacks a fixed and regular night-time residence; or

B. Has a primary night-time residence that is:

1. A supervised shelter designed to provide temporary living accommodations;
2. An institution that provides a temporary residence for individuals intended to be institutionalized;
3. A temporary accommodation of less than 90 days in the residence of another individual; or
4. A place not designed for, or ordinarily used as a regular sleeping accommodation for human beings, such as a tent, box, car, etc.

Homeless Meal Provider: A nonprofit establishment authorized to prepare and serve meals to homeless individuals (e.g., soup kitchens, shelters for the homeless).

Income Eligibility Verification System (IEVS): A system of information sharing through various computer matches for purposes of income and eligibility verification.

Indigent Alien: An indigent alien is an alien the agency has determined as being unable to obtain food and shelter, taking into account the alien's own income plus any cash, food, housing, or other assistance provided by other individuals, including the sponsor(s). This means the sum of the eligible sponsored alien’s household's own income, the cash contribution of the sponsor and others, and the value of any in-kind assistance the sponsor and others provide does not exceed 200% of the poverty level guidelines for the household's size.

Institution of Higher Education: A business, technical, trade, or vocational school that normally requires a high school diploma or equivalency certificate for enrollment in the curriculum, or a college or university that offers degree programs regardless of whether a high school diploma is required. A college includes a junior, community, two-year, or four-year college or a university.

Intake Worker: This job function includes more than one role and may be completed by one or more staff members, depending on the size of the local office and foot traffic. Roles of the intake worker include routing individuals who come into the local office to apply, recertify, or report changes. Intake workers assign tasks to the appropriate worker and provide support to individuals who walk into the office. The intake worker reviews the individual's information to determine the appropriate next steps and assigns the individual to an Eligibility and Enrollment, Adult Medicaid, or Kentucky Works Program (KWP) worker.
The support function for the intake worker includes:

A. Answering questions;

B. Providing information about services or processes;

C. Scanning documents, and

D. Assigning individuals to support services.

Intentional Program Violation (IPV): Any of the following intentional actions by a household member:

A. Making a false or misleading statement;

B. Misrepresenting, concealing, or withholding facts; or

C. Committing any act that constitutes a violation of the Food and Nutrition Act of 2008, federal or state SNAP regulations, or any state statute relating to the use, presentation, transfer, acquisition, receipt, or possession of SNAP benefits**.**

Irregular Income: An amount that is not received consistently. The amount may be stable or varied, but receipt every pay period is uncertain. There may be some pay periods where no income is received.

Meal Delivery Service: A private nonprofit organization or a private establishment with which a State or local agency has contracted for the preparation and delivery of meals at concessional prices to elderly persons and their spouses, and to disabled persons and their spouses who are unable to adequately prepare all of their meals.

Means-Tested: An applicant's financial circumstances are considered in determining eligibility and/or benefit level. Examples of means-tested programs are KTAP, SSI, publicly funded housing, and educational payments that are counted as income. If the income is not countable for SNAP benefits purposes, the question of whether it is means-tested is not considered.

Migrants: A farm worker who travels away from home regularly, seeking employment in an agriculturally related activity. A migrant household is a household traveling for this purpose.

Over Issuance: The amount of SNAP benefits that exceeds the amount the household was eligible to receive.

Physician: A practitioner of medicine who is authorized or licensed to treat diseases. A chiropractor who is licensed by the Kentucky State Board of Chiropractic Examiners is recognized as a licensed practitioner who can diagnose and treat diseases or disorders that are within their realm of expertise.

Post-Secondary Schools: Includes vocational/technical schools, even those not requiring a high school diploma or GED, if these institutions are recognized by the State to provide an educational program beyond secondary education, all colleges and universities, and all programs providing training to prepare the individual for gainful employment, including correspondence schools and programs for the physically/mentally disabled at any level.

Public Assistance (PA): Any household in which all members have been approved for a KTAP grant or State Supplementation benefit, whether or not the first payment is received in the month of approval.

Qualified Alien: An alien who meets eligibility requirements specified in MS 2900.

Quality Control Review: A review of a case to determine if a household is receiving the food benefits to which they are entitled and to ensure benefits are not incorrectly denied or terminated.

Recognized Chemical Dependency Treatment Program: is defined as "A program which provides treatment that leads to the rehabilitation of drug addicts and/or alcoholics."

Reference Date: the cutoff date for determining which reported items require verification for initial eligibility (10 days prior to the 30th day).

Residents of Institutions: Individuals who are residents of an institution that provides two or more meals daily, as part of the institution's normal services. Residents of institutions include students with meal tickets who reside in dormitories, fraternities, and/or sororities, and spouses who reside in spouse abuse centers where the majority of meals are provided. On-campus housing includes any university-sponsored housing where meals are provided. The facility does not have to be physically located on campus.

Resources: Available money or other assets**.**

Roomer: An individual to whom a household furnishes lodging but not meals.

Salary: The same amount is received every pay period.

Seasonal Farmworker: A person employed in agricultural work, temporary in nature, and not required to be absent from home overnight.

Self-Employment Income: Income from which NO taxes are withheld **prior to** receipt of income by the individual.

Shelter for Battered Individuals and Children: A nonprofit residential facility that serves battered individuals and their children. If such a facility serves other individuals, a portion of the facility must be set aside on a long-term basis to serve only battered individuals and children.

Significant Ownership Interest: An ownership interest of 5 percent or more in a for-profit entity that filed an alien visa petition to give a prospective employee alien status.

Sponsor: A person who is either eligible to execute or has executed an affidavit of support or similar agreement on behalf of an alien as a condition of the alien's entry as a permanent resident into the United States. Sponsors must be individuals and not corporations or other entities.

Sponsored Alien: An alien lawfully admitted for permanent residence in the United States, on whose behalf a sponsor executed an affidavit of support or similar agreement, including any spouse or child who will accompany or follow-to-join the beneficiary of an alien visa petition.

Spouse: Either of two individuals:

1. Who are defined as married to each other under applicable State law; or

2. Who live together and represent themselves as husband and wife to the community, which includes relatives, friends, neighbors, or tradespeople.

Striker: Anyone involved in a strike or concerted stoppage of work by employees, including a stoppage by reason of the expiration of a collective bargaining agreement and any concerted slowdown or interruption of operations by employees.

Student: Any person who is aged 18 through 49, physically and mentally fit, and enrolled at least half-time in an institution of higher education. See the definition of Institution of Higher Education.

Supplemental Security Income (SSI): Monthly cash payments made under the authority of:

A. Title XVI of the Social Security Act, as amended, to the aged, blind, and disabled;

B. Section 1616 (a) of the Social Security Act; or

C. Section 212 (a) of Public Law 93-66.

Support Services Worker: This job function will handle all items received via mail, fax, or electronic means and process documents as appropriate. Additional functions include scanning/indexing/attaching documents in the Electronic Case File (ECF), mailing Request For Information (RFI) and other application or recertification documents generated from Call Services, and processing cases.

Supportive Services: Services provided to KTAP recipients participating in the Kentucky Works Program (KWP). Supportive services payments are authorized for transportation expenses and other items or services needed by the participant.

Thrifty Food Plan: SNAP benefits levels are based on the Thrifty Food Plan. The Thrifty Food Plan is a low-cost diet and is revised on October 1st of each year.

Transitional Housing: Housing to encourage the movement of homeless individuals or families to independent living within a reasonable amount of time, as determined by the Secretary of Housing and Urban Development (HUD). Transitional housing includes housing primarily designed to serve formerly institutionalized homeless individuals, homeless individuals with mental disabilities, and homeless families with children.

Under issuance: The amount of SNAP benefits issued to a household that was less than the amount it was eligible to receive.

Verification: The use of third-party information or documentation to establish the validity of statements provided by the household.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2002 – R. 6/15/26 – OMTL – 698
Use of SNAP Benefits

Eligible households may use their SNAP benefits to purchase eligible food items in stores and at farmers' markets that are authorized by the United States Department of Agriculture (USDA), Food and Nutrition Administration (FNA) to accept benefits.

A. Federal law does not allow sales tax to be charged on food purchased with SNAP benefits.

   1. For items purchased with a combination of SNAP benefits and cash, sales tax can only be charged on the taxable items purchased with cash.
   2. All complaints from participants about sales tax being charged on taxable items purchased with SNAP benefits should be reported to:

      Kentucky Department of Revenue
      501 High Street
      Frankfort, KY 40601

   3. Complaints should include the name and address of the grocer, what you are disputing, by stating the type of tax involved, the tax periods affected, all disputed tax notice number(s), items on which sales tax was charged; and, if available, attach a copy of the sales receipt.
   4. Individuals filing a complaint do not have to reveal their name or address.

B. The following items can be purchased with SNAP benefits:

   1. Food items intended for home preparation and consumption;
   2. Seeds or plants to grow food intended to be consumed by the household; and
   3. Nonalcoholic beverages.

C. The following items cannot be purchased with SNAP benefits:

   1. Alcoholic beverages, including "non-alcoholic" beer;
   2. Household products such as soap, paper products, and cleaning supplies;
   3. Hot foods (such as cooked food from a grocery store deli) or food products prepared for immediate consumption, except as provided in MS 2004;
   4. Tobacco products; and
   5. Any other nonfood products.

D. SNAP benefits on the Electronic Benefit Transfer (EBT) card cannot be used to pay on credit accounts; this includes accounts where retailers have allowed recipients to charge eligible food purchases.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2004 – R. 6/15/26 – OMTL – 698
Special Uses

[Prepared meals may be purchased with SNAP benefits in the following instances:

A. **Communal Dining**. Eligible household members who are age 60 or over, or SSI recipients, and the spouses of these members may use benefits to purchase meals prepared especially for them at communal dining facilities authorized by the Federal Nutrition Assistance Administration (FNA) for that purpose. Communal dining facilities include private establishments, such as churches, which do not normally serve food.

B. **Meals On Wheels**. Eligible household members who are age 60 or over or who are housebound, physically disabled, or otherwise unable to adequately prepare all their meals may use benefits to purchase meals from a nonprofit meal delivery service authorized by the FNA. Spouses, regardless of age or disability, are eligible to participate in this program.

C. **Cooperatives**. Benefits may be used to purchase food at any private nonprofit cooperative food-purchasing venture, including those whose members pay for food prior to its receipt.

D. **Substance Use Treatment Programs**, including Drug Addiction and Alcohol Addiction (DAA) treatment centers.

E. **Group Living Arrangements**.

F. **Domestic Abuse Center Residents**.**]**

[Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2006 – R. 6/15/26 – OMTL – 698
Volunteers

Volunteers or other persons not employed by the Department may be involved in certification-related activities; however, they cannot conduct certification interviews or certify applicant households. Activities of these volunteers include the following:

A. Teaching nutrition;

B. Transporting individuals to certification and issuance offices;

C. Assisting in completion of required eligibility forms;

D. Assisting in securing necessary verification; and

E. Acting as representatives.

No persons or organizations that are parties to a strike or lockout are used in any certification-related activity. An employee of the Department for Community Based Services (DCBS) whose spouse is a party to a strike is not included in this restriction.

These individuals may be used as a source of verification for information provided by applicant households if they would, under normal circumstances, be in the best position to confirm a household's circumstances. The facilities of persons or organizations who are parties to a strike or lockout are not used in the certification process or as a site for the certification interview.]

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2010 – R. 6/15/26 – OMTL – 698
Relatives as a Separate Household

A. [The following individuals living together **must** be certified as one household regardless of whether they customarily purchase and prepare food separately.

1. The spouse (as defined in MS 2000) of any household member;

   Example: Individuals living together and representing themselves as spouses to the community (which includes relatives, friends, neighbors, or tradespeople) must be certified as one household.

2. Parents living with their natural, adopted, or stepchildren who are age 21 or younger (including ex-stepchildren, as divorce does not sever the stepparent relationship). For SNAP benefit purposes, biological blood ties are severed when a child is legally adopted. However, guardianship does not override a parent's natural relationship; and

   Example: A child lives in the home with a natural parent and an adoptive parent. The child must be included in the case with the adoptive parent if the parents are applying as separate households.

3. Children, other than foster children under 18, who are under the parental control of an adult household member.

Note: In situations where a parent moves into a household that contains a child and a non-parental adult who has custody of said child, the SNAP case must include the parent, child, and non-parental adult, along with anyone else with whom they purchase and prepare meals. The parent and child must be in the same SNAP case, as this is a requirement for any parent living with their child age 21 or younger. Since the non-parental adult has custody of the child and the child is under that adult's parental control, until the child moves out or the custody has been severed, the non-parental adult must also be included in the same SNAP case.

Separate entrances to a home have no bearing on household composition; there must be a clear separation of living units.

Example: a duplex is considered separate dwellings/living units; however, a converted basement apartment is not a separate dwelling/living unit.

B. The following relatives may be granted separate household status if they meet all other eligibility criteria and purchase food and prepare meals separately from the others.

1. Adult children age 22 or older, living with their parents; and

2. Siblings who, regardless of age, are not living with their parents.

3. A person who is too disabled to purchase their own food, but who has arranged to have the food purchased and prepared separately from those

with whom they live, may qualify for separate household status. The disabled person may claim separate household status even if the person who shops for food or prepares meals resides with them.

If questionable, require the household member to verify separate household status.

C. If a household containing elderly and disabled relatives, who purchase and prepare their meals together, is requesting separate household status, see MS 2020.

D. If an applicant does not meet the criteria above, all household members must be included in the case.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2020 – R. 6/15/26 – OMTL – 698
Special Provision for the Elderly and Disabled.

[For SNAP purposes, a household is an individual or group of individuals who live together and who customarily purchase and prepare food together. The members of a household may be related or unrelated. For further guidance regarding required household members, reference MS 2010 – MS 2100. Any individual or a group of individuals who purchase and prepare food together are considered as one household unless an elderly individual, whether related or unrelated, is unable to purchase and prepare meals separately because of a disability. If an individual states they fall into this category, that individual and their spouse can be certified as a separate household if all of the following apply:

A. The individual is age 60 or over;

B. The individual has a disability considered permanent under the Social Security Act or suffers from a non-disease-related, severe, permanent disability as outlined in MS 2000; and

C. The countable gross income of all others living with the individual, excluding the income of the elderly and disabled individual's spouse, is less than or equal to 165% of the net monthly income eligibility standard.

Income information for the other individuals who reside with the elderly and disabled applicant(s) in the case is requested; however, the income is not used to calculate the allotment for the elderly and disabled applicant(s) but is used to determine whether the elderly or disabled household is eligible to receive benefits separately. If the income of the other individuals is greater than the 165% limit, all individuals must be included in one household.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2030 – R. 6/15/26 – OMTL – 698
Emancipated Child

[If a child under age 18, other than the natural, adoptive, or stepchild of a household member, is not under the control of a household member, the child can be certified as a separate food benefits household if the household is eligible for separate household status, and if one of the following applies:

A. The child has income sufficient to meet their needs; or

B. The child has moved into the household due to their divorce or separation.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2040 – R. 6/15/26 – OMTL – 698
Irregular Household Members

[Irregular household members are individuals in the household who are in and out of the home due to the nature of their employment, vacation, school, or hospital confinement. Household composition for irregular members is considered differently based on whether that member is a spouse or other household member.

Treat irregular household members, other than a spouse, in the following manner:

A. Do not enter the irregular household member as the head-of-household.

B. In situations where it cannot be determined whether an irregular member can be claimed by the household, make the determination based on where the individual takes the majority of their meals.

C. If a child involved in a joint custody arrangement receives an equal number of meals from each parent's household, the parents must decide which household will apply for SNAP benefits for the child. If an agreement between the parents cannot be made, the child will be included in the household that applies first. If the other parent applies for the child while the child is already receiving benefits in the first parent's case, advise the parent that they may request a hearing. During the hearing process, a hearing officer will make a decision on which household may claim the child for SNAP benefits.

D. If the family member engaged in out-of-town employment, vacation, or hospital confinement is in the home sometime during the month, staff may include them in the household for that month.

   Example: A family member works away from home during the week but comes home every weekend. In this situation, because the individual is expected to return home during the month, the individual is considered a household member. Since this individual is considered a household member, all of their income is included when considering the household's income.

E. Establish the amount of income provided to the household by the family member who is not a part of the household, and consider this amount as income to the household.

   Example: A family member works away from the home and does not return to the household during the month, but gives money to the household. In this situation, the individual is not considered a household member, but the money received is considered income to the household.

F. Spouses who are in and out of the household due to the nature of employment, vacation, hospital confinement, or school attendance, treat them in the following manner:

1. If the spouse has not established another residence and is in the household or is expected to be in the household sometime during the month, consider the spouse as a household member in determining the household's SNAP allotment amount;

2. Consider the spouse's income available in its entirety to the household; and

3. Consider deductible expenses incurred by the spouse while absent from the household, along with all other deductible expenses.

   Example: A spouse works away from home on weekdays and pays for a hotel during the week; this expense may be considered in addition to the household’s regular shelter expenses.

   Note: This does not apply to other individuals who are in and out of the home and who are not a spouse of the head of household.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2060 – R. 6/15/26 – OMTL – 698
Non-Household Members

[The following individuals are considered non-household members when determining household composition. **Please note:** The relationship of non-members should be thoroughly explored and documented.

A. Roomers, which are individuals to whom a household furnishes lodging, but not meals;

B. Live-in attendants;

C. Ineligible students, including a related member (see MS 2320 for more on ineligible students);

D. Boarders, if the household does not request their inclusion;

E. Unrelated individuals who live together but who do not customarily purchase and prepare food together; and

F. Foster care children/adults, if the household does not request their inclusion.

Refer to MS 2010 for more information regarding how to consider related household members.

Household size and composition must be verified at every application, reapplication, recertification, reported change in composition and/or address, and whenever the information provided by the household is questionable.

During the FS-2 process, client statement is acceptable as verification of a change in household composition, **unless** it is questionable.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2080 – R. 6/15/26 – OMTL – 698
Ineligible Members

[The following individuals are ineligible to participate in the SNAP program:

A. Boarders - residents in a household who pay reasonable compensation to the household for lodging and meals, or individuals who reside in a commercial boarding house;

B. Foster care children/adults excluded at the request of the SNAP applicant; except foster care adults who are residents of a group home. See MS 2700;

C. Residents of institutions such as nursing homes, hospitals, facilities in which all meals are provided, etc., except as provided in MS 2090;

D. Strikers, unless the household was eligible for benefits the day prior to the strike and the household is eligible at the time of application;

E. Excluded household members as outlined in MS 2100; and

F. Ineligible students. For more information, see MS 2320.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2090 – R. 6/15/26 – OMTL – 698
Residents of Institutions

[Only the following residents of institutions can participate in the SNAP program:

A. Residents of federally subsidized housing for the elderly;

B. Individuals with Substance Use Disorders (SUD) and their children who reside at an approved Drug Addiction and Alcohol (DAA) treatment center that meets the criteria specified in MS 2600.

C. Aged, blind, or disabled individuals who meet the definition of "disabled" and who are residents of a group living arrangement.

D. Individuals or individuals with their children temporarily residing in a domestic violence shelter.

E. Residents of temporary shelters for the homeless.

F. Applications received from the Social Security Administration (SSA) for Supplemental Security Insurance (SSI) applicants who are residents of institutions. The application is held for processing until the SSA advises the local office of a release date. Refer to MS 3155 for details.

G. Residents of dormitories or other on-campus housing who do not have meal tickets.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2100 – R. 6/15/26 – OMTL – 698
Excluded Members

[Excluded members cannot participate in SNAP as a separate household or as a member of any SNAP household. Refer to MS 5050, MS 5220, and MS 5520 for treatment of resources, income, and deductions for those individuals**.**

The following are considered excluded household members:

A. Ineligible aliens;

B. Individuals currently disqualified for:

1. Refusing to provide or apply for a Social Security Number (SSN);
2. Intentional program violation;
3. Failure to agree to register for work;
4. Noncompliance with an employment and training requirement, including a Kentucky Works Program (KWP) sanction;
5. Voluntarily quitting a job, reducing work hours, or refusing a job;
6. Fleeing to avoid prosecution, custody, or confinement for a crime that would be classified as a felony;
7. Fleeing to avoid prosecution or custody for an attempt to commit a crime that would be classified as a felony; or
8. Violating the conditions of probation or parole under Federal or State law.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2200 – R. 6/15/26 – OMTL – 698
Boarders - General

[Boarders are individuals residing with a household who pay reasonable compensation to the household for lodging and meals, or who reside in a commercial boarding house. Boarders are considered non-household members.

To be considered a boarder, the member must meet the following criteria:

A. Make reasonable monthly payments as follows:

1. Pays an amount **equal to or exceeding** full monthly SNAP benefits according to the border's benefit household size. This applies to boarder households who receive an average of **more** than two meals each day; **or**

2. Pays an amount **equal to or exceeding** two-thirds of the full monthly food benefits according to the boarder's household size. This applies to boarder households who receive an average of two meals or **less** each day.

B. Foster care adults/children who are excluded from the household are considered boarders. The reasonable payment criteria do not apply. The entire foster care maintenance payment is excluded from consideration in benefits calculations.

C. The following relatives who live together but do not purchase and prepare food together may be considered boarders.

1. Children age 22 or older, living with their parents; and

2. Siblings who do not live with their parents. (If the sibling is under age 18 and is under the parental control of another sibling, they cannot be a boarder in the case of the sibling who assumes the parental role.)

   These individuals must be making reasonable monthly payments, as defined above.

The following **cannot** be considered a boarder:

A. Spouse of a household member;

B. Children under 18 years of age, if under the control of a household member;

C. Individuals paying less than a reasonable monthly payment for meals;

D. Individuals furnished both meals and lodging by a household, but contribute less than a reasonable monthly amount for meals; or

E. Parents living with their natural, adopted, or stepchildren.

Note: Individuals who are coded as boarders in an active/pending case cannot apply separately for themselves.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2300 – R. 7/1/26 – OMTL – 701
Students

A. **[**To be eligible to participate in SNAP, students, as defined in MS 2000, must meet **at least one** of the following criteria:

1. Be employed and paid for an average of 20 hours per week **or** 80 hours per month;

2. Be self-employed and working an average of 20 hours per week or 80 hours per month **and** receive weekly earnings at least equal to the Federal minimum wage multiplied by 20 hours per week or 80 hours per month (use gross amount of income to make this determination);

3. Participate in a State or federally financed work-study program during the regular school year.

   To qualify under this provision, the student must be:

   a. Approved for work-study at the time of application for SNAP benefits;

   b. The work study must be approved for the school term and,

   c. The student must anticipate actually working during that time.

   The exemption begins with the month in which the school term begins, or the month work-study is approved, whichever is later. Once started, the exemption continues until the end of the month in which the school term ends, or it becomes known the student has refused an assignment. The exemption does not continue between terms when there is a full month or longer break, unless the student participates in work-study during the break;

4. Be responsible for the physical care of a dependent household member under age six. Only one parent/stepparent per household can be responsible for the care of dependent household members under age six. The parents must decide who has primary responsibility;

5. Be a single parent enrolled in an institution of higher education on a full-time basis, as determined by the institution, who is responsible for a dependent child under age 12, regardless of the availability of adequate childcare.

   This provision applies where only one natural, adoptive, or stepparent, regardless of marital status, is in the same SNAP household as the child. “Regardless of marital status” means the parent may be single (meaning never married), a widow or widower, separated, divorced, or married and living in a separate household from the other parent.

   If no natural, adoptive, or stepparent is in the same SNAP household as the child, another full-time student in the same SNAP household as the child may be eligible if they have parental control over the child and are not living with their spouse;

6. Be responsible for the care of a dependent household member who has reached age six but is under age 12, **and** where it has been determined adequate childcare is not affordable or convenient to enable the individual to attend class and satisfy the work requirements of item one of this section.

   The lack of adequate childcare includes any case situation where abuse, neglect, or the safety of the child is in question. Only one parent/stepparent per household can be responsible for the child between the ages of six and 12. The parents must decide who has primary responsibility;

7. Receive benefits from the Kentucky Transitional Assistance Program (KTAP). This does not include Work Incentive Reimbursement (WIN) payments;

8. Be assigned to or placed in an institution of higher education through a program under the Workforce Innovation and Opportunity Act (WIOA), or in compliance with the requirements of another program operated by a State or local government, for the purpose of the Employment and Training Program (E&T).

   An appropriate State or local E&T program contains components that are at least equivalent to the acceptable components of the SNAP E&T program. Individuals who voluntarily participate in one of these E&T programs and are placed in an institution of higher education through or in compliance with the requirements of the program also qualify for the exemption; or

   Note: Students attending Kentucky Community and Technical College System (KCTCS) schools who are enrolled in a program that cannot be transferred to a four-year degree program and agree to participate in E&T are considered eligible students through the Vocational Education Skills (VES) program.

9. Be assigned to, or placed in, an institution of higher education through, or in compliance with, Section 236 of the Trade Act of 1974.

   This Act was passed to assist workers who have lost their jobs due to foreign trade. The Office of E&T administers the provisions of the Trade Act through a program entitled Trade Adjustment Assistance (TAA).

   To receive assistance through TAA, a group of three or more fired or laid-off employees, the labor union, or the company may petition E&T for consideration. E&T submits the request to the Department of Labor for consideration.
   The Department of Labor is responsible for determining the job loss was the result of foreign trade. If the Department of Labor approves the request, E&T notifies the dislocated workers when to come to the local One-Stop Career Center to apply for the TAA program. Individuals with college credits

will be placed into college; all others will be placed into a trade or vocational school.

Note: If a household member is enrolled at least half-time due to E&T placement or through TAA, they are not exempt from work registration.

B. Individuals who reside on campus and possess a meal plan that provides over 50% of daily meals are not eligible for SNAP benefits. These individuals are considered to be living in an ineligible institution.

C. Participants in an on-the-job training program are not considered students during the time they are in training. They may be considered students during the period of time they are only attending classes. However, if they meet the student definition, they must meet one of the criteria in item A above to be eligible for SNAP benefits.

D. At the end of the school term, if the student does not meet ongoing eligibility, it is the responsibility of the household to report this change.

E. Students determined ineligible can become eligible for SNAP benefits as soon as one of the criteria listed in this section, item A, is met.

F. For determination of student financial eligibility, refer to MS 5650.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2310 – R. 7/1/26 – OMTL – 701
Period of Student Enrollment

[Enrollment status begins on the first day of the school term of the institution of higher education. Enrollment continues through normal periods of class attendance, vacation, and recess, including summer recess, unless the student:

A. Graduates;

B. Is suspended or expelled;

C. Drops out; or

D. Does not intend to register for the next normal school term, excluding the summer term.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2320 – R. 7/1/26 – OMTL – 701
Ineligible Students

[An ineligible student is considered an ineligible member. The remaining household members can participate if otherwise eligible.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2330 – R. 7/1/26 – OMTL – 701
Exceptions to Student Status

[The following individuals are **not** considered students **or** are exempt from student status:

A. Individuals 17 years of age or younger or 50 years of age or older;

B. Individuals who are physically or mentally unfit;

C. Individuals receiving Temporary Assistance for Needy Families (TANF) under Title IV of the Social Security Act;

D. Individuals participating in on-the-job training programs, including paid apprenticeships, are exempt from student criteria during the time they are being trained by the employer. This includes individuals who are placed in an institution of higher education through, or in compliance with the requirements of the program in which they are participating;

Example: An individual enrolled in school to become an electrician and participating in a paid apprenticeship would not be considered a student.

E. Individuals who are employed and paid for an average of 20 hours per week or 80 hours per month, **or** self-employed and paid for a minimum of 20 hours per week or 80 hours per month and receive weekly earnings at least equal to the federal minimum wage multiplied by 20 hours;

F. Individuals participating in a state or federally financed work-study program during the regular school year;

G. Individuals who are single parents enrolled in an institution of higher education on a full-time basis and are responsible for the care of a dependent child under the age of 12;

H. Individuals attending school less than half-time as defined by the institution;

I. Individuals enrolled full-time in schools and training programs that are not institutions of higher education;

J. Individuals attending high school; and

K. Refugees enrolled only in English as a Second Language (ESL) courses at institutions of higher education. A refugee taking ESL courses as part of a total program must meet one of the student provision requirements if they otherwise meet the definition of a student.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2350 – R. 6/1/26 – OMTL – 655
Criminals

[Individuals charged with or convicted of certain crimes are disqualified from receiving food benefits.

A. These crimes are:

1. Fleeing to avoid prosecution, custody, or confinement for a crime that would be classified as a felony. If the warrant is not being acted upon, the individual would not be considered as fleeing;

2. Fleeing to avoid prosecution or custody for an attempt to commit a crime that would be classified as a felony; and

3. Violating the conditions of parole/probation under a Federal or State law. If a law enforcement agency does not intend to arrest an individual for probation or parole violations, within 30 days, the State Agency shall not determine the person as a fleeing felon, probation, or parole violator.

B. Impose a disqualification when:

1. An individual is convicted of Federal aggravated sexual abuse, murder, sexual exploitation and abuse of children, sexual assault, or similar State laws **and** who is not in compliance with the terms of their sentence **or** parole.

2. An individual admits they are a fleeing felon and meets all four of the conditions listed below:
   a. There is an outstanding felony warrant for the individual by a Federal, State, or local law enforcement agency. The underlying cause for the warrant must be for committing or attempting to commit a crime that is a felony under the law of the place from which the individual is fleeing or a high misdemeanor under the law of New Jersey;
   b. The individual is reasonably aware that a felony warrant has already been issued or would have been issued;
   c. The individual has taken some action to avoid being arrested or jailed; and
   d. The law enforcement agency is actively seeking and intends to enforce the warrant.

3. An individual admits they are a fleeing felon or a probation or parole violator, and the State obtains proof to verify the individual's admission. Client statement cannot be used to disqualify the individual.

4. Staff are notified by the Division of Family Support (DFS) that the individual is a fleeing felon. When this occurs, impose a disqualification immediately,

as failure to do so will result in an over-issuance and agency error in the SNAP case.

Note: Pretrial diversion is not considered a “conviction” of a felony.

C. The disqualification varies according to the offense:

Fleeing felons and parole/probation violators are disqualified until the condition stops. Once they are no longer fleeing, delete the disqualification.

If the individual states they are not a fleeing felon and cannot provide proof from the law enforcement agency, contact the Claims Management Section.

Note: The individual is no longer considered fleeing when notification is received from Central Office that the individual provided proof of status from the law enforcement agency.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2370 – R. 6/1/26 – OMTL – 686
Noncompliance With Other Programs

A. [When an individual fails to comply with requirements in other programs, they will be penalized in the SNAP Program. This is to prevent SNAP from increasing due to the other program's benefits decreasing as a result of the non-compliance.

The following Kentucky Transitional Assistance Program (KTAP) penalties will generate a disqualification:

1. Failure to cooperate with the Department of Child Support Services (DCSS), resulting in a 25% reduction in the KTAP benefit;

2. Teen parent and no adult-supervised setting;

3. 16 to 18-year-olds not in school; and

4. Cooperate with the Kentucky Works Program (KWP). If the SNAP member is exempt from work registration for any reason other than receipt of KTAP benefits, then a disqualification is imposed when the member fails to cooperate with KWP requirements.

B. When a SNAP allotment is reduced by 25%, only one 25% reduction is applied to the case, regardless of the number of members with a penalty. For KTAP cases that are being penalized because the individual failed to comply with a program requirement, consider the reduced KTAP amount in the SNAP income calculations. This policy only applies if the individual was certified for SNAP at the time the failure to perform the required action occurred. The system automatically applies penalties and disqualifications.

If there is a break in the household's SNAP participation and a penalty was imposed prior to the break, then the penalty would still apply at reapplication if the non-cooperation with the KTAP program is still occurring.

A non-cooperation disqualification does not apply when a disqualification is applied in a medical-only case for not complying with Medical Support Enforcement (MSE). See Vol 2A, MS 4350, for additional information on disqualifications.]

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2380 – R. 6/1/26 – OMTL – 686
Child Support Disqualification Overview

[Individuals with $500 or more in child support arrearages are disqualified from receiving SNAP benefits. The individual is ineligible until they meet their monthly obligation amount on **all** court orders or are exempt as discussed in MS 2385. The Department of Child Support Services (DCSS) determines when the disqualification should be imposed.

A. The Kentucky Automated Support and Enforcement System (KASES) Non-Payment Delinquent report displays all individuals identified as delinquent by DCSS.

   Staff use this report to identify individuals who must be disqualified. An individual is disqualified by answering "Yes" to the question on the Non-Financial Questions screen, "Does any of the following apply to anyone in the household: refused a job, voluntarily quit a job, did not comply with other programs, Unemployment Insurance Benefits (UIB) sanctioned, or identified as delinquent with Child Support by DCSS?"

   Note: Only individuals who are identified through this report are to be disqualified. Staff should not make their own determination based on information reviewed through another system inquiry or reported by the individual.

B. The KASES Non-Payment Cured Individuals report displays all disqualified members of an active case that have become compliant, as identified by DCSS.

   Staff use this report to cure a child support disqualification. The disqualification is cured by completing a case change to add the individual back into the SNAP eligibility determination group and adding an end date to their disqualification.

   If an individual comes in prior to appearing on the cure report, the worker must explain the disqualification and inquire if the individual meets the exemption criteria. Do not request or accept statements from local child support offices to cure an individual's disqualification. If the individual disputes the validity of the disqualification, email the Nutrition Assistance Branch (NAB) **through chain of command**, who will verify the circumstances with DCSS central office staff.

C. Upon receipt of a Notice of Administrative Hearing (NOH) involving a child support disqualification, email NAB **through chain of command** and attach a copy of the scheduling order and any other applicable information. NAB will notify DCSS central office staff, who will attempt to resolve the issue prior to the hearing. If the issue is resolved, a notification will be sent to withdraw the hearing request on Worker Portal. If the issue cannot be resolved prior to the hearing, NAB will facilitate a DCSS representative to appear at the hearing, if needed.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2385 – R. 6/1/26 – OMTL – 686
Child Support Disqualification Exemptions

[The child support disqualification does not apply to individuals who meet specific exemption criteria. Exemptions are determined by Family Support staff or Department of Child Support Services (DCSS) staff. Individuals must have a verified exemption at application before the disqualification can be ended.

A. Exemption criteria determined and verified by Family Support:

1. Having a child under age 18 in the home;

2. Residing in a Drug or Alcohol Addiction (DAA) treatment facility;

3. Participating in a drug treatment program;

4. Pregnant or in the 3 Month postpartum period; or

5. Complying with the Employment and Training (E&T) Program, Kentucky Works Program (KWP) or another state or federally funded work program (this applies only after the individual has participated for 30 days).

6. Released from incarceration in the last 12 months, was incarcerated for a period of at least 30 days, and is now cooperating with DCSS.

B. Good Cause criteria determined and verified by Family Support are identifying pending claims for Unemployment Insurance Benefits (UIB).

C. Good Cause criteria determined and verified by DCSS are temporary good cause for 30 days or less for a delinquency due to a job change (only applicable if the individual pays support via wage garnishment), illness, or recent incarceration.

D. If verification of an exemption or temporary good cause is provided, enter an end date for the disqualification and thoroughly document in case comments.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2400 – R. 6/1/26 – OMTL – 368
Strikers – Introduction

[A household containing a member on strike is ineligible to participate in the SNAP program unless one of the following applies:

A. The household would have been eligible to participate in the program had an application been made the day prior to the strike; or

B. The household was certified for benefits at the time of the strike. However, a certified household may not receive an increased allotment as a result of a decrease in the income of the striking member(s) of the household.

Reference MS 2420 for information to determine whether or not a household member is considered a striker for food benefits purposes.

To determine the eligibility of households containing strikers, do the following:

A. Determine pre-strike eligibility by considering the household's circumstances the day before the strike;

B. Determine current eligibility by considering the household's circumstances at the time of application; and

C. Compare the striking member's income the day before the strike to the striker's income at the time of application. Add the higher of the two to the current income of the other non-striking household members during the month of application.

In determining the allotment amount and eligibility for the household, calculate all deductions, including the earned income deduction for the month of application in the same manner as for any other household.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2420 – R. 6/1/26 – OMTL – 368
Guidelines for Applying Striker Provisions

[Use the following information to determine whether a household member is considered a striker. If a member is determined to be a striker, follow procedures specified in MS 2400.

A. Striker Provisions **do not** apply to the following individuals or situations:

1. Employees whose workplace is closed by an employer in order to resist demands of employees, i.e., by lockout;
2. Employees who are not members of the striking union and who are unable to work because of striking employees; for example, striking newspaper pressmen are preventing newspapers from being printed, and as a result, truck drivers are not working because there are no papers to deliver;
3. Employees who are not members of the bargaining unit on strike who do not want to cross a picket line due to fear of personal injury or death. The household's statement, as well as general knowledge of violence in the past or present, is sufficient verification to substantiate this exemption from striker provisions;
4. Employees who are exempt from work registration the day prior to the strike, for reasons other than full-time employment at the company that is being struck;
5. Members of the bargaining unit who are working;
6. If the company fires the employee while they are on strike;
7. If the employee officially resigns from their job while on strike;
8. If the company hires permanent replacements for the strikers;
9. If the company will not allow the striker to return to their same job but offers them a different one;
10. If an employee was locked out by the company the day before the strike;
11. If the company lays off, furloughs, or otherwise notifies employees who are not part of the bargaining unit that no jobs are available because of the strike;
12. If a person was laid off when the strike began;
13. Self-employed persons such as independent long-distance truck drivers; or
14. If the union and the company both consider the work stoppage a lockout by the company.

B. Striker Provisions **do** apply to the following individuals or situations:

1. If both the union and the company consider work stoppage a strike;

2. If an employee participates in a sympathy or support strike;

3. If all non-working members of the bargaining unit are on strike, even if they are not members of the union and regardless of whether they are afraid to cross a picket line;

4. An individual who gets another job while on strike but does not officially resign from the struck company; or

5. If the union calls off the strike, tells the strikers to return to work, and they do not. The employees are considered strikers until they go back to work, are fired, or resign.

C. If the union and the company disagree as to whether the work stoppage is called a strike or a lockout, the State agency must request that a determination be made by the Food and Nutrition Administration (FNA).

Additionally, employees are not exempt from striker provisions for food benefits purposes solely because:

1. The individual receives unemployment compensation; or

2. The struck company has applied for bankruptcy under Chapter 11.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2460 – R. 6/1/26 – OMTL – 368
Temporary Shelters for the Homeless

A. **[**Individuals and/or families residing in temporary shelters for the homeless may receive SNAP if all eligibility criteria are met.

B. Residents who are billed for rent are entitled to a shelter deduction.

C. Shelters for the homeless may be approved by the Food and Nutrition Administration (FNA) to accept SNAP from the homeless for the purchase of prepared meals.

D. Employees of temporary shelters for the homeless that accept SNAP for payment of meals may not apply for or act as a representative for individuals residing in the shelter.

Refer shelters requesting information regarding approval to accept SNAP for prepared meals to FNA at 877-823-4369

Note: Whether the shelter has been approved to accept SNAP has **no** bearing on the SNAP eligibility of the homeless residents.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2500 – R. 6/1/26 – OMTL – 596
Shelters for Victims of Abuse

[Before certifying shelter residents, determine whether the facility meets the definition of a shelter for battered individuals and children. A nonprofit residential facility that serves battered individuals and their children. If such a facility serves other individuals, a portion of the facility must be set aside on a long-term basis to serve only battered individuals and children. See MS 2000. Document the basis of the determination.

Maintain a list of shelters that meet the definition in the local office to facilitate prompt certification of eligible residents. Shelters that have Federal Nutrition Administration (FNA) authorization to access benefits through wholesalers automatically meet the definition, and the Agency is not required to make any further determination.

Shelter residents can apply on their own behalf or through a representative who is an employee of the shelter.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 2510 – R. 6/1/26 – OMTL – 596
Duplicate Participation of Residents of Shelters for Victims of Abuse

[Domestic violence shelter residents may leave households containing the person who abused them where the former household's certification was based on a household size that includes the individuals who just left.

A. If the shelter resident is certified as a member of the household containing the person who abused them, the shelter resident can apply for and receive duplicate SNAP benefits as a separate household if all other eligibility criteria are met. These individuals can only receive duplicate benefits once a month.

Benefits are prorated from the date of application. Do not deny or discontinue benefits to the resident because the individual and their children have not been removed from the former household timely.

If the former household receives benefits for the shelter residents for more than one month, initiate claims action against the former household for any duplicate benefits it received because the residents were not removed timely**.**

B. Shelter residents who apply as separate households must be certified solely based on their income and resources and on the expenses for which they are responsible. Do not consider the income, resources, and expenses of the former household. Jointly held resources are considered inaccessible if the conditions in MS 5060 B are met. Room payments made to the shelter are considered a shelter expense.

Take prompt action to ensure that the former household's case reflects the change in the household composition. Provide expedited services to shelter residents if eligible.

1. If the head-of-household moves into a domestic violence shelter, remove all the other members from the SNAP case, except any children who reside with the head-of-household in the shelter. When the case change is processed, the next issuance is added to the household's existing Electronic Benefit Transfer (EBT) account and is accessible through the household's current EBT card. If the head-of-household has the EBT card, the household has access to the benefits. If the head-of-household does not have the EBT card, they should report this, and the worker processing the change of address can issue a new card after the change is entered.

2. If a member other than the head-of-household moves into a domestic violence shelter, remove that member and any individual who moved with the member from the SNAP case. Take a new SNAP application for the members residing in the shelter. When the case is approved, a new EBT card is mailed to the individual in the shelter.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2600 – R. 6/15/26 – OMTL – 660
Basis for Treatment Center Participation

[For residents of Drug Addiction and Alcohol (DAA) treatment centers to be eligible to receive SNAP, the DAA center must meet the following criteria:

A. Have a Point of Sale (POS) system certified by the Food and Nutrition Administration (FNA). This is a requirement for for-profit centers, and optional, but recommended for non-profit centers. To determine if a center is an authorized retailer, contact FNS at 877-823-4369, or

B. Non-profit DAA centers may also meet one of the following criteria:

1. Be certified by the Office of the Inspector General (OIG). Facilities certified by the state as a DAA can be found in the Cabinet for Health and Family Services (CHFS) Department of Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) Provider Directory. The list of certified DAA centers can be found by selecting “Substance Use Treatment”. To further narrow the list of results, select the county and/or service type.

2. Provide a certification letter from CHFS DBHDID. To obtain this letter, DAA centers must call The Adult Substance Use Treatment and Recovery Services Branch within DBHDID at (502) 564-4527. The facility must supply DBHDID with a list of services they provide to their residents to determine if the facility qualifies for certification. The letter is good indefinitely, and no subsequent review is conducted by DBHDID.

DAA Authorized Representatives applying on behalf of facility residents who are unable to provide proper documentation must understand that residents are not eligible to receive SNAP benefits until required documentation has been provided.

Please refer centers to (502) 564-4527 to determine eligibility as an allowable DAA facility.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2610 – R. 6/15/26 – OMTL – 643
Eligibility of Treatment Center Participants

[Individuals with a Substance Use Disorder (SUD) who regularly participate in authorized Drug Addiction and Alcohol (DAA) treatment and rehabilitation programs in a residential setting may voluntarily apply for SNAP through the program's Authorized Representative (AR). Center ARs are not required to apply and recertify in person; however, they are encouraged to contact their local office to make applications, recertifications, and/or case changes. The AR must be an employee of the treatment center/program, have verification that they are an employee, and have verification that they are designated to apply on behalf of the residents. The AR must sign the application.

A. Before approving any residents of private, non-profit treatment centers for SNAP, verify the institution is certified by the appropriate state agency(s) or have the AR provide the letter from the Cabinet for Health and Family Services (CHFS) Department of Behavioral Health, Developmental and Intellectual Disabilities (DBHDID), as specified in MS 2600.

   If the treatment center is an ineligible facility, enter the following on the system:

   1. Choose "DAA" for the Living Arrangement Type on the Living Arrangement screen.

   2. When the Organization/Provider section is opened, enter the "From" date and answer "Yes" to the facility providing 50% of the meals. Leave the "Organization/Provider" field blank.

B. Individuals with a SUD who are participating in a residential program have eligibility determined as a one-person household unless the resident's children also live at the center. Those children are included in the household size.

C. Certify residents of treatment centers by using the same provisions that apply to all other applicant households, except that certification is accomplished through an AR.

D. Individuals who regularly participate in an authorized drug or alcohol treatment and rehabilitation program on a non-resident basis may apply for SNAP on their own behalf or through the use of an AR.

   If an AR is appointed, make the following system entries:

   1. From the Application Information screen, answer "Yes" to the question, "Is there an Authorized Representative?" This triggers the Representatives screen.

   2. From the Representatives screen, complete the AR Information section for all required entry selections. Complete an individual system search for the person(s) being appointed using the "Lookup" button located in this

section. If the individual is established on the system with an individual number, then this needs to be uploaded in the "Individual #" box. For DAA facilities, the organization name for which the AR works is to be entered in the "Organization Name" field.

Verification for the AR is completed under the "Level of Permission" section. From there, select the Program, Level of Permission, Permission Verification (once verified), and Permission Verification Date (once verified) fields.

3. Although not required, system entry sections, the Address Information and Contact Information sections should be addressed/completed.

   Note: Individuals who reside in treatment centers can have more than one AR; however, only one AR may have permission to use the individual's EBT card. Also, the AR that completes the interview **must** be the AR to sign the application.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2640 – R. 6/15/26 – OMTL – 643
Exemption from Work Registration

[Individuals who are participating in a drug addiction or alcohol treatment and rehabilitation program, either residential or nonresidential, are exempt from work registration requirements.

If the information is questionable, verify the individual's regular participation in a treatment program through the organization or institution operating the program before granting the exemption. Consider information questionable if information on the application or previous applications, or received by the agency prior to certification, is contradictory.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2650 – R. 6/15/26 – OMTL – 643
Certification Procedures for Residents of Treatment Centers

[The following certification procedures apply to residents of treatment centers:

A. **Expedited Services**. For residents of treatment centers entitled to expedited services, the monthly allotment is made available no later than five calendar days following the filing date. If eligibility for the initial application is expedited, complete the verification and documentation requirements (if postponed) at recertification.

B. **Normal Processing Standards**. If item A does not apply, complete the verification and documentation requirements prior to making an eligibility determination for the initial application.

C. **Rights of Certified Residents**. Resident households have the same rights to notices of adverse action, fair hearings, and entitlement to restoration of lost benefits as all other SNAP households.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2660 – R. 6/15/26 – OMTL – 643
Center Responsibilities

[Drug Addiction and Alcohol (DAA) treatment centers have the following responsibilities:

A. **Monthly Reports**. Each DAA treatment center provides the local office with a list of residents who are currently receiving SNAP benefits monthly. This list must be submitted by the 5th of each month, and it must include a statement signed by a responsible center official attesting to the validity of the list. This list is then checked each month against any active cases to ensure no over-issuance occurs. This list should also be used by the staff member who is designated to do the quarterly visits. The designated staff member should compare the list to the Electronic Benefit Transfer (EBT) cards that the center has on file. This will ensure that the center is either giving the EBT cards to the individuals as they leave or returning the cards to the local office. If the center fails to provide the list of currently participating residents, contact the Nutrition Assistance Branch (NAB) inbox through your chain of command.

B. **Use of Benefits**. If the participant receives their benefits prior to the 16th of the month, the treatment center must debit the participant's EBT card twice per month for half each time. For example, if the participant's monthly allotment is $200, the center must debit the card for $100 before the 16th of the month and debit it again on or after the 16th of the month for $100**.** If the participant receives their benefits on or after the 16th of the month, the full month's benefits can be debited at once.

C. **When the Participant Leaves the Center**.

1. If the participant leaves the treatment center before the 16th of the month and the benefits have already been issued, the recipient is entitled to one-half of their monthly allotment, and the EBT card is returned to the recipient.

   If the participant leaves on or after the 16th of the month and the benefits have already been issued, no benefits are required to be returned to the EBT card; however, the recipient's EBT card must be returned to them.

2. If the participant applied for benefits after the 15th of the month and was issued the initial or prorated month's benefits **and** the second month's benefits in the application month, the following procedures apply:

   a. If the participant leaves the treatment center prior to the 16th of the second month and a portion of the benefits for the second month have been used on behalf of the individual, the treatment center provides the household with one-half of the second month's allotment.

   b. If the participant leaves the treatment center on or after the 16th of the application month but before the first day of the second month, and the benefits for the second month have been issued but not used, the household receives the full allotment for the second month.

If the participant leaves the treatment center without notifying the center and the center is unable to locate the participant, the EBT card is returned to the local office in accordance with Item E of this section.

3. After the participant leaves the treatment center, the center can no longer act as the participant's representative.

4. If possible, the treatment center provides the participant with a change report form. The participant uses the form to report their new address and other circumstances after leaving the center. The center advises the participant to return the form to the appropriate SNAP benefits office in accordance with the participant’s reporting requirements. If the center reports that a participant has left the center, but the participant does not provide a new address, remove the verification source for household composition to allow the case to pend, and correctly discontinue if verification is not returned timely. Comments must address the reason a Request For Information (RFI) was issued.

D. **Reporting Changes**. The treatment center notifies the local office of changes in accordance with change reporting requirements.

E. **Returning Benefits**. After returning any applicable benefits the individual may be entitled to, the treatment center returns the participant's EBT card to the address on the back of the card or to the local office if it is received after the participant has left the center. The EBT card is logged in the system and immediately destroyed. The case remains active, and the participant has to request a new EBT card.

F. **Center Liability**. As a representative, the organization must be knowledgeable about resident circumstances and review those circumstances with residents prior to applying on their behalf. The organization is liable for all losses or misuse of SNAP benefits held on behalf of residents and for all over-issuances which occur while the participants are residents of the treatment center.

G. **Center Penalties And Disqualifications**. The organization authorized by the Federal Nutrition Administration (FNA) as a retail food store can be penalized or disqualified if it is determined administratively or judicially that benefits are misappropriated or used for purchases that did not contribute to a certified participant's meals. The office promptly notifies the Nutrition Assistance Branch (NAB) by memorandum through the appropriate chain of command when it has reason to believe that an organization is misusing benefits. NAB notifies FNA upon receipt of the memorandum from the local office. NAB takes no action against the organization or institution prior to FNA action.

H. **Claims for Over-issuance**. The treatment center is liable for repayment of SNAP benefits for the misuse of SNAP and/or the misrepresentation of information on behalf of a center resident. The resident is responsible if the

3. After the participant leaves the treatment center, the center can no longer act as the participant's representative.

4. **[**If possible, the treatment center provides the participant with a change report form. The participant uses the form to report their new address and other circumstances after leaving the center. The center advises the participant to return the form to the appropriate SNAP benefits office in accordance with the participant's reporting requirements. If the center reports that a participant has left the center, but the participant does not provide a new address, remove the verification source for household composition to allow the case to pend, and correctly discontinue if verification is not returned timely. Comments must address the reason an RFI was issued.**]**

D. REPORTING CHANGES. The treatment center notifies the local office of changes in accordance with change reporting requirements.

E. **[**RETURNING BENEFITS. After returning any applicable benefits the individual may be entitled to, the treatment center returns the participant's EBT card to the address on the back on the card or to the local office if it is received after the participant has left the center. The EBT card is logged on the system and immediately destroyed. The case remains active and the participant has to request a new EBT card.

F. CENTER LIABILITY. As a representative, the organization must be knowledgeable about resident circumstances and review those circumstances with residents prior to applying on their behalf. The organization is liable for all losses or misuse of SNAP benefits held on behalf of residents and for all over-issuances which occur while the participants are residents of the treatment center.

G. CENTER PENALTIES AND DISQUALIFICATIONS. The organization authorized by FNS as a retail food store can be penalized or disqualified if it is determined administratively or judicially that benefits misappropriated or used for purchases that did not contribute to a certified participant's meals. The office promptly notifies the Nutrition Assistance Branch by memorandum through the appropriate chain of command when it has reason to believe that an organization is misusing benefits. NAB notifies FNS upon receipt of the memorandum from the local office. NAB takes no action against the organization or institution prior to FNS action.**]**

H. **[**CLAIMS FOR OVERISSUANCE. The treatment center is liable for repayment of SNAP benefits for the misuse of SNAP and/or the misrepresentation of information on behalf of a center resident. The resident is responsible if the claim is the result of an agency error. Refer to Volume I MS 1015 for more information.**]**

I. DISQUALIFIED TREATMENT CENTER. If FNS disqualifies a treatment center as an authorized retail food store, DCBS suspends the center representative status for the same period and its residents are no longer eligible to participate. The treatment center will be removed from the list of eligible facilities.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2700 – R. 6/15/26 – OMTL – 643
Group Living Arrangement (GLA) - Introduction

[Disabled, aged, or blind residents, including disabled, aged, or blind foster adults in a certified Group Living Arrangement (GLA), who meet the definition of "disabled" in MS 2000, may voluntarily apply for SNAP benefits.

A. GLA residents can receive SNAP benefits by either one of the following means**:**

1. Apply and be certified through the use of an Authorized Representative (AR) employed and designated by the group living arrangement; or
2. In situations where a legal guardian has been appointed, the legal guardian **must** either make the application for the household or appoint an AR for the household to make the application; or
3. Apply and be certified on their own or through an AR of their own choice.

B. All Supports for Community Living (SCL) facilities in Kentucky are licensed, public institutions and are considered a GLA.

C. The GLA determines if the resident is capable of applying for benefits on their own behalf. The determination is based on the resident's physical and mental ability to handle their affairs. The GLA is encouraged to consult with any other state agencies providing services to individual residents prior to determining if the resident is capable of making an application. In situations where a legal guardian has been appointed, the legal guardian **must** either make the application for the household or appoint an AR for the household to make the application.

D. If the resident applies through the use of the facility's AR, the GLA either receives and spends the benefit allotment for food prepared for and served to the eligible resident or allows the eligible resident to use all or any portion of the allotment on their behalf.

E. If the resident applies on their behalf, the benefit allotment may:

1. Be used by the facility to purchase food for meals served either communally or individually to eligible residents;
2. Be used by eligible residents to purchase and prepare food for their own consumption; and/or
3. Purchase meals prepared by the GLA.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2710 – R. 6/15/26 – OMTL – 643
Method of Application

[Residents of a Group Living Arrangement (GLA) are certified using one or both of the following application processes:

A. If the resident applies through the use of the facility's Authorized Representative (AR), their eligibility is determined as a one-person household.

B. If the resident applies on their own behalf, the household size is determined in accordance with MS 2010.

C. If more than one resident applies as part of the same SNAP household, deduct the SNAP maximum allotment amount for a one-person household from the room and board payment for each person. Consider the remaining balance as a shelter expense for the household.

While certifying these households, apply the same provisions that apply to all other applicant households. Prior to certifying any residents for SNAP, verify that the GLA is certified by the appropriate State agency(s). GLA's must be public or private and non-profit.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2715 – R. 6/15/26 – OMTL – 643
Supports for Community Living (SCL) Programs

[Some residential group homes for disabled individuals are operated under a Medicaid Waiver, known as Supports for Community Living (SCL). SCL provider organizations in Kentucky are all licensed, public institutions and are therefore considered Group Living Arrangements (GLA's) as defined in MS 2000.

The residents of these facilities receive supportive services from the organization operating the homes, but the residents may or may not be responsible for their own shelter and food. Even though all meals may be provided, GLA's have an exception from institutional status. Therefore, if all other eligibility requirements are met, these residents may receive SNAP.

The Department for Community Based Services (DCBS) will determine what portion of the program fee paid to the SCL provider is for shelter and include that amount in the calculation for SNAP benefits.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2720 – R. 6/15/26 – OMTL – 643
Certification Procedures

[Apply the following certification procedures to residents of Group Living Arrangements (GLA):

A. **Medical and Shelter Deductions**. If the resident or their protective payee is making payments from the resident's own funds, allow separate and identifiable room and/or medical costs as shelter and medical deductions, respectively. Vendor payments made by the State or others are not deductible. If the amount paid for medical and shelter costs cannot be separately identified, no deduction is allowed for the costs.

   1. If a resident makes a single payment for room and meals that cannot be identified separately, consider the amount of the payment that exceeds the maximum benefit allotment for a one-person household as an identified shelter expense.

   2. If a resident makes a single payment for room, meals, and medical needs, identify these three items separately to the extent possible. Some GLAs charge a basic rate for room and board and have higher rates depending on the amount of medical care needed. In these situations, if the expense cannot be identified separately, the difference between the basic rate and the higher rate may be considered as the medical expense.

B. **Expedited Services**. For those residents of a GLA entitled to expedited services, make SNAP available to the resident no later than five calendar days following the filing date. If eligibility for the initial application is expedited, complete the verification and documentation requirements (if postponed) at recertification.

C. **Normal Processing Standards**. When normal processing standards apply, complete the verification and documentation requirements prior to making an eligibility determination for the initial application.

D. **Rights of Certified Residents**. Resident households have the same rights to notices of adverse action, fair hearings, and entitlement to lost benefits as do all other SNAP households.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2730 – R. 6/15/26 – OMTL – 643
Group Living Facility (GLA) - Responsibilities

[GLA's are responsible for the following:

A. **Reporting Changes.** If the resident made the application on their own behalf, the resident is responsible for reporting changes to the Department for Community Based Services (DCBS). If the GLA is acting in the capacity of an Authorized Representative (AR), the AR notifies DCBS of any changes in the household's income or other circumstances, and when the individual leaves the GLA.

B. **When the Participant Leaves the GLA**.

1. If a resident or a group of residents applies on their own behalf and retains use of their own benefits, these individuals are entitled to keep the benefits when they leave. If a group of residents has applied as one household, a pro-rata share of the remaining benefits is provided to any departing household member. The household, not the GLA, is responsible for reporting the changes in household circumstances in accordance with reporting requirements**.**

2. If a resident applies through the use of the facility's AR, the following procedures apply:

   a. The departing resident receives the full allotment of benefits if no benefits were spent on behalf of that individual. The GLA provides the departing resident with their Electronic Benefit Transfer (EBT) card regardless of when the resident leaves the center. Follow this procedure any time during the month.

   b. If the household leaves the GLA prior to the 16th of the month, and the benefits have been issued for the month and a portion has been used on behalf of the individual, the facility provides the household with their EBT card and one-half of the household's monthly benefit allotment. If the household leaves on or after the 16th of the month and benefits have been issued for the month and used, the household does not receive any benefits.

   c. If the participant applied for benefits after the 15th of the month and was issued the initial or prorated month's benefits **and** the second month's benefits in the application month, the following procedures apply:

      (1) If the household leaves the GLA prior to the 16th of the second month, and a portion of the benefits for the second month were used on behalf of the individual, the facility provides the household with one-half of the second month's benefit allotment.

(2) If the household leaves on or after the 16th of the application month but before the first of the second month, and the benefits for the second month were issued and not used, the household receives the full allotment for the second month.

d. If a participant dies, the GLA must return the EBT card to the address on the back of the card.

e. If a group of residents is certified as one household and has returned the benefits to the facility to use, the departing residents are given a pro-rata share of one-half of the household's monthly benefit allotment if leaving prior to the 16th of the month.

f. Once the residents leave, the GLA can no longer act as their AR.

g. If possible, the GLA provides the household with a change report form to return to DCBS with the individual's new address and other circumstances after leaving the GLA and advises the household to return the form to DCBS within 10 days.

C. As an AR, the GLA must be knowledgeable about the household's circumstances and carefully review those circumstances with them prior to applying on their behalf. If the facility acts as the resident's AR, the GLA is strictly liable for all losses or misuse of SNAP benefits held on behalf of the resident households, and for all over-issuances which occur while the households are residents of the GLA, whether the over-issuance is due to an act on the part of the resident or on the part of the treatment center.

D. The GLA may be penalized or disqualified if it is determined administratively or judicially that benefits were misappropriated or used for purchases that did not contribute to the certified household's meals. The DCBS office promptly notifies the Office of the Inspector General (OIG) by memorandum through the appropriate chain of command when it has reason to believe the GLA is misusing SNAP benefits in its possession. Upon receipt of the memorandum, OIG will immediately investigate and notify the Food and Nutrition Administration (FNA). OIG takes no action against the GLA prior to FNA action.

If the GLA loses its certification from FNA, residents applying on their behalf are still eligible to participate**.**

E. **Monthly Reports**. Each GLA provides the local DCBS office with a list of currently participating residents on a monthly basis. This list includes a statement signed by a responsible GLA official attesting to the validity of the list. The GLA should be advised to compare this list to the EBT cards they have on file to ensure they have either given the EBT card to the departing individual(s) or have returned the EBT card to the local DCBS office. If the GLA fails to provide the list of currently participating residents, contact the Nutrition Assistance Branch through your chain of command. File cases of residents in GLAs separately and check currently active cases against the list to ensure no over-issuance occurs**.]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2780 – R. 6/15/26 – OMTL – 368
Food Preparation

[Group Living Arrangements (GLA) may purchase and prepare food to be consumed by eligible residents on a group basis if residents normally obtain their meals at a central location as part of the GLA or if meals are prepared at a central location for delivery to the individual residents. If residents purchase and/or prepare food for home consumption as opposed to communal dining, the GLA ensures that each resident's SNAP allotment is used for meals intended for that resident. If the resident retains use of their own SNAP allotment, they may either use the benefits to purchase meals prepared for them by the facility or to purchase food to prepare meals for their own consumption.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2790 – R. 6/15/26 – OMTL – 424
Regional Responsibilities for Drug Addiction and Alcohol (DAA) and Group Living Arrangement (GLA) Facilities

[Local office staff designated by the Service Region Administrator (SRA) must conduct random onsite visits to Drug Addiction and Alcohol (DAA) and Group Living Arrangements (GLA) facilities. Staff should ensure at these visits that the DAA and GLA operate within the specified guidelines in order for residents to be eligible for SNAP, that listings are accurate and submitted timely, and that the local office's records are consistent and up to date.

A. Visits to DAAs must be conducted **quarterly**. Written reports of findings from the visits should be submitted by each Region to the Nutrition Assistance Branch (NAB) Inbox .

The visit should cover the following items:

1. Provide a copy of the current policy regarding DAAs to the treatment center's Authorized Representative (AR). Discuss policies with the center AR and complete the Center Acknowledgement Form. **Do not** file this form in any case record. Maintain a folder of your report findings.
2. Provide a copy of forms including FS-1, Application for SNAP, PAFS-702, Proof of No Income, PAFS-76, Information Request, and PAFS-700, Proof of Employment and Wages. Discuss each form and its proper usage.
3. Discuss any issues relating to the Point of Sale (POS) machine, worker interactions, communications, etc. Complete the FS-4 Treatment Center Quarterly Review Form. **Do not** file this form in any case record. Maintain in a folder of report findings.
4. Review the Center’s log books (how benefits are tracked, who is active, etc.)
5. Provide the AR with the full name/e-mail address of the agency contact and advise that they must submit their listing of current residents to the contact via e-mail by the 5th of each month. Forward this list to the appropriate staff.

B. Visits to GLA facilities are conducted **periodically.** Reports on visits to GLA facilities are not required.

C. If an over-issuance is discovered during an investigation or hearing, establish a claim against the AR of the DAA or GLA for overissuances of SNAP benefits held on behalf of residents. The DAA or GLA is responsible for the overissuance, not the individual residents. Only if a GLA resident applied on their own behalf would the individual be responsible for an overissuance.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2800 – R. 6/30/26 – OMTL – 574
Migrant and Seasonal Farmworker-General

[Due to the nature of their employment, migrant and seasonal farm worker households are allowed certain exceptions when eligibility is determined. These exceptions are specified in the sections that follow.

Migrants, who are not citizens, must meet the same immigrant eligibility requirements as outlined in MS 2900.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2820 – R. 6/30/26 – OMTL – 368
Destitute Households

[Migrant or seasonal farmworker households may have little or no income at the time of application and may need immediate food assistance, even though they may receive income at some other time during the month of application. Only migrant or seasonal farmworker households can be considered destitute. Therefore, these households are allowed the following exceptions to the normal expedited services criteria and processing.

A. Destitute Household Criteria

Migrant and seasonal farm worker households meeting the destitute criteria are entitled to expedited services at application, as well as special income calculation procedures.

When applying destitute criteria and calculating income for destitute households, consider a migrant or seasonal farmworker's employer to be the grower for whom the migrant is working and not the crew chief. Consider a migrant who travels with the same crew chief but moves from one grower to another, having moved from a terminated income source to a new income source.

Destitute Household Criteria are met if one of the following applies:

1. The only income for the month of application was received prior to the date of application and was from a terminated source. Income is from a terminated source if:
   a. It is received on a monthly or more frequent basis, and it will not be received again from the same source during the balance of the month of application or during the following month.
   b. It is normally received less often than monthly, and no further payments will be received in the month in which the next payment would normally be received.
2. The only income for the month of application is from a new source, and no more than $25 is anticipated to be received by the 10th calendar day following the date of application. Income is from a new source if:
   a. It is normally received on a monthly or more frequent basis, and no more than $25 was received from the source within 30 days prior to the date of application.
   b. It is normally received less often than monthly, and no more than $25 was received from the source within the last normal interval between payments.
3. The only income for the month of application is from a terminated source prior to the date of application and from a new source after the date of application, and income of more than $25 from the new source is not anticipated to be received by the 10th day after the date of application.

B. Calculating Income for Destitute Households

1. Consider only income received between the first of the month and the date of application.

2. Do not consider income from a new source that is anticipated after the day of application.

3. At recertification, disregard income from a new source in the first month if more than $25 is not anticipated to be received by the 10th calendar day following the date of the household's normal issuance cycle.

4. Apply these special calculating procedures only for the first month of the certification period for both applications and recertifications.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2900 – R. 6/30/26 – OMTL – 684
Alien Status

[A person must be a United States (U.S.) citizen or an eligible alien to participate in SNAP. Nationals of Puerto Rico, Guam, the U.S. Virgin Islands, the Northern Mariana Islands, American Samoa, or Swain's Island are equivalent to U.S. citizenship. Other individuals are ineligible to participate until they become U.S. citizens or meet the exemption criteria outlined below:

A. An alien must be both a qualified alien listed below in item 1 **and** meet special SNAP criteria in item 2 to be eligible. Aliens who are both qualified and meet SNAP criteria are eligible to receive SNAP indefinitely from the date of application. Aliens who are considered qualified but do not meet SNAP criteria must live in the U.S. for five years or longer in a qualified status to be eligible.

1. Qualified Alien:

    a. Admitted to the U.S. as a Lawful Permanent Resident;

    b. Under the Consolidated Appropriations Act of 2024, Public Law 118-42, citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau who are lawfully residing in the U.S. are considered qualified aliens for SNAP purposes. They are not subject to the five-year ban; or

    c. Cuban or Haitian entrant as defined in 501(e) of the Refugee Education Assistance Act (REAA) of 1980. Section 501(e) defines Cuban and Haitian entrants as any individual:

        (1) Granted parole status as a Cuban/Haitian entrant (Status pending);

        (2) Granted any other special status established under U.S. Citizenship and Immigration Services (USCIS) laws for these nationals;

        (3) Being a national of Cuba or Haiti, paroled into the U.S., and having not acquired another status under USCIS;

        (4) Subject to exclusion or deportation proceedings under the Immigration and Nationality Act (INA); or

        (5) Having an application for asylum pending with USCIS.

        Cuban and Haitian nationals who are paroled under section 212(d)(5) of INA are considered paroled in the special status in section 501(e)(1) of the REAA of 1980, **except for those** paroled for purposes of criminal prosecution or solely to testify as a witness in court proceedings, which continue to fall under f. of this section.

2. SNAP Criteria:

a. Aliens must meet one of the following criteria:

   (1) Cuban or Haitian under 501(e) of REAA (Cuban/Haitian Parolees under section 212(d)(5) are considered the same as a Cuban/Haitian Entrant as defined in section 501(e) of the Refugee Education Act of 1980);

   (2) Under the Consolidated Appropriations Act of 2024, citizens of the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau are not subject to the five-year ban.

   (3) Amerasian aliens under 584 of Foreign Operations, Export Financing and Related Program Appropriations Act.

b. The following are eligible at application and indefinitely:

   (1) Veterans who were honorably discharged for reasons other than alien status;

   (2) Active-duty military personnel, other than for training. Active duty does not include reserves or guard duty. It is intended to reflect full-time employment in the service. The minimum active-duty service requirements must have been met by the veteran. Active duty is defined as a minimum of 24 months or the period for which the person was called to active duty;

   (3) The spouse of a living or deceased veteran or active-duty personnel, provided the spouse has not remarried, and the marriage lasted for at least one year or for any period if a child was born before or after the marriage. This includes military personnel who die during active-duty service and Filipinos who served in the Philippine Commonwealth Army during World War II or as a Philippine Scout following the war;

   (4) The unmarried dependent child of such a veteran or active-duty personnel. Unmarried dependent children, under age 22, who are students regularly attending school, and adult disabled children who were disabled before becoming adults, are also eligible under this provision;

   (5) "Noncitizens" lawfully in the U.S. and under 18 at the time of application. Once the child turns 18, he or she must meet another criterion to continue to be eligible;

   (6) "Noncitizens" lawfully in the U.S. and 65 or older on 8/22/96;

   (7) Blind or disabled legal aliens who receive a disability benefit, such as Supplemental Security Income (SSI) or Medicaid, based on a disability.

   (8) Lawful permanent residents who can be credited with 40 quarters of work performed in the U.S. and its territories.

(a) Covered earnings include wages or self-employment income or any earnings of a noncitizen for work legally performed in the U.S.

(b) For couples that are still legally married, the quarters can be credited to a spouse. The aliens lose the quarters of the ex-spouse when they become divorced.
For qualifying work quarters after 1/1/97, the alien must not have received any federal means-tested public benefits, such as Kentucky Transitional Assistance Program (KTAP), SSI, or SNAP, during that quarter. If the member received means-tested assistance in any month of any quarter, the quarter does not count as a qualifying quarter.

(c) The Social Security Administration (SSA) is the primary source of information concerning qualifying quarters worked by an individual. Some aliens may have 40 quarters clearly established, while others may not. Migrant workers in particular may have difficulty obtaining verification of employment.

(d) Qualifying quarters are verified via SSA. When the household states that an alien has 40 quarters, answer "Yes" to the question "Does the alien have 40 quarters of qualified Social Security Credits?". The system will automatically interface with the SSA file to check. If the alien has quarters, the system will prepopulate with the verification source of "Interface" and the date attained. If it cannot verify the quarters, the verification source will prepopulate to "Not Verified", and the client will be required to obtain verification.

B. Effective 12/19/09, Section 8120 of the Department of Defense Appropriations Act (DDAA) of 2010 provides that Iraqi and Afghan Special Aliens (SIVs) are eligible for SNAP to the same extent and for the same period of time as refugees pursuant to Section 207 of the Immigration and Nationality Act.

Please see MS 2910 for acceptable forms of verification for Afghan/Iraqi Special Aliens.

C. The following aliens may be eligible even if they are not qualified aliens as listed above, and may be eligible for an indefinite period of time:

1. An individual lawfully residing in the U.S. who was a member of a Hmong or Highland Laotian tribe that rendered assistance to U.S. personnel by taking part in a military or rescue operation during the Vietnam Era (8/5/1964-5/7/1975). This also includes the spouse (or unremarried surviving spouse) or unmarried dependent children of these individuals.
2. American Indians born in Canada to whom section 289 of the INA applies, and members of an Indian tribe as defined in section 4(e) of the Indian Self-Determination and Education Assistance Act.

D. Under the Child Citizenship Act of 2000, a child will automatically acquire citizenship on the date that all of the following requirements are satisfied:
1. At least one parent is a U.S. citizen;

2. The child is under 18 years of age; and

3. The child is admitted to the U.S. as an alien.

   The parent can apply for a Certificate of Citizenship by filing Form N-600. They can also apply for a U.S. passport. If the applicant has other documentation that verifies the father of the children is a U.S. Citizen, such as the child's birth certificate or the father's birth certificate, then this can be used, and the Certificate of Citizenship would not be necessary.

E. Noncitizens, other than those described above, are ineligible to participate as a member of any household. This includes visitors, tourists, diplomats, and students who enter the U.S. temporarily with no intention of abandoning their residence in a foreign country.

F. See MS 3000 for policy concerning Sponsored Aliens and Required Affidavit of Support.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2903 – R. 6/1/26 – OMTL – 684
Citizenship/Alien Status Declaration Requirement

[On a one-time basis only, as a condition of eligibility, one adult representative of the household must attest under penalty of perjury that all household members are citizens or qualified aliens. This is done when the household representative signs the application. Attesting to the citizenship of all household members is contained in the rights and responsibilities portion of the application for SNAP.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2905 – R. 6/30/26 – OMTL – 684
Verification of Citizenship

[Verification of citizenship is a technical eligibility requirement. An individual's statement is an acceptable form of verification, unless questionable.

If questionable, ask the household to provide verification of citizenship. Acceptable forms of verification include birth certificates, religious records, voter registration cards, certificates of citizenship or naturalization provided by the United States Citizenship and Immigration Services (USCIS), such as USCIS Form I-179 or USCIS Form I-197, or U.S. passports. If the above forms of verification cannot be obtained and the household provides a reasonable explanation as to why it is not available, accept a signed statement from someone who is a U.S. citizen that declares, under penalty of perjury, that the person in question is a U.S. citizen. For example: I, _________________, swear under penalty of perjury, I do know that _________________ is a U.S. citizen.

For companion SNAP and Medicaid or Kentucky Transitional Assistance Program (KTAP) cases, the individual’s failure to present documentary evidence of citizenship for the Medicaid or KTAP case **does not** make the individual’s declaration of citizenship questionable for the SNAP case.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2910 – R. 6/30/26 – OMTL – 684
Verification of Alien Status

[When verification of eligible alien status is not provided on a timely basis or if questionable verification is not substantiated, consider the member an ineligible alien. See MS 2920.

A. Determine the eligibility of the remaining household members.

1. If the household states that the member does not meet the criteria that would make the individual eligible for participation, further verification of alien status is not required.

2. If the household states that the member does meet the criteria that would make them eligible for participation but is currently without the verification, a Request for Information (RFI) can be submitted.

   Once verification to determine eligible alien status has been submitted to the United States Citizenship and Immigration Services (USCIS), Social Security Administration (SSA), or another federal agency, do not delay, deny, reduce, or terminate the individual's eligibility. Certify the individual for up to six months from the date of the RFI.

   If the verification hasn't been received and processed by 15 days prior to the six-month expiration date, the system will issue a warning notice to the alien stating their SNAP benefits will cease unless the verification is received by the expiration date. If the verification hasn't been received and processed by the six-month expiration date, the system will change the member's status to "ineligible alien" and issue a notice.

3. If the household states they do not know if the member meets the criteria and no documents are available, they are considered ineligible until proven otherwise. If the alien does not wish the Department to contact USCIS to verify immigration status, the agency must give the household the option to withdraw its application or to proceed without that member.

4. If any household member is identified as an alien on the application, determine whether the individual is an eligible alien.

Note: Concerning Form I-94, Arrival/Departure Record: On 4/30/2013, Customs and Border Protection automated the I-94 process **at air and seaports only**. Most non-alien visitors entering the country via air and seaports will no longer be issued a paper I-94. Instead, the admission information generally provided in the paper I-94 will be stamped on the traveler's foreign passport (i.e., COA, date of entry, and expiration date), with the exception of the I-94 admission number. Aliens have to visit the U.S. Customs and Border Protection Arrival/Departure Form I-94 to print their I-94 admission number. Also, if an alien is unable to provide a passport with the admission stamp, a copy of their record of admission can be printed by the alien at this website.

Beginning 9/7/2015, refugees will no longer receive the paper I-94 card at Ports of Entry (POE) and will need to obtain the I-94 record online. Customs and Border Protection will stamp the refugee's transportation boarding letter upon admission to the U.S., which is provided to the Principal Applicant of each refugee case. Beginning 9/1/2015, the transportation boarding letter will be the only document provided to the refugee with an official Customs and Border Protection refugee stamp.

Derivative asylees and parolees will continue to receive a paper I-94. Customs and Border Protection will strike out the pre-printed number and hand-write the true I-94 number on the document. Use the handwritten I-94 number when verifying alien status. When an alien presents only an I-94, workers must ask the individual if they have an Unexpired Foreign Passport. The passport, along with any documentation provided, is scanned into the Electronic Case File (ECF). It is important when scanning alien documentation that clear and clean pictures are captured. When scanning a passport, ensure the biographic page and the admission stamp page are scanned.

B. An alien must present:

1. USCIS form I-151 or I-551, Alien Registration Receipt Card. Encourage aliens who possess Form I-151 to apply for Form I-551, which is more secure and machine-readable.

2. An alien is qualified **only** if USCIS Form I-94 is annotated as follows:

    a. Unexpired temporary I-551 stamp; and meeting SNAP criteria outlined in MS 2900, 2, (a) or (b); or

    b. The following terms: refugee or parolee as "Cuban/Haitian Entrant" under Section 212(d)(5);

3. Amerasians must present the following:

    a. An I-94 with the codes AM1, AM2, or AM3; or

    b. An I-551 with the codes AM6, AM7, or AM8; or

    c. A U.S. passport, if stamped by INS with the codes AM1, AM2, or AM3.

4. Afghan/Iraqi Special Alien must present the following:

Afghan/Iraqi Special Alien	Passport with an alien visa (IV) stamp noting the individual has been admitted under IV category SI1; Department of Homeland Security (DHS) stamp or notation on passport or form I-94 showing date of entry or form I-551 (green card) SI6.
Spouse of Afghan/Iraqi Special Alien	Passport with an alien visa (IV) stamp noting the individual has been admitted under IV category SI2; DHS stamp or notation on passport or form I-94 showing date of entry or form I-551 SI7.

Unmarried dependent child of Afghan/Iraqi Special Alien	Passport with an alien visa (IV) stamp noting the individual has been admitted under IV category SI3; DHS stamp or notation on passport or form I-94 showing date of entry or form I-551 SI9.
Iraqi Special Alien under Section 1244	Passport with an alien visa (IV) stamp noting the individual has been admitted under IV category SQ1; DHS stamp or notation on passport or form I-94 showing date of entry or form I-551 SQ6.
Spouse of Iraqi Special Alien under Section 1244	Passport with an alien visa (IV) stamp noting the individual has been admitted under IV category SQ2; DHS stamp or notation on passport or form I-94 showing date of entry or form I-551 SQ7.
Unmarried Dependent child of Iraqi special Alien under Section 1244	Passport with an alien visa (IV) stamp noting the individual has been admitted under IV category SQ3; DHS stamp or notation on passport or form I-94 showing date of entry or form I-551 SQ9.

5. If not annotated as such on the aliens' I-94, Cuban and Haitian aliens must present verification from USCIS that confirms admittance under Section 501(e) of the Refugee Education Assistance Act of 1980. See MS 2900 for admittance provisions.

C. To be eligible to participate in SNAP, the individual must first be a qualified alien. An alien is ineligible to participate until acceptable documentation is provided, unless:

1. The agency has submitted a copy of a document provided by the household to USCIS for verification;

2. The agency has submitted a request to SSA for information on the number of quarters of work that can be credited to the individual, **and** SSA states the number of quarters that can be credited **is under investigation**; or

3. The individual or agency has submitted a request to a federal agency for verification of information pertaining to the individual's eligible alien status.

   Once verification to determine eligible alien status has been submitted to the USCIS, SSA, or another federal agency, do not delay, deny, reduce, or terminate the individual's eligibility. Certify the individual for up to six months from the date of the RFI. Follow the instructions in A, 2 of this manual section.

Count the income and resources of members participating in SNAP while awaiting verification of alien status.

D. If USCIS Form I-94 does not bear annotations sufficiently to verify the member's status and the alien has no other verification of alien classification, **or** if the alien is unable to provide any USCIS document, do the following:

1. The agency submits Form G-845, Document Verification Request, to USCIS.
2. Advise the alien that they may be eligible if acceptable verification is obtained.
3. Explain that the following classifications of the Immigration and Nationality Act result in eligible status:
   a. Section 207, 208, or 243(h);
   b. After April 1, 1997, Section 241(b)(3); or
   c. Cuban or Haitian refugees and Amerasian asylees.

4. The alien may contact USCIS or otherwise obtain the necessary verification, or if the alien chooses to sign a written consent, the worker may contact USCIS to obtain clarification of the alien's status. Do not contact USCIS to obtain information about the alien's correct status without the alien's written consent. Written consent is not required when using Systematic Alien Verification Entitlement (SAVE) to validate the alien's eligible status or when verifying the alien's qualifying quarters.

Once verification to determine eligible alien status has been submitted to the USCIS, SSA, or another federal agency, do not delay, deny, reduce, or terminate the individual’s eligibility. Certify the individual for up to six months from the date of the RFI. If the verification hasn’t been received and processed on or before 15 days prior to the six-month expiration date, the system will issue a warning notice to the alien stating that their SNAP benefits will cease unless the verification is received by the expiration date. If the verification hasn’t been received and processed by the six-month expiration date, the system will change the member’s status to “ineligible alien” and issue a notice.

If the alien does not wish to contact USCIS, give the household the option of withdrawing its application or participating without that member. If the household opts to participate without the ineligible alien, an eligibility notice is sent notifying the household of the exclusion, the reason for the exclusion, the eligibility and benefit level of the remaining members, and the action(s) the household must take to end the member's exclusion.

When the applicant or any other household member indicates an inability or unwillingness to provide verification of alien status for any member, classify that member as an ineligible alien. Do not continue efforts to obtain the verification. Document the case record.

E. If the proper USCIS verification is not available, the alien may state the reason and submit other conclusive evidence as verification. Other forms of acceptable verification include:

1. Corroboration from USCIS that the alien is classified pursuant to Section 207 or 208 of the Immigration and Nationality Act or is a Cuban or Haitian refugee or Amerasian asylee; or

2. Evidence, such as a court order, stating that deportation has been withheld pursuant to Section 243(h), or after April 1, 1997, Section 241(b)(3) of the Immigration and Nationality Act.

F. If verification of eligible alien status is later received, act on the information as a reported change in household membership. If it is later determined the alien is verified as ineligible, a claim exists for the months the individual received benefits while the department was waiting on verification.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2915 – R. 6/30/26 – OMTL – 684
Verification – Systematic Alien Verification for Entitlement (SAVE)

[The Immigration Reform and Control Act of 1986 requires the verification of the immigration status of aliens applying for benefits. SAVE is the United States Citizenship and Immigration Services (USCIS) operating system of verification for this purpose. Use SAVE to reverify the initial documentation of immigration status received from the alien. Any applicant who is not a U.S. citizen is required to carry immigration documentation that contains an Alien Registration Number (A-Number) or an I-94 Admission Number. Use these numbers to access SAVE.

Do not complete a SAVE inquiry on victims of human trafficking. However, do complete a SAVE inquiry on eligible family members of trafficking victims.

The SAVE process must be completed within 30 calendar days of initial application. Complete the SAVE process only once for aliens who have permanent resident status. For all other aliens, repeat the SAVE process at every recertification or until the alien is granted permanent resident status.

Use the following procedure when an alien member applies for SNAP:

A. Obtain initial USCIS documentation of immigration status from the applicant/recipient for any alien who is to be included on the case. If the alien member states they meet the eligibility criteria but they do not have verification, a Request for Information (RFI) can be submitted.

   Once verification to determine eligible immigration status has been submitted to the USCIS, the Social Security Administration (SSA), or another federal agency, do not delay, deny, reduce, or terminate the individual's eligibility. Certify the individual for up to six months from the date of the RFI.

   If the verification hasn't been received and processed by 15 days prior to the six-month expiration date, the system will issue a warning notice to the alien stating their SNAP benefits will cease unless the verification is received by the expiration date. If the verification hasn't been received and processed by the six-month expiration date, the system will enter a disqualification for the ineligible alien and issue a notice.

   If the alien does not wish the Department to contact the USCIS to verify immigration status, the agency must give the household the option of withdrawing its application or participating without that member.

B. At the time the documentation is received, initiate the request for verification by SAVE. Send a memorandum with the following information to the Regional Office:

   1. Case name and number;
   2. For each alien member: name, the corresponding alien number, birthdate, the type of documentation provided, and if available, the social security number and the I-94 admission number; and
   3. Worker name, code, and phone number.

Do not delay processing the case while awaiting the receipt of the SAVE information.

C. Within three business days from receipt of the request, the Regional contact person accesses the web-based program to obtain SAVE information and:

1. In response, the Verification Information System (VIS) assigns a verification number, which is used as a reference number if further verification from USCIS is needed.

2. VIS also provides the name, alien number, birthdate, and Social Security Number (SSN), if available, which is retained by the VIS database.

3. The Regional Office compares the information provided in the original memorandum to the information provided by VIS and decides whether further verification by Form G-845, Document Verification Request, is necessary.

4. The Regional Office annotates the original memorandum with the SAVE information and its decision and returns the memorandum to the local office.

D. When the SAVE information is received from the Regional Office:

1. If SAVE verifies immigration status, document the SAVE response in comments and scan it into the Electronic Case File (ECF).

2. If SAVE does not verify immigration status and requests additional verification:

   a. The Regional Office completes Form G-845, Document Verification Request. The form, along with a scanned copy of the alien's document with or without additional information for verification, is submitted electronically to USCIS.

      Do not deny or discontinue the case based on immigration status until a response is received.

   b. If the USCIS response on Form G-845 indicates the immigration status document is valid, document the response in comments and scan it into ECF.

   c. If the USCIS response on Form G-845 indicates the immigration status document is not valid, deny or discontinue SNAP for the unverified alien.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2920 – R. 6/30/26 – OMTL – 684
Ineligible Alien/Member Resources and Income

A. **[**All resources of an ineligible alien household member are counted as available to the remaining household members.

B. A pro rata share of the income of the ineligible alien member is counted as income to the remaining members. When manually calculating the pro rata share to ensure the benefit amount is correct, do the following:

   1. Subtract allowable exclusions from the ineligible alien's income;

   2. Divide the countable income evenly among the household members, including the ineligible alien and any other excluded members; and

   3. Count all but the excluded member's share as income to the remaining household members.

C. When considering the income and resources of the ineligible alien, the "ineligible alien" status takes precedence over all other excluded member statuses. For example, an individual who is ineligible due to immigration status and student status is an ineligible alien first, and an ineligible student second.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2930 – R. 6/30/26 – OMTL – 684
Ineligible Alien – Deductions

A. **[**Apply the earned income deduction to the pro rata share of the ineligible alien's countable earned income.

B. Divide the household's allowable shelter and dependent care expenses equally among the members, including the ineligible alien and any other excluded members. Count all but the prorated share of the excluded member as a deductible expense to the remaining household members.

C. Do not include the ineligible alien as a member of the household when determining the household size for the following:

1. Assigning a benefit level;
2. Comparing the household's gross monthly income with the income eligibility standards; or
3. Comparing the household's resources with the resource eligibility limit.

Additionally, the household is **not** entitled to a medical deduction if the only elderly or disabled individual is an ineligible alien.

Example: A household of four, including the ineligible alien, incurs $100 in shelter expenses per month. Divide the amount by the number of household members to determine each member's pro rata amount: $100 ÷ 4 = $25. Subtract the ineligible alien's pro rata amount from the total to determine the countable deduction: $100 – $25 = $75 allowable deduction. When determining the benefit level, gross monthly income limit, and resource eligibility limit, this household is a size of three.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 2940 – R. 6/30/26 – OMTL – 684
Determining Ineligible Immigration Status

[When a household does not provide verification of immigration status for a household member, consider that member an ineligible alien. **Do not** continue efforts to obtain verification of immigration status.

Determine that an alien is undocumented when:

A. There is an admission by the applicant, another household member, or the household's representative that an undocumented alien is a member of the household;

B. United States Citizenship and Immigration Services (USCIS) documents presented by the household during the application process are determined to be forged; or

C. A formal order of deportation is presented by the household during the application/recertification process.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3000 – R. 6/30/26 – OMTL – 684
Sponsored Aliens - General

[With the passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), most aliens are barred from receiving SNAP until they become United States (U.S.) citizens. This restriction applies to most newly arriving aliens and to any alien who was already admitted but whose eligibility for SNAP was not preserved under the Balanced Budget Act of 1997. Exceptions are listed in MS 2900. In addition to meeting general SNAP requirements, sponsored aliens must meet additional income and resource requirements.

A. Sponsored aliens who enter the U.S. on or after 12/19/1997 must complete and sign, before a notary public, a sponsorship agreement; Immigration and Naturalization Service (INS) form I-864, Affidavit of Support under Section 213A of the Act.

   Forms I-864 and I-864A show that an alien has adequate means of financial support and is not likely to become a public charge. Signing the form constitutes a legally binding contract between the sponsor and the U.S. Government in which the sponsor agrees to support the alien and any spouse and/or children immigrating with the individual. The deeming requirements apply only to aliens whose sponsor has signed a legally binding affidavit of support (known as 213A affidavits – Form I-864 or I-864A) on or after December 19, 1997. Prior to this time, affidavits of support were not legally binding, meaning the sponsor could not be legally compelled to support the alien. The sponsor's obligation continues until the sponsored alien becomes a U.S. citizen, can be credited with 40 qualifying quarters of work, departs the U.S. permanently, or dies. Divorce does not terminate the obligation. The death of the sponsor does terminate the support agreement but does not relieve the sponsor's estate of reimbursement obligations.

B. The affidavit of support is required for the sponsored aliens listed below and is completed by the individual as listed:

   1. All immediate relatives, including orphans and family-based aliens. The family member petitioning for the alien completes the form; and

   2. Employment-based aliens where a relative filed the alien visa petition or has a significant ownership interest (five percent or more) in the entity that filed the petition. The petitioning relative or a relative with a significant ownership interest in the petitioning entity completes the form.

C. The sponsor must:

   1. Be a citizen or national of the U.S. or an alien lawfully admitted for permanent residence;

   2. Be at least 18 years of age;

3. Be domiciled in the U.S., its territories or possessions; and

4. Demonstrate the ability to support the sponsored alien. The sponsor's household income must meet or exceed 125 percent of the Federal poverty limits. Internal Revenue Service (IRS) tax forms are used by the U.S. Citizenship and Immigration Services (USCIS) to verify household income.

   Sponsors on active duty in the U.S. armed forces need only demonstrate income at 100 percent of the Federal poverty limits, IF they are submitting Form I-864 on behalf of their spouse or child. Joint sponsorship is possible, if necessary, to meet the financial requirements. Separate sponsorship agreements are required, and the joint sponsors become equally liable for any overpayment of means-tested benefits.

D. Sponsors must report any change of address to USCIS within 30 days by completing Form I-865/Sponsor's Notice of Change of Address. Failure to do so results in severe penalties.

E. Use of form I-134, Affidavit of Support, or form I-361, Affidavit of Financial Support and Intent to Petition for Legal Custody, is not ruled out, as these forms were used prior to the passage of the Balanced Budget Act of 1997. Aliens currently in the U.S. who previously completed sponsor agreements are **not** subject to the new affidavit requirements.

F. The following individuals were previously exempted from sponsored alien provisions, based on prior legislation. If the prior affidavit of support is still in effect, these members remain exempt from deeming provisions if otherwise eligible.

1. An alien who was participating in SNAP as a member of their sponsor's household or an alien whose sponsor is participating in SNAP, separate and apart from the alien; or

2. An alien who was sponsored by an organization or group rather than an individual; or

3. An alien who was not required to have a sponsor under the unrevised Immigration and Nationality Act, such as, but not limited to, a refugee, a parolee, an asylee, a Cuban or Haitian entrant, or a noncitizen under age 18.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3010 – R. 6/1/26 – OMTL – 684
Household Responsibilities

A. **[**Sponsored aliens entering the United States (U.S.) on or after 12/19/97 and completing the new affidavit of support are responsible for:

1. Providing form I-864 and I-864A as appropriate, to verify the income and resources of the sponsor and the sponsor's spouse. The sponsor's total income and resources, as well as their spouse's, are deemed available to the sponsored alien;

2. Obtaining the cooperation necessary to process the application from the sponsor's household;

3. Reporting all changes concerning the sponsor's household that affect the sponsorship of the member, such as income changes; and

4. Reporting a change in sponsor or termination of the sponsorship agreement.

B. Sponsored aliens completing affidavits of support prior to 12/19/97 are responsible for:

1. Providing any information or documentation necessary to determine the deemed income and resources of the alien's sponsor and their sponsor's spouse for three years from the alien's date of entry or date of admission as a lawful permanent resident;

2. Providing the names or identifying information of other aliens sponsored by their sponsor, if more than one; if this information is not provided, use the total countable deemed income and resources in determining eligibility and amount of benefits;

3. Obtaining any necessary cooperation from the sponsor;

4. Reporting all changed information about the sponsor and their spouse, such as changes in income or the death of the sponsor or their spouse; and

5. Reporting a new sponsor.

C. If the sponsorship agreement was signed prior to February 1, 1983, portions of the gross income and resources of the alien's sponsor and their spouse are deemed available to the sponsored alien. Even though the marriage to the sponsor may have taken place after the sponsorship agreement was signed, consider the spouse's income and resources if they are living with the sponsor.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3050 – R. 6/30/26 – OMTL – 684
Kentucky Transitional Assistance Program (KTAP) Sponsored Alien Information

[If gross income information is reported for a KTAP-sponsored alien household, it will also be considered in the SNAP eligibility determination. Limit income deductions for SNAP deeming purposes to the earned income deduction and the SNAP gross monthly eligibility standards. If the household is categorically eligible, the gross monthly eligibility standards do not apply. See MS 3175.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3060 – R. 6/1/26 – OMTL – 684
Deeming Sponsor's Income

[Deeming policy applies to all sponsored aliens, except sponsored alien children under age 18. Deeming policy does not apply to indigent or battered aliens, as they do not actually receive the deemed income. An indigent alien is an alien the agency has determined as being unable to obtain food and shelter, taking into account the alien's own income plus any cash, food, housing or other assistance provided by other individuals, including the sponsor(s); this means the sum of the eligible-sponsored alien's household's own income, the cash contributions of the sponsor and others and the value of any in-kind assistance the sponsor and others provide do not exceed 200 percent of the poverty level guidelines for the household's size. Deeming continues until the alien gains citizenship or attains 40 qualifying quarters of coverage or the sponsor dies.

A. Sponsored aliens who complete the affidavit of support on or after 12/19/1997 must have both their sponsor's and their sponsor's spouse's income deemed as available to the alien. The sponsor's spouse must be living with the sponsor for their income to be considered available to the alien.

   1. The total income of the sponsor and the sponsor’s spouse is considered available to the sponsored alien.

   2. If the sponsored alien verifies that his sponsor is the sponsor of other aliens, the total income of the sponsor and the sponsor’s spouse is divided by the number of sponsored aliens before income is deemed to the sponsored alien applicant. If one of the sponsored aliens is a child, determine the amount of deemed income for each alien and then exclude the child’s portion before considering the income available to the sponsored alien applicant.

   3. If a change in sponsorship occurs during the recertification period, verify and recalculate the deemed income.

B. For sponsored aliens completing the United States Citizenship and Immigration Services (USCIS) affidavit of support prior to 12/19/97, consider both the sponsor's and the spouse's income as available to the alien. Both are deemed available to the sponsored alien for three years following the alien's admission as a permanent resident.

   1. For these individuals, use the following procedures to determine the amount of income deemed available:

      a. Add the monthly gross earned income, less exclusions, of the sponsor and spouse.

      b. Subtract the earned income deduction from the earned income of the sponsor and the sponsor’s spouse.

      c. Add the monthly gross unearned income, less exclusions, of the sponsor and the sponsor’s spouse.

      d. Subtract the SNAP gross monthly income eligibility limit for a household equal in size to the sponsor, their spouse, and anyone claimed or who could be claimed as dependents by them for Federal income tax purposes. The resulting figure is the amount deemed available to the alien.

e. Consider either the actual income provided to the sponsored alien's household or the deemed amount, whichever is greater, as unearned income to the sponsored alien's household.

2. Deem the total resources of the sponsor and the sponsor's spouse, minus $1500, to the alien.

3. If an alien can demonstrate that their sponsor sponsors other aliens, the income and resources of the sponsor and sponsor's spouse, which are deemed available, are divided by the number of such aliens that apply for or are participating in SNAP.

4. If an alien changes sponsors during the certification period, recalculate the deemed income and resources based on the new sponsor's situation after the reported change is verified.

5. If an ineligible alien is the sponsor of their alien spouse, with whom they live, and their spouse is eligible to receive SNAP, prorate the sponsor's income per MS 5220.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3070 – R. 6/30/26 – OMTL – 684
Verification of Sponsored Alien Information

[Obtain and verify the following information for sponsored aliens at initial application and at recertification:

A. The name, address, and phone number of the alien's sponsor;

B. The income and resources of the alien's sponsor and the sponsor's spouse;

C. The name and other identifying information of other aliens for whom the sponsor has signed an affidavit of support;

D. The provision of the Immigration and Nationality Act under which the alien was admitted;

E. The date of the alien's entry or admission as a lawful permanent resident as established by United States Citizenship and Immigration Services (USCIS);

F. The alien's date of birth, place of birth, and alien registration number;

G. The number of household members and/or dependents who are claimed by the sponsor and their spouse on federal income tax forms; and

H. Any questionable information.

An alien is ineligible to participate until acceptable documentation is provided unless:

A. The agency has submitted a copy of a document provided by the household to USCIS for verification. While awaiting the findings on this verification, the agency cannot delay, deny, reduce, or terminate the individual’s eligibility for benefits based on the individual’s immigration status;

B. The agency has submitted a request to the Social Security Administration (SSA) for information on the number of quarters of work that can be credited to the individual, and SSA states that the number of quarters that can be credited is under investigation. Pending the results of the SSA investigation, the individual must be certified for up to six months from the date of the original determination of insufficient quarters; or

C. The individual or agency has submitted a request to a federal agency for verification of information that pertains to the individual’s eligible alien status. Certify the individual for up to six months from the date of the submittal of the original request for verification.

Count the income and resources of members participating in SNAP while awaiting verification of alien status. If verification is not obtained, the alien is ineligible, with his prorated share of income and total resources considered available to the household. Deemed income from the sponsor is not considered if the alien is ineligible. If the sponsor is responsible for verification for the entire household, the household is ineligible until it is provided. When the required information or verification is received, it is treated as a reported change in household composition according to timeliness standards.]

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3100 – R. 6/30/26 – OMTL – 371
SNAP Applications by the Social Security Administration (SSA)

[Households consisting entirely of Supplemental Security Income (SSI) applicants or recipients that do not have an active SNAP case or pending application may apply and be certified or recertified for SNAP benefits through the Social Security Administration (SSA). Eligibility and benefit levels are based solely on SNAP eligibility criteria for categorically eligible (CE) households. An eligibility determination is based on information provided by SSA or, if necessary, by the household. The application form SF-1, SAFE Application, is forwarded from SSA to the Department for Community Bases Services (DCBS) the same day and must be processed within 30 calendar days of the date the SSA office receives the application.

SSA is also authorized to accept SNAP applications for individuals residing in public institutions who also apply for SSI benefits. Procedures for processing these applications are contained in MS 3155.

Households consisting entirely of SSI recipients are Categorically Eligible (CE), unless the entire household resides in an institution or is disqualified from receiving SNAP for reasons other than non-compliance with SSI.
Non-SSI households are referred to DCBS by SSA.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3110 – R. 6/30/26 – OMTL – 368
Expedited Services for SNAP Applications completed through the Social Security Administration (SSA)

[Handle expedited services applications made by Supplemental Security Income (SSI) households who apply through SSA as follows:

A. The SSA office has the following responsibilities:

1. Prescreen all applications for expedited services on the day the application is received at the SSA office.

2. Mark "Expedited Processing" on the first page of the application if eligible for expedited services.

3. Inform households that appear to meet expedited criteria that they may be issued a few days sooner if the household applies directly at their local Department for Community Based Services (DCBS) office.

4. Inform the household that it may take a referral form and the application from SSA to the appropriate DCBS office for screening, interviewing, and processing of the application.

5. Forward the application to the local DCBS office the same day.

6. Verify information to the extent possible and indicate verification received on the transmittal memorandum. The DCBS worker requests any additional verification necessary.

B. The local office has the following responsibilities:

1. Prescreen all applications received from SSA for possible expedited services on the day the application is received at the DCBS office.

2. Make the final determination of eligibility for expedited services. All SSI households entitled to expedited services are certified per normal procedures, except that the expedited processing time standard begins on the date the application is received at the DCBS office rather than the SSA office.

3. Provide benefits to expedited households retroactive to the day the application was received by the SSA office.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3120 – R. 6/30/26 – OMTL – 642
Eligibility Determination for SNAP Applications from the Social Security Administration (SSA)

[Certify Supplemental Security Income (SSI) household applications accepted by the Social Security Administration (SSA) like any other application, with the following exceptions:

A. Households are not subject to another interview or required to see a SNAP worker.

B. No further contacts are made with the households unless:

   1. The application is improperly completed or not signed;

   2. Mandatory verification is missing (assume identification (ID) has been verified, as the applicant must present ID when applying for SSI); or

   3. Information on the application is questionable.

   If an unsigned form SF-1, Application for Simplified Assistance for the Elderly (SAFE), is received at the local office, do not enter the application into the system. Mail the unsigned SF-1 with forms PAFS-2, Application Letter/Notice of Expiration, FS-360, Information About the SNAP program, and a request to designate an authorized representative to the household. Retain a copy of the unsigned SNS-101 in the Electronic Case File (ECF).

C. Use a telephone interview, letter, or home visit with the applicant to update form SNS-101 when necessary, using the hardcopy application FS-1 Application for SNAP to identify missing information. Attach the unsigned FS-1 to form SF-1.

D. SSA verifies information to the extent possible and indicates verification received on the transmittal form. The SNAP worker requests any additional needed verification.

E. Recertify SSI households as other households with the following exceptions:

   1. SSI households are entitled to make timely applications for recertification at the SSA office if:

      a. They do not have a pending SNAP application; and

      b. They have received an appointment letter from the Department for Community Based Services (DCBS) informing them of their need to reapply.

   2. An application for recertification is considered filed when received by the SSA office.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3150 – R. 6/30/26 – OMTL – 368
Recertifications by the Social Security Administration (SSA)

[Supplemental Security Income (SSI) households are recertified the same way as other households, with the following exceptions:

A. SSI households are entitled to complete timely applications for recertification through the SSA if:

   1. They do not have a pending SNAP application; and

   2. They have received an appointment letter from the Department for Community Based Services (DCBS) informing them of their need to reapply.

B. An application for recertification is considered filed when received by the SSA office.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3160 - R. 6/30/26 – OMTL – 630
Categorical Eligibility

A. **[**Households that receive one of the following benefits are Categorically Eligible (CE) for SNAP unless the household meets the description of a non-categorically eligible household in B:

1. All household members receive Temporary Assistance for Needy Families (TANF) cash benefits or in-kind TANF benefits. If all members are authorized to receive or currently receive Kentucky Transitional Assistance Program (KTAP), Kinship Care, Work Incentive Reimbursement (WIN), or Family Assistance Short Term (FAST), the household is categorically eligible.

2. All household members are Supplemental Security Income (SSI) recipients. If income or resources for an SSI recipient are discovered and have not been reported to the Social Security Administration (SSA), contact SSA and provide them with all appropriate information. These members remain categorically eligible for SNAP as long as they continue to receive SSI.

3. Households that receive the TANF-funded information sheet that is generated at application, which makes them aware of other programs in which they may qualify, are considered Expanded Categorically Eligible (ECE) unless the household income is over the following income limits. Eligibility is limited to:

   a. Non-elderly/non-disabled households with gross income of 130 percent of the Federal Poverty Level (FPL) or less.

   b. Households in which **all** members are elderly/disabled with gross income of 200 percent or less than the FPL.

   ECE households must be under the **net** income for their household size.

B. The following households are not CE or ECE for SNAP:

1. Households where all members reside in an institution.

2. Households with a member who is disqualified for certain reasons from SNAP. If the household contains any member(s) who has an active Intentional Program Violation (IPV) disqualification, a disqualification for not cooperating with the conditions of probation or parole, or a work disqualification on the head of household, the household cannot be CE or ECE.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3175 – R. 6/30/26 – OMTL – 671
Verification at Application

A. **[**Categorically eligible (CE) households have certain eligibility factors that are considered met for SNAP.

   These eligibility factors are:

   1. Resources, except for some lottery or gambling winnings. See MS 5000 for more details;

   2. Social Security Number (SSN) information;

   3. Residency; and

   4. Sponsored alien information.

   The gross and net income limits do not apply to CE households, but income must be verified. All other eligibility factors apply.

B. Expanded categorically eligible (ECE) households meet all eligibility factors listed above except for SSN information. ECE households may not have income in excess of the 200 percent Federal Poverty Level (FPL) income limit and must be under the net income eligibility standard for their household size. All other eligibility factors must be met.

C. During an interview, if an individual states they have resources, the worker must enter the amounts on the system as reported by the individual. Reported resources must be entered into the system as they could become countable resources in the event the member loses their categorical eligibility. Client statement is accepted as verification of resources.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3200 – R. 6/30/26 – OMTL – 680
Simplified Assistance for the Elderly (SAFE) – Overview

[Kentucky's SAFE program provides a standard amount of SNAP to Supplemental Security Income (SSI) eligible households consisting of one or two members (spouses) who are age 60 or older. SAFE is a simplified version of the regular SNAP program.

A. SAFE eligibility is determined from a daily match with the Social Security Administration (SSA) on the State Data Exchange (SDX) file. Individuals meeting eligibility requirements will have a computer-generated form, SF-1, SAFE Application, sent to them in the mail.

B. SAFE applications are identified as either "SAFE" or "SF" on the system and are entered like all other food benefits applications.

C. No changes are required to be reported from SAFE recipients.

D. No face-to-face interview is required for SAFE cases; however, staff may contact applicants by phone if there is a reason to doubt the information provided or if further information is required to complete the application.

E. SAFE cases are certified for three years.

F. All SAFE case activity, i.e., approvals, denials, discontinuances, recertifications, reported case changes, claims identification and establishment, is processed by staff in the Division of Family Support, Nutrition Assistance Branch (NAB).

G. SAFE-eligible recipients can opt out of SAFE to apply for regular SNAP and opt out of SNAP to apply for SAFE. An individual cannot receive from both programs at the same time.

H. SAFE cases follow regular SNAP policy for fair hearings and claims identification, and establishment.

I. Any staff with system access can inquire SAFE cases.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3210 – R. 6/30/26 – OMTL – 680
Simplified Assistance for the Elderly (SAFE) Eligibility

A. **[**Individuals must meet the following criteria to be eligible for SAFE:

1. A resident of Kentucky;
2. Determined eligible to receive Supplemental Security Income (SSI);
3. Age 60 or older;
4. Not living in an institution;
5. Purchasing and preparing food separately from other people living in the home; and
6. Be either:
    a. Single, widowed, divorced, or separated (for one-person households); or
    b. Married to an SSI spouse who meets criteria in 1 through 5 above (for two-person households).

B. Regular SNAP eligibility factors do not apply to SAFE cases.

C. Income and deductions are not considered when determining the SAFE allotment. Only shelter costs (rent or mortgage only) and household size are used to determine the allotment amount.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3220 – R. 6/30/26 – OMTL – 680
Simplified Assistance for the Elderly (SAFE) Allotments

A. **[**SAFE allotments for a one-person household are:

1. $64 if the monthly shelter expense is $50 or less per month; or

2. $104 if the monthly shelter expense is $51-$399 per month; or

3. $185 if the monthly shelter expense is $400 or greater per month.

B. SAFE allotments for a two-person married Social Security Insurance (SSI) household (Each spouse gets SSI and is at least age 60) are:

1. $175 if the monthly shelter expense is $50 or less per month; or

2. $180 if the monthly shelter expense is $51-$399 per month; or

3. $239 if the monthly shelter expense is $400 or greater per month.

C. Advise households that it may be to their benefit to apply for regular SNAP if:

1. A one-person household has shelter expenses that exceed $400 per month;

2. A one or two-person household has medical expenses greater than $35 per month.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3230 – R. 6/30/26 – OMTL – 680
Simplified Assistance for the Elderly (SAFE) Application Procedures

A. **[**A nightly match with the Social Security Administration (SSA) is completed by Worker Portal, via the Kentucky State Data Exchange (SDX), to identify Supplemental Security Insurance (SSI) recipients who are potentially eligible for the SAFE program. These individuals have a system-generated form, SF-1, SAFE Application, mailed to them. A return envelope is mailed with every application.

B. If the initial application is not received and entered on Worker Portal within 30 days from the date it is sent, the individual will automatically receive a second application. If the individual does not return the second application, no additional applications will be automatically sent.

C. Applicants return completed applications to the Division of Family Support, Nutrition Assistance Branch (NAB). Applications must be processed within 30 days from the date the application is received in NAB as follows:

   1. The date of application is considered the date the application is received in NAB.

   2. Expedited services do not apply to SAFE applications.

   3. SAFE benefits are not prorated.

   4. SAFE applicants are not required to be interviewed. Information from SDX and form SF-1 is used to process the application.

   5. Income Eligibility Verification System (IEVS) matches or any other computer matches are not completed on SAFE applicants.

D. Eligible households automatically receive an Electronic Benefit Transaction (EBT) card with instructions on how to select a Personal Identification Number (PIN) once the SAFE application is approved. Households will not receive a new EBT card if the individual already has a card. All food benefits remaining on the EBT account from the regular SNAP will be accessible via the new EBT card issued or the EBT card already in the individual's possession when the SAFE case is approved.

E. SAFE cases are certified for 36 months.

F. If the SAFE application is received in the local office, the local office must forward the SAFE application to:

Division of Family Support
Nutrition Assistance Branch
275 East Main Street 3-EI
Frankfort, KY 40621.

G. Evaluate individuals applying for the regular SNAP for SAFE. If the individual meets the criteria and wishes to apply for SAFE, have them call 1-866-256-3823 to request a SAFE application. Take their application for the regular SNAP even when it appears that they MAY be eligible for SAFE. **Do not** refuse to let them apply for regular SNAP if they do express intent to apply.

H. Any questions regarding SAFE should be submitted to the SAFE Inbox.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3250 – R. 6/30/26 – OMTL – 680
Verification Requirements

[Simplified Assistance for the Elderly (SAFE) applicants are not required to provide any verification. Information received from the State Data Exchange (SDX) match is used to verify eligibility. The individual’s statements indicated on form SF-1, SAFE application, are used as verification of shelter expenses and separate household status. Further verification can be requested if there is a reason to doubt the information provided by the applicant.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3260 – R. 6/30/26 – OMTL – 680
Change Report Requirements for Simplified Assistance for the Elderly (SAFE)

[A SAFE household is not required to report changes as the State Data Exchange (SDX) update process meets reporting requirements. However, individuals may voluntarily report changes by calling toll-free 1-866-256-3823. The following changes, if voluntarily reported, are acted on by staff in the Division of Family Support, Nutrition Assistance Branch (NAB):

A. Date of birth;

B. Name;

C. Address; and

D. Shelter expenses.

All other changes, such as marital status and Supplemental Security Income (SSI) eligibility, must first be reported to the Social Security Administration (SSA). Once SSA makes the change to SDX, the system takes appropriate action during the monthly match with SDX.

See MS 6475 for acting on address changes and instructions.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SAFE)
MS 3275 – R. 6/30/26 – OMTL – 680
Monthly SDX Match for Simplified Assistance for the Elderly (SAFE)

[Once approved for SAFE, all recipients are matched monthly to determine ongoing eligibility. Worker Portal automatically updates any changes that have occurred.

If an individual adds a spouse, but the spouse is not eligible to receive Supplemental Security Income (SSI) or is not age 60 or over, Worker Portal automatically discontinues the SAFE case.

If either household member is determined to be no longer eligible for SSI, Worker Portal automatically discontinues the SAFE case**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3280 – R. 6/30/26 – OMTL – 680
Simplified Assistance for the Elderly (SAFE) Recertification Processing

[All SAFE cases are certified for 36 months. Form SF-2, SAFE recertification, is generated one month prior to the end of the certification period and mailed to the recipient. Recertifications coming due are displayed on the SAFE workers' dashboard daily as they are received by mail.

If a recertification is not entered on the system by the 10th day of the certification end month, Worker Portal generates a second SF-2. If the recertification is not entered on the system by the end of the certification period, the SAFE case is discontinued for failure to return the SF-2 SAFE recertification form.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3285 – R. 6/30/26 – OMTL – 680
Simplified Assistance for the Elderly (SAFE) Denial And Discontinuance Reasons

A. **[**SAFE applications and recertifications are denied for the following reasons:

1. Not SAFE Eligible;
2. Incomplete SAFE application or recertification; or
3. Already received benefits for the month of application.

B. SAFE applications can be manually denied, and recertifications can be manually discontinued for the following reasons:

1. Individual Request;
2. Not SAFE Eligible;
3. Incomplete SAFE application or recertification; or
4. Individual opted out of SAFE for Regular SNAP benefits.

C. SAFE cases are discontinued through case change for the following reasons:

1. Individual Request;
2. Individual opted out of SAFE for Regular SNAP;
3. Individual Deceased;
4. Individual No Longer Receiving SSI;
5. Individual Institutionalized;
6. Individual Moved Out-of-State;
7. Individual Failed to Provide Sufficient Information; or
8. Not SAFE eligible.

D. If a regular SNAP case is discontinued because someone is applying for SAFE, the reason is “opted out of regular SNAP for SAFE”.**]**

MS 3300 ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP) – OVERVIEW (1)

The Elderly Simplified Application Project (ESAP) provides simplified assistance for households in which all adult members are 60 years of age or older and/or disabled, with no earned income. ESAP is a simplified version of the regular Supplemental Nutrition Assistance Program (SNAP).

ESAP eligibility is determined during SNAP application pre-screening, SNAP recertification, and during case changes. Households do not have to request ESAP to receive it.

ESAP applications are identified as ESAP on the system and are entered like all other SNAP applications.

ESAP households will follow simplified reporting requirements however, periodic reporting requirements are waived for ESAP.

No face-to-face interview is required for ESAP cases.

ESAP cases are certified for 36 months with annual reminder notices.

All ESAP case activity, i.e., approvals, denials, discontinuances, recertifications, reported case changes, claims identification and establishment, is processed by S .

Any staff with system access can inquire ESAP cases.

ESAP cases follow regular food benefits policy for fair hearings and claims identification and establishment.

Child only households are not eligible for ESAP.

ESAP interviews are required only at initial certification and prior to closing or denying an ESAP recertification. The agency may not deny an ESAP recertification without first attempting to schedule an interview.

ESNAP allotments are the same as regular SNAP.

MS 3320 ESAP APPLICATION PROCEDURES (1)

Elderly Simplified Assistance Project (ESAP) households will apply by utilizing the same procedures as regular Supplemental Nutrition Assistance Program (SNAP) households. Applications can be taken by phone, in-person, by submitting an FS-1 Application for SNAP or through the Self-Service Portal. When determining eligibility, staff should review the application to ensure that all adult household members are elderly or disabled and that there is no earned income for any household member. Individuals may not request ESAP, eligibility is determined during the interview process for applications, recertifications or case changes.

> **Example:** An individual calls to apply for SNAP, the worker asks during pre-screening, "Are all adult members of your household elderly or disabled?". If the individual answers Yes, the 2nd question will populate for the worker to ask, "Do any members of your household receive earned income?" If the individual answers No to the 2nd question, the household is potentially eligible for ESAP with an extended certification period. If the individual answers Yes to the 2nd question, the household will not be eligible for ESAP, and the application will continue as regular SNAP or expedited SNAP, if applicable.

MS 3330 ESAP VERIFICATION REQUIREMENTS (1)

The agency will use data matches as verification for Elderly Simplified Assistance Project (ESAP) households to the greatest extent possible to verify gross nonexempt income, social security numbers, identity, residency, and disability. Verification is required from the household for non-citizen status, household size, shelter expenses, medical expenses exceeding $35 a month, and any unclear or questionable information, for which more verification is needed.

Elderly Simplified Application Project (ESAP) households are subject to simplified reporting requirements and are required to report changes that may disqualify them from ESAP eligibility, including:

1. A change in household composition.

    a. **Example 1:** An ESAP household reports that an individual who is not elderly or disabled moved into the home during the 30th month of certification. The new member purchases and prepares meals with the household. The case will revert to SNAP for the next month but will retain the 36-month. certification period. An interview will be required at the end of the certification period.

    b. **Example 2:** An ESAP household contains an elderly couple with a 17-year-old child that is not disabled and will turn 18 during the cert period. The system will revert the case to SNAP for the next month but will retain the 36-month. certification period. An interview is required at the end of the certification period.

2. Receipt of earned income.

3. When household income exceeds 130% Federal Poverty Level (FPL).

    a. Example: The ESAP household receives an increase in unearned income and the total gross income exceeds the 130% FPL. The ESAP household must report this change as it will disqualify them from ESAP. If the household has exceeded the income limits for ESAP, Worker Portal will determine if they are eligible for regular SNAP benefits. If the household is ineligible for ongoing benefits, an interview is required.

MS 3350 MONTHLY SYSTEM MATCH FOR ESAP (1)

Once approved for Elderly Simplified Application Project (ESAP), all recipients are matched monthly to determine ongoing eligibility. The system automatically updates any changes that occur. Worker intervention is not required unless the automatic update causes the case to discontinue ESAP eligibility. In the event of ESAP discontinuance, a notice is issued, and an interview is required.

[All Elderly Simplified Application Project (ESAP) cases are certified for 36 months. ESAP households must complete and return the ESAP-2 renewal form by the 15th day of the 36th month of certification to avoid any interruption in benefits.

A. The recertification interview is waived for ESAP households unless:

1. The renewal form is not provided timely, or verifications are not complete;
2. The household will be denied ongoing eligibility;
3. Verification provided by the household or authorized representative is questionable, incomplete, or contradictory; or
4. The ESAP household requests an interview.

B. Upon receipt of the ESAP-2 renewal form, the agency **must** re-verify the following:

1. Non-citizen status;
2. Household size;
3. Shelter;
4. Medical Expenses exceeding $35 per month; and
5. Any unclear or questionable information.

Act upon form ESAP-2 no later than 30 days from receipt of the form. The recipient must be able to access the benefits no later than the 30th day from receipt of the renewal. If the renewal is initiated on or after the 16th, it will be considered untimely and the household loses its right to uninterrupted benefits and maintenance of its normal issuance cycle.**]**

The case may be renewed for another 36 months upon completion of the recertification process.

If staff become aware that a regular Supplemental Nutrition Assistance Program (SNAP) household is eligible for ESAP during an application or recertification interview, including households that were former ESAP participants removed from the demonstration due to changes in circumstances, Worker Portal will add these households to the demonstration and staff will inform the households of their new status, reporting procedures, and responsibilities.

Additionally, the agency will mail a reminder notice of reporting requirements to ESAP households at the 12-month and 24-month mark reminding households of their reporting requirements and how to report changes.

MS 3370 ESAP DENIAL AND DISCONTINUANCE REASONS (1)

If during their certification period an Elderly Simplified Assistance Project (ESAP) household becomes ineligible for ESAP but remains eligible for the Supplemental Nutrition Assistance Program (SNAP), Worker Portal will remove the household from the ESAP Type of Assistance (TOA) and convert the household to a regular SNAP household in accordance with the simplified reporting regulations. However, the system will maintain the ESAP certification period. Once converted to SNAP, the household will no longer be covered by any ESAP rules except for the 36-month certification period.

Households must be notified of the changes in their status and responsibilities at the time they are removed from the ESAP TOA and converted to regular SNAP. At the end of the 36-month certification period, Worker Portal will assign eligible households who complete normal SNAP recertification requirements the appropriate certification period according to regular SNAP policy.

Use the following procedures when calculating certification changes or mid-review requirements when program eligibility changes:

A. **Transfer from SNAP to ESAP**:

1. The system shall calculate the ESAP recertification due date as 36 minus the number of months which have been received in the current certification period. This includes denial months.
2. The FS-2 due date shall be nullified or invalidated if mid-review due date is a future date.
3. If the household has been approved for ESAP after the FS-2 notice has been sent and before it has been received by the agency, the case worker might have to review the changes on the FS-2 and process the changes as “Report a Change”.
4. The system shall not transfer to ESAP without initiating recertification if system run date is on or after 15th of 35th month of SNAP certification period.

B. **Transfer from ESAP to SNAP**:

1. The system shall retain the existing ESAP certification period if the household transfers from ESNAP to SNAP. however, the household will be subject to a mid-review based on when the transfer occurred.
2. Transferred to SNAP on or before the 15th of the 11th month of certification period:
   a. Household shall receive an FS-2 notice on 15th of the 11th and 23rd months of the ESAP certification period.

3. Transferred to SNAP after the 15th of the 11th month of certification period, and before 15th of 23rd month of certification period.
    a. Household shall receive second FS-2 notice on 15th of the 23rd month of the ESAP certification period.
4. If transferred to SNAP after the 15th of the 23rd month of certification period, the household is not subject to mid-review. The household shall receive a SNAP recertification notice in the 35th month of the ESAP certification period.

MS 3400* Summer Electronic Benefit Transfer - Overview (1)

Summer Electronic Benefits Transfer (SEBT) is a permanent federal child nutrition program offering benefits for students from eligible families, to help cover the cost of meals during the summer when schools are not in session. The SEBT program provides a standard amount of food benefits to eligible students enrolled in a public or private school that participates in the National School Lunch Program (NSLP).

A. Automatic Eligibility:

Students are considered streamline eligible for SEBT benefits if they are compulsory age (age 6 up to 18 years old as of August 1 of the current school year) and have participated in the Supplemental Nutrition Assistance Program (SNAP), the Kentucky Transitional Assistance Program (KTAP), and/or Kinship Care (KC) for at least one month since July 1 of the current school year. Current school year refers to the school year immediately preceding the summer operational period beginning on June 1 of the application year. Benefits will automatically be issued.

B. Applications for students who are not automatically eligible:

1. Students enrolled in a public or private school that participates in the NSLP;

2. Students who were not of compulsory age as of Aug 1 of the current school year; and/or

3. Students who did not participate in the SNAP, KTAP, and/or KC as of July 1 of the current school year must apply for SEBT to determine eligibility.

Applications must be completed for students who do not meet streamline eligibility requirements as defined in MS 3400, to determine their eligibility for Summer Electronic Benefits Transfer (SEBT). Applications may be completed using one of the following methods:

A. Online SEBT applications can be completed via a link through the Self-Service Portal (SSP);

B. Paper applications are available in each local office and at Community Partner agencies; or

C. Phone and in-person applications may be completed by request.

The Statewide Student Identifier (SSID) must be provided for each public-school student applicant during the application. Each SSID is a unique ten-digit number assigned by the student's school district. Individuals must contact the school or the school district office their child is enrolled in to obtain this number if it has not been previously provided. Applications may be pended, and an RFI will generate for SSID verification for public school students.

The SSID is not required on the SEBT application for students enrolled in private schools.

Written notice of denied application and notice of denial must be provided to each household within 15 business days of the receipt of a completed application.

The agency must follow up with the household that submits an incomplete application within 10 business days for the receipt of the incomplete application.

Verification for cause, means verification of questionable applications, on a case-by-case basis. For instance, when the SEBT agency is made aware of conflicting or inconsistent information than what was provided on the application. An RFI will generate requesting verification for cause and must be completed within 30 days of the receipt of application.

Applicants have the right to request a fair hearing for SEBT actions. The request must be received within 90 days of the end of the summer operational period for which the appeal is regarding. The SEBT agency should review school calendars within their state to determine this date annually.

MS 3430* SEBT ALLOTMENTS AND INCOME GUIDELINES (1)

The Summer Electronic Benefits Transfer (SEBT) program provides a standard amount of food benefits to eligible students enrolled in a public or private school that participates in the National School Lunch Program (NSLP).

SEBT allotments are predetermined annually by the Federal Nutrition Service (FNS). The allotment is intended for the summer operational period and is not prorated regardless of the approval date. The summer 2024 allotment is a one-time issuance of $120 per eligible student.

Income guidelines are revised annually on July 1 by the Secretary for determining income eligibility for free and reduced-price meals under the NSLP and School Breakfast Program. Income considered for eligibility is income received during the month prior to application for SEBT benefits. If the prior month income does not accurately reflect the household's annual income, income must be based on the *projected* annual household income. If the prior year's income provides an accurate reflection of the household's current annual income, the prior year may be used as a base for the projected annual income.

Income information is required for all members reported in the household, including children. If an adult member has no income, that information is required as well.

A. The source of the income (such as earnings, wages, welfare, pensions, support payments, unemployment compensation, social security and other cash income).

B. Other cash income includes cash amounts received or withdrawn from any source, including savings, investments, trust accounts, and other resources which are available to pay for a child's meals.

Examples of income for children: Regular full or part-time wages, Social Security benefits, money from friends/family received regularly, income from private pension, annuity or trust fund, etc.

Examples of income for adults: Earnings from work, public assistance, alimony, **child support**, pensions, retirement, certain military income, etc.

The following guidelines are for the Summer 2024 operational period.

Effective through June 30, 2024.

Household Size	1	2	3	4	5	6	7	8	Each Additional Member
Income Limit	$2,248	$3,041	$3,833	$4,625	$5,418	$6,210	$7,003	$7,795	+ $793

Effective July 1, 2024

Household Size	1	2	3	4	5	6	7	8	Each Additional Member
Income Limit	$2,322	$3,152	$3,981	$4,810	$5,640	$6,469	$7,299	$8,128	+ $830

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 3450* – 8/1/26 – OMTL – 704
Transitional Supplemental Nutrition Assistance Program (TSNAP) - Overview

TSNAP assists SNAP households in which all members receive Kentucky Transitional Assistance Program (KTAP) but are expected to lose KTAP eligibility due to earned income that exceeds the applicable income limit for each SNAP household (once all earned-income disregards and time-limited deductions are exhausted).

SNAP benefits for these households will be adjusted to remove the KTAP amount and then remain at that benefit level for five months. During the household's transitional period, if fewer than five months remain in the household’s current certification period, the certification period will be extended to provide a five-month transitional benefit period. If the five-month transitional period requires the household's certification period to be shortened, a Notice of Adverse Action is not required. A Notice of Eligibility must be sent to inform the household:

A. The SNAP household is approved for TSNAP and the effective dates of their new five-month certification period;

B. The household will be required to complete a recertification at the end of the five months to determine eligibility for ongoing regular SNAP, but can recertify TSNAP at any time during the transitional period if expenses increase or income decreases;

C. If TANF is reapproved during the transitional benefit period, a SNAP recertification should be completed at the same time;

D. Only changes in state or federal means-tested programs or changes to the Basis of Issuance will affect the transitional benefits amount;

E. The household is not required to report or provide verification of any changes for SNAP until the recertification; and

F. The Department for Community Based Services (DCBS) will not act on any changes that the household reports during this transitional benefit period.

If expenses increase or income decreases, the household can complete an early recertification. If a household chooses to recertify during the mid-transitional benefit period but fails to provide all necessary verification, the household will revert to TSNAP for the remainder of the five months.

If the household's benefit amount decreases with regular SNAP when they recertify early, they can choose to withdraw the application for recertification and revert to the higher transitional benefit allotment for the remainder of the five-month transitional period.

There is no requirement for a withdrawal notice. If the recertification cannot be processed within 30 days, the household will continue to receive TSNAP while the case is being processed. If the household will receive more than the transitional benefit allotment and the transitional benefit has already been issued for that month, a supplement will be issued for the difference from the regular SNAP allotment calculated during the recertification.

Only if a member of the transitional benefit period household moves out and reapplies with another household or as their own separate household will the transitional benefit amount be adjusted to remove that member's income, resources, and deductible expenses.

Prior to the end of the transitional benefit period, the household will be sent a regular recertification notice.

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 3455* – 8/1/26 – OMTL – 704
Transitional Supplemental Nutrition Assistance Program (TSNAP) - Ineligible Households

Households that lose Kentucky Transitional Assistance Program (KTAP) eligibility due to the following reasons are **not** eligible for the TSNAP Program.

A. The household is leaving KTAP due to a full-family sanction, or the household is leaving the Child and Adult Care Food Program (CACFP) due to a full-family CACFP program sanction;

B. The household is a member of a category of households designated by the State agency as ineligible for transitional benefits;

1. KTAP payee households;
2. KTAP households with only unearned income;
3. Kinship Care households; and
4. Households that discontinue from KTAP for any reason other than exceeding the income limit.

C. All household members are ineligible to receive SNAP benefits because they are:

1. Disqualified for an intentional program violation;
2. Ineligible for failure to comply with work registration requirements;
3. Receiving Supplemental Security Income (SSI) in a cash-out State;
4. Ineligible students;
5. Ineligible aliens;
6. Disqualified for failing to provide information necessary for determining eligibility or for completing any subsequent review of its eligibility;
7. Disqualified for knowingly transferring resources for the purpose of qualifying or attempting to qualify for the program;
8. Disqualified for duplicate participation in SNAP;
9. Disqualified for being a fleeing felon; or
10. An Able-Bodied Adult Without Dependents (ABAWD) who fails to comply with work requirements.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3500 – R. 8/1/23 – OMTL – 629
Residency

Residents of Kentucky who are Expanded Categorically Eligible (ECE) or Categorically Eligible (CE) are not required to verify residency to participate in SNAP. Individuals may not participate in more than one household, in more than one county, or in more than one state in any month, with the exception of an individual who is a resident of a shelter for battered individuals and children. Those individuals may participate in more than one household if the individual was a member of a household containing the abuser.

A. Residency must be verified only for the following circumstances:

1. When the household income is over 200 percent of the Federal Poverty Level (FPL); or

2. All household members reside in an institution; or

3. The household contains a member with an Intentional Program Violation (IPV) disqualification for SNAP, or a work disqualification on the head of household.

B. Households that receive SNAP benefits in another state are not eligible for SNAP benefits in Kentucky for the same period the household received SNAP benefits in the other state. Cash-out payments from California are considered the same as having received SNAP benefits in another state.

Contact the state the individual moved from to determine the months of SNAP benefits received. A current list of out-of-state contact information is available at: United States Department of Agriculture (USDA) Contacts.

C. A household can be considered as residents without being required to have the following:

1. A fixed mailing address or residence in a permanent dwelling;

2. An intent to reside in the state permanently; or

3. A durational limit on residency in the state.

Do not consider persons in the state solely for vacation purposes as residents.

Consider the residency requirement met for any household in which all members are categorically eligible.

D. Households that do not have a fixed mailing address, including the homeless or migrant farm workers, must provide the Agency with a fixed mailing address.

Allow the household to select one of the following options:

1. The address of its church, minister, neighbor, family, friend; or
2. General Delivery **if available in that county**.

If the household states it does not have a fixed mailing address, ask the household to provide an address where it can receive mail. The local office address should not be used as a mailing address for any household.

The household may choose to have their Electronic Benefit Transfer (EBT) card mailed to the local office if needed, regardless of where they receive mail. If the card is not picked up from the local office after 30-days, it will be destroyed.

Advise the household that they must update their mailing address with the United States Postal Service (USPS) if it changes. Instruct them to check their mail regularly for important notices to ensure that their SNAP eligibility is not adversely affected.

See MS 6765 for acting on address changes and instructions for entering an address with an apartment number.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3600 – R. 6/1/17 – OMTL – 511
Enumeration Requirements for SNAP

A. As a requirement for applying and participating in SNAP, each household member must provide their Social Security Number (SSN). Providing this requested information is voluntary; however, failure to provide an SSN will result in the denial of food benefits to the individual who fails to provide an SSN. Staff should advise applicants of this provision at initial certification and member add. Household members denied for this reason are considered excluded members.

   If the household can provide a Social Security card or other official documentation provided by an organization or source that verifies the SSN, scan it into the Electronic Case File (ECF).

B. SSNs entered on the system at application or member add are sent to the Social Security Administration (SSA) and matched against the Numident file.

C. When entering an application or member-add for an individual who has never been on the system, the State On-Line Query (SOLQ) match process is completed to prevent an incorrect SSN from being used. SOLQ provides real-time verification of SSNs and allows staff to address discrepancies face-to-face with an individual.

   If a discrepancy occurs between the SSN entered on the system and SOLQ, and the discrepancy cannot be resolved at the time the SSN is entered, then request the applicant to verify the SSN by a copy of the Social Security Card or written verification from SSA.

D. When a case member does not provide an SSN, that case member must apply for an SSN as outlined in this subchapter, section SSN Applications.

   If the household is eligible for expedited services, request, but do not require, the household to apply for SSNs prior to initial certification. However, allow those household members unable to provide the required SSN or who do not have one prior to the first full month of participation to continue to participate only if the household applies for an SSN or satisfies the good cause requirements outlined in this subchapter, section Good Cause Criteria. Newborns may be certified up to six months without an SSN, prior to having to show good cause.

   If the household is not eligible for expedited services, require the household to apply for SSNs for each member.

E. Acceptable documents for meeting “Good Cause” requirements are:

   1. Form SS-5, Application for a Social Security Card, completed with all required verification;
   2. Form SS-10;

3. Form SSA-5028; or

4. Form SSA-2853, Message from Social Security.

Form SSA-2853 is acceptable verification of an SSN application **only** when signed by an authorized hospital official. Workers must remind the individual to supply the SSN to the agency upon receipt of the card.

F. In situations where a Refugee or Parolee has applied for an SSN and provides verification from SSA stating they cannot give the individual an SSN due to not providing documents showing he/she is allowed to work in the United States (U.S.):

1. Enter on the system that he/she has provided SS-5 verification, as this will give the member six months to provide the SSN; and

2. Enter comments stating that verification from SSA was provided for the individual stating he/she isn’t eligible due to being a refugee or parolee and not being allowed to work, and the SS-5 date has been entered to allow six months to provide the SSN.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3610 – R. 8/1/10 – OMTL – 368
Failure to Comply with Enumeration

A. Failure to comply with enumeration requirements means:

1. A statement of intent not to provide/apply for a Social Security Number (SSN);

2. Failure to apply for an SSN; or

3. The member fails to supply documentation required for completion of form SS-5, Application for a Social Security Card, without good cause. As long as a good faith effort is being made to provide the SSN, good cause exists for failing to provide the number.

B. Household members denied for failure to comply with enumeration requirements are considered excluded members.

The disqualification applies to the individual for whom the SSN is not provided and not to the entire household. If a household member is excluded for refusing to obtain or provide an SSN, form KIM-105, Notice of General Action, is issued to the household notifying them of the exclusion, the reason for the exclusion, the eligibility and benefit level of the remaining members, and the actions the household must take to end the member's exclusion. Consider all the disqualified individual's resources available to the household. All income of the disqualified individual is considered minus the individual's prorated share of income. The member is disqualified by the system until information is entered by the worker showing that the member is complying with enumeration requirements.

The disqualified household member becomes eligible upon providing the Agency with an SSN or applying for an SSN at the local office, if otherwise eligible.

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3620 – R. 6/1/17 – OMTL – 511
Social Security Number (SSN) Applications

If an application for an SSN with the Social Security Administration (SSA) is verified, do not complete form SS-5, Application for a Social Security Card. Obtain a copy of form SS-10 or form SSA-2853, Message from Social Security, for the case record.

In completing form SS-5 for a member, verify the date of birth, identity, and citizenship of the individual using evidence required by SSA and procedures for form SS-5.

Ensure each individual who completes form SS-5 understands the use of the number and has read and understands "The Privacy Act and Your Request for a Social Security Number", which is printed on page 4 of form SS-5.

[To preserve the anonymity of the natural parents and to ensure the contents of the original case record remain confidential for children placed for adoption or subsidized adoption, follow the enumeration procedures outlined in the SSA Program Operations Manual Systems, section GN 03340.025, Access Rights of a Parent, located on the Social Security Administration website.**]**

A. **Verification**. Acceptable proof of age includes:

1. Birth certificate from any hospital **not** shown in the appendix to the procedural instructions for form SS-5;
2. Verification of birth registration (Notification of Birth Registration issued by Vital Statistics);
3. If the member was born in Kentucky in 1976 or later, Kentucky Vital Events Tracking System (KVETS), Birth Index File;
4. Hospital record;
5. Baptismal record;
6. School record; and
7. United States Citizenship and Immigration Services (USCIS) records.

If a birth certificate, birth registration, baptismal record, etc., is used for proof of date of birth, additional verification is required to establish that the document is actually that of the applicant. Procedural instructions to form SS-5 give a complete listing of acceptable evidence of age and identity. Any document showing a birthplace in the United States (U.S.) establishes citizenship.

Do not use one document to verify both age and identity (e.g., driver's license); a driver's license verifies identity only. An additional document to verify age is required.

Applicants born outside the U.S., Puerto Rico, Guam, the U.S. Virgin Islands, the Northern Mariana Islands, American Samoa, or Swain's Island must prove legal entry into the U.S. or present proof of citizenship.

B. **Interviewing**. The SSA conducts the required face-to-face interviews for:

1. All individuals age 18 or over applying for the first SSN card;
2. All immigrants applying for their first SSN card;
3. Immigrants using their I-551 Permanent Resident Card for identification for a replacement card; and
4. Individuals who will not allow their original verification to be forwarded to SSA.

C. **Processing**. Send completed form SS-5, along with original verification of birth and identity, each week to the Regional or District SSA office serving the specific county. SSA is responsible for returning the original verification to the applicant.

1. Enumeration is completed in the following manner:
   a. For all SSN applications for which form SS-5 includes an NPN, once the SSN is assigned, SSA will forward the SSN information to our agency.
   b. Complete the enumeration process by completing an SSN change on the system as appropriate upon receipt of the verified SSN.
2. At recertification or member-add, review the case to ensure enumeration is complete for all members and that the SSN is changed. If the food benefits household cannot provide an SSN or proof of application at its next recertification after the birth of a new household member, allow the food benefits household up to six months following the birth month to provide the information.
3. By entering an SS-5 date on the Individual member screen, the system provides the member 165 days to provide the SSN.

D. In situations where a Refugee or Parolee has applied for an SSN and provides verification from SSA stating SSA cannot give the individual an SSN due to the individual not providing documents showing he/she is allowed to work in the U.S.

1. Enter on the system that he/she has provided SS-5 verification, as this will give the member 6 months to provide the SSN; and
2. Enter comments stating that verification from SSA was provided for the individual stating he/she isn't eligible due to being a refugee or parolee and not being allowed to work; the SS-5 date has been entered to allow 6 months to provide the SSN.

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3630 – R. 8/1/10 – OMTL – 368
Good Cause Criteria

If a household member, based on religious grounds, refuses to provide a Social Security Number (SSN), the member has good cause for failing to comply. If the household member is unable to provide evidence, such as out-of-state birth records, which are necessary to complete form SS-5, the member has good cause for failing to comply as long as they are making a good faith effort to obtain the evidence.

For SNAP, good cause must be shown monthly in order for the household member to continue to participate. However, newborns may be certified up to six months without an SSN, before having to show good cause.

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3640 – R. 8/1/10 – OMTL – 368
Use of the Social Security Number (SSN)

The Department for Community Based Services is authorized to use SSNs in the administration of benefit programs.

The SSN is used in the following ways:

A. Access BENDEX (BDX) information regarding individuals who currently receive SNAP, Kentucky Transitional Assistance Program (KTAP), Medical (MA), or State Supplementation benefits, and receive benefits under Title II of the Social Security Act (Retirement, Survivors and Disability Insurance (RSDI);

B. Access the State Data Exchange (SDX) to determine if any household member is currently receiving SSI income and the amount;

C. Access other computer files available to the Department, e.g., Income and Eligibility and Enrollment System (IEVS), Unemployment Insurance (UIB), etc.; and

D. Prevent duplicate participation and determine the accuracy and/or reliability of other income information given by households, e.g., wage records.

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3800 – R. 6/1/17 – OMTL – 511
Authorized Representative (AR) Requirements

Limits are not placed on the number of households an AR may represent. If employers, such as those that employ migrant or seasonal farm workers, are designated as ARs or if a single AR has access to a large number of benefits, ensure the following apply:

A. The household has freely requested the assistance of the AR;

B. The household's circumstances are correctly represented, and the household is receiving the correct amount of benefits; and

C. The AR is properly using the benefits. If it is suspected that an AR is not properly using benefits, report the circumstances to the Nutrition Assistance Branch inbox through your appropriate supervisory channels.

Enter the name and address of the household's AR on the system. The system sends an Electronic Benefit Transfer (EBT) representative's name to Fidelity Information Services (FIS). (If the AR is applying only, the information is not sent). The EBT system adds this information to the recipient's EBT account file. This allows the AR to contact the Customer Service Representative (CSR) to report a problem with the card and/or Personal Identification Number (PIN), request a new card and/or PIN, and inquire about the benefit balance**.**

If the individual making the call to the CSR is not on file as the AR and cannot provide the SNAP head-of-household's date of birth, the CSR denies the person's request.

ARs are not issued their own EBT card. If the household wants the AR to purchase food for them, the household must provide them with the household's EBT card and PIN.

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3810 – R. 1/15/24 – OMTL – 642
Allowed Representatives

The household has the option of designating one or two Authorized Representatives (ARs). The individual may appoint one AR to complete the application process and obtain the household's Supplemental Nutrition Assistance Program (SNAP) benefits, or the individual may select two ARs, one for each process. If applicants do not have the mental capacity to care for themselves, then they do not have the ability to designate an AR. In situations where a legal guardian has been appointed, the legal guardian **must** make the SNAP application for the applicant. The legal guardian can apply without a signed statement from the applicant as long as proof of guardianship is provided. The order of guardianship by the court will serve as verification of representation. If an applicant designates an AR during the application interview and that AR is entered on the system, the client’s signature on the application meets the requirement of the AR being designated in writing. The AR cannot be used as a verification source for the household if representing the household during the interview.

A. An individual authorized to represent the household for certification purposes MUST be an adult who:

   1. Is designated in writing by the head-of-household, his/her spouse, or another responsible adult of the household to act on the household's behalf. ARs may complete form FS-1, Application for SNAP, for the household. If not designated in writing as an AR by the household, have the individual complete form FS-1, and issue a manually completed form PAFS-2, Application Letter or Notice of Expiration, scheduling the application interview. Request a written statement from the household authorizing the AR to make an application for them.

      In instances of “power of attorney” (POA), unless the POA document specifies food benefits, the recipient has the right to choose whoever they want as an AR; and

   2. Is sufficiently aware of relevant household circumstances. In the event the only adult member of a household is classified as a non-household member, that person may be designated as the AR for the minor household members.

B. The initial application can be conducted by phone or on the Self-Service Portal (SSP) with an AR.

C. Recertifications may be completed over the phone with an AR if the AR is currently listed for that case and the proper documentation is located in the Electronic Case File (ECF).

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3820 – R. 8/1/10 – OMTL – 368
Nonallowed Representatives

The following individuals cannot be Authorized Representatives (AR):

A. Department employees (those who work in Family Support programs) involved in the certification and/or issuance processes unless there is specific written approval from the Service Region Administrator (SRA) or designee, and only if a determination is made that no one else is available to serve.

B. Retailers authorized to accept SNAP unless there is specific written approval from the SRA or designee, and only if a determination is made that no one else is available to serve.

C. Individuals disqualified for an Intentional Program Violation (IPV) during the period of disqualification, unless a disqualified individual is the only adult member of the household able to act on its behalf and it is determined that no one else is available to serve. Separately determine whether this individual is needed to apply on behalf of the household, to receive the Electronic Benefit Transfer (EBT) card, and to use the benefits for food. The household may have one AR to obtain the benefits each month and not be able to find anyone to purchase food regularly with the benefits. If no one can be located to purchase food regularly with the benefits, allow the disqualified member to serve as AR for purchasing food.

D. Persons disqualified from being an AR.

E. Minors.

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3830 – R. 8/1/10 – OMTL – 368
Emergency Representatives

The household can designate an emergency Authorized Representative (AR) as the need arises. The emergency AR can obtain benefits on the occasions when neither a household member nor the AR is able, due to an emergency. A separate written designation is needed each time an emergency AR is used.

When notified by the household that an emergency AR is needed, instruct the head of household or spouse to complete a statement similar to the one below. The head of household or spouse and the emergency AR sign the statement. The emergency AR brings the completed statement, plus a form of personal ID, along with the household's Electronic Benefit Transfer (EBT) card and Personal Identification Number (PIN).

I authorize ____
(Emergency Representative)

to use my EBT card and PIN to buy food for me.

____
(Signature of Head of Household or Spouse) (Date)

____**]**
(Signature of Emergency Representative)

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 3840 – R. 8/1/10 – OMTL – 368
Representatives for Treatment Center Participants

Narcotics addicts or alcoholics who regularly participate in a drug addiction or alcoholic treatment program on a residential basis may elect to participate in SNAP if the treatment center is certified by the appropriate State agency(s), including that agency's determination that the center is a private, non-profit organization or a publicly operated community mental health center. The residents who apply are certified for program participation through the use of an Authorized Representative (AR). The AR must be an employee of the organization or institution and must be designated by the organization or institution as their AR. The organization or institution applies on behalf of each resident and receives and spends the allotment for food prepared by and/or served to the resident. Do not accept verification signed by the AR in instances where the AR is applying on behalf of the household. The organization or institution is also responsible for complying with requirements outlined in MS 2660.

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3850 – R. 1/1/22 – OMTL – 589
Authorized Representative (AR) Liability for Over-issuances

When another household member or the AR is actually interviewed, the head of household or the spouse reviews the application whenever possible. Emphasize that the household, as well as the AR, is held liable for any over-issuance which results from erroneous information given by the AR except in the following situations:

A. The Drug Addiction and Alcohol (DAA) treatment center, when acting on behalf of the resident, is held liable for all over-issuances.

B. The Group Living Arrangement (GLA), when acting on behalf of the resident, is held liable for all over-issuances.

   1. In instances where the AR provides erroneous information, the AR is disqualified from serving as an AR. The household and the AR are responsible for the over-issuance. See MS 3860 regarding procedures for disqualifying an AR.

   2. Establish an Inadvertent Household Error (IHE) claim against the household as a result of the erroneous information unless an administrative disqualification hearing determines a household member collaborated with an AR to commit an Intentional Program Violation (IPV).

   3. If the hearing finds the household member collaborated with the AR to commit an IPV, establish the IPV claim against the household and disqualify the household member.

C. If a SNAP IPV disqualification is applied to an individual who is the head of household, the Integrated Eligibility Enrollment System (IEES) now requires the household to identify any AR to assist the household in making applications, recertifications, and using their Electronic Benefit Transfer (EBT) card.

   1. If the individual who is selected to be the AR also has an IPV disqualification, a different AR must be appointed.

   2. If the individual states that there is no one else available to represent them, there is an option for a short-term good cause to be listed. The good cause can only be used temporarily and must be addressed at the next application or recertification.

Volume 2 - Supplemental Nutrition Assistance Program(SNAP)
MS 3860 – R. 1/1/22 – OMTL – 589
Disqualification of the Authorized Representative (AR)

Disqualify representatives according to the following procedures:

A. Do not allow an individual to act as an AR in the program when evidence is obtained that the AR has done either of the following:

1. Misrepresented a household's circumstances without the household's knowledge by knowingly providing false information about the household; or

2. Used benefits incorrectly.

B. Period of Disqualification. Disqualify the individual from acting as an AR in the program for six months after the first verified incident. Disqualify for one year after additional verified incidents.

C. AR for More Than One Household. If an individual has a disqualification, they cannot be an authorized AR for any household. Each household has the right to appeal the disqualification action through a fair hearing.

D. Agency Action. Manually send a Notice of Eligibility to the affected household(s) and the AR 30 days prior to the date of disqualification. Include the following:

1. The proposed action;

2. The reason for the proposed action;

3. The household's right to request a fair hearing; and

4. The name and office phone number of the worker.

E. Local Office Record of Disqualified ARs. Whenever an AR is disqualified, record the following information on a reference card and maintain it in the file:

1. Name of disqualified AR;

2. Social security number and address of the AR, if available;

3. Head of household(s) and case number(s) of the case(s) from which the AR was disqualified; and

4. Beginning and ending date of disqualification period.

F. Exception. Do not apply these provisions in the case of Drug Addiction and Alcohol (DAA) treatment centers and those Group Living Arrangements (GLAs) which act as ARs for their residents.

G. If a SNAP Intentional Program Violation (IPV) disqualification is applied to an individual who is the head of household, the Integrated Eligibility Enrollment System (IEES) now requires the household to identify any AR to assist the household in making applications, recertifications, and using their Electronic Benefit Transfer (EBT) card.

1. If the individual who is selected to be the AR also has an IPV disqualification, a different AR must be appointed.

2. If the individual states that there is no one else available to represent them, there is an option for a short-term good cause to be listed. The good cause can only be used temporarily and must be addressed at the next application or recertification.

MS 4000* NATIONAL ACCURACY CLEARINGHOUSE - OVERVIEW (1)

The National Accuracy Clearinghouse (NAC) is a system designed by the Food and Nutrition Service (FNS) to be used nationwide to compare data between states and prevent duplicate Supplemental Nutrition Assistance Program (SNAP) benefit issuances. All SNAP state agencies are working toward nationwide implementation of the NAC, an interstate data matching system. Actions will be taken from the NAC to ensure individuals are only receiving benefits in the state in which they reside and are otherwise eligible to receive them. The Primary goal of NAC is to enhance program integrity, reduce improper payments, increase individual experience, and ensure fair and accurate distribution of SNAP benefits to eligible recipients across state lines.

The NAC must be searched each time someone applies for SNAP benefits, completes a recertification, when a case is reactivated, or when a new recipient is added to the SNAP household. The call to NAC is an automated or manual system-initiated call that is performed by Worker Portal when all required elements are present for an individual. Before checking NAC, the individual's social security number (SSN), residency, and identity must be verified. If there is a match, the state must inform the household in a language and format they can understand, act on the match, and inform the other state involved.

A. The NAC is called only in SNAP intake, member add, recertification, and reactivation case modes.

B. NAC calls should not be made for individuals if there is no verification provided or, if insufficient verification has been provided for SSN, ID, and/or residency.

C. NAC searches are only performed with states onboarded to NAC. For states not onboarded to NAC, workers should continue to rely on the Public Assistance Reporting Information System (PARIS) interface to identify out of state SNAP benefits. NAC match tasks will fully replace PARIS match tasks for SNAP, once all states are onboarded to NAC.

D. A household will not be determined as meeting the expedited SNAP criteria if a NAC match is found. If an individual included in the SNAP household is currently receiving benefits in another state, expedited processing timeliness standards no longer apply. The only exception to this is that expedited SNAP benefits will continue to approve when a NAC match is found, and the household resides in a shelter for battered women and children.

E. NAC will notify the initiating and matching states when a new match ID is created for an individual.

F. NAC will notify the initiating and matching states when an update is made on the match by either state.

G. Workers will verify match details on the NAC screen and take initial action on the matches.

H. If a duplicate participation match is made and a match is found, workers should take an initial action on the match, before proceeding with the SNAP case.

I. NAC calls will not be made for Disaster SNAP (DSNAP) individuals.

J. If a NAC match task is created for an individual who already has an open PARIS match task for SNAP and both the NAC and the PARIS matches are from the same state, the open PARIS match task will auto close when the NAC match task is created.

K. If a match is identified as invalid, only the invalid reason and/or comment will be updated in NAC and initial and final actions are not updated.

L. If a match is identified as valid, only the initial action is updated by the worker, and the final action is systematically updated upon case disposition.

M. NAC calls **will** be made for Simplified Assistance for the Elderly (SAFE) members.

N. NAC calls **will** be made for vulnerable individuals when the “Domestic Violence” question response is answered “Yes”, if the living arrangement type is “Shelter for Battered Women and Children”, or if “Safe at Home Program” question response is ”Yes”.

O. NAC match calls are not expected to be made during SNAP Mid-Review, Reinstatement, or Report a Change actions that do not include the addition of a SNAP household member.

P. Staff must document all instances in case comments when there is a NAC match and the actions taken to resolve the match.

MS 4010* NATIONAL ACCURACY CLEARINGHOUSE
SNAP DUPLICATE PARTICIPATION (1)

The National Accuracy Clearinghouse (NAC) information is within the data collection flow and will be required during Supplemental Nutrition Assistance Program (SNAP) applications, recertifications, reactivation, and member adds. The SNAP Duplicate Participation NAC screen will include the following:

NAC Screen Summary

A. **Individual Information Section**, displays information which includes:

1. Name; and

2. Individual ID.

B. **SNAP Duplicate Matches Summary**, displays records that correspond to any NAC matches that exist for a selected individual and will include:

1. Match ID;

2. Initiating State;

3. Date; and

4. KY Match Status (pending or complete). Records will be considered inactive if six months have passed since the record was marked complete.

C. **NAC Match Details**, displays *read only* details for an individual record. Once the pencil is clicked from the SNAP Duplicate Matches Summary Screen the following items can be viewed:

1. Match ID;

2. NAC Match Status (open or closed);

3. Last Updated Date; and

4. Match Link.

D. **NAC Match Request Initiated**, displays match details from the initiating state for an individual record and will include:

1. Initiating State or Matching State;

2. Contact Email;

3. Contact Phone Number;

4. Case Number and Participant ID (for out of state case);

5. Match Reason: New Application, Recertification, Add Household Member, or Other;

6. Benefit Closure Date - The date that benefits ended. (If state is initiating state, it is the date the benefits are denied or ended. If state is matching state, it is the final disposition date);

7. Recent Certification Months - The last three recertification months;

8. If individual is vulnerable;

9. Invalid Match Reason - Incorrect individual information, system error, potential identity theft, or other. Comments are only expected if invalid match reason is other;

10. Initial Action Taken and Date - When the Send RFI Notice is triggered during the nightly batch run then Notice Sent will be populated; and

11. Final Disposition and Date.

E. **NAC Match Information Received**, displays match details for an individual record from the matching state and will include:

1. Matching State;

2. Contact Email;

3. Contact Phone Number;

4. Case Number (for out of state case);

5. Benefit Closure Date - The date that benefits ended. If state is initiating state, it is the date the benefits are denied or ended. If state is matching state, it is the final disposition date;

6. Recent Certification Months - The last 3 recertification months;

7. If individual is vulnerable;

8. Invalid Match Reason and Comments;

9. Initial Action Taken and Date; and

10. Final Disposition and Date.

F. **Match Validation Information**, displays fields for individual records regarding if a match is valid or invalid and will include:

1. Is this match valid?;

2. What is the reason this match is invalid?;

3. Comments; and

4. Initial Action Taken and Date;

    a. If Send RFI Notice is selected, Worker Portal will generate a notice to the SNAP household explaining that a computer match has been received notifying Kentucky that an individual in their household is receiving SNAP in another state and further verification is needed.

    b. Individual Provided Required Verification is selected if Kentucky is initiating state.

    c. Individual Verified Moved Out of State is selected if Kentucky is the matching state.

    d. Verification Source and Date.

G. **Request NAC Match for all Household Members**, is only available during application, recertification, reactivation and member adds. NAC is not available during SNAP Mid-Review, Reinstatement, or Report a Change actions that do not include the addition of a SNAP household member. Request NAC Match is a manual NAC request that is only enabled when the automatic NAC call fails and will include both Last Request and Last Request Status.

MS 4020* NATIONAL ACCURACY CLEARINGHOUSE (NAC)- MATCH TASKS (1)

Tasks will be automatically created when NAC calls are made from other states which result in potential matches with Kentucky, or when Kentucky makes a NAC call that results in potential matches with other states, or when the nightly batch identifies individuals who meet certain criteria but fall into a non-member category. These tasks are as follows:

A. Review NAC Match Task

1. A task will be created when NAC is called, and a potential match is identified with Kentucky being the matching state. This task will alert staff that a potential match was identified, and a review is required.

   a. If the individual **does** have an active SNAP case in Kentucky, staff will take the following actions:

      1) If, based on NAC match details and the available documentation, staff can determine the match as valid, then select the reason as "Client Verified Moved Out of State" for all household members.

      2) If, based on NAC match details and an insufficient amount of available documentation, staff determines that the match is valid, but an RFI needs to be sent then select the reason as "Send RFI Notice" for all household members.

      3) If, based on NAC match details and the available documentation staff have determined that the match is invalid, then select the invalid reason as "Other" for all household members and add notes in the "Comments" field.

   b. If the individual **does not** have an active SNAP case in Kentucky, staff will navigate to the Individual Summary Screen to access the "NAC Match Review" button to update action to "Notice Sent" for the system to send notice that benefits denied/benefits terminated.

   c. If a case level NAC match task is created for an individual with an open Public Assistance Reporting Information Systems (PARIS) match task, the PARIS match task will close if both matches are from the same state. However, if the PARIS match is in a different state than the NAC match, then both the PARIS and NAC match tasks will remain open.

B. NAC Match Initial Action Required

A task is created by Interfaces when NAC is called, and a potential match is identified with Kentucky being the initiating state.

If staff determines the match to be valid then one of the following actions must be selected: "Send RFI Notice" or "Client Provided Required Verification."

C. Review NAC Match for Non-Member

1. A task will be created by a new nightly batch. This new batch will identify all individuals with a pending/open NAC Match record and will check if the individual meets the following criteria:

   a. Associated with a SNAP case(s) is Inactive;

   b. Individual is Out of Household on associated SNAP case(s);

   c. Individual is Non-Member on associated SNAP case(s); or

   d. SNAP application is withdrawn and there is an Open/Pending NAC Match that has not yet been Validated/Invalidated.

2. Staff will navigate to the NAC screen from the Individual Summary screen to take action for any non-member task.

MS 4030* NATIONAL ACCURACY CLEARINGHOUSE (NAC)- MATCH TASK FLOWS (1)

During a Supplemental Nutrition Assistance Program (SNAP) application, recertification, reactivation, and member add an individual's ID, social security number (SSN), and residency are verified, an auto system-initiated call is made, or a manual request call is made to NAC interface service. If a match is found that determines the individual as receiving benefits in another state, NAC will notify initiating state (Kentucky) and matching state(s). Match details will be displayed on NAC screen. If no match is found, the details of no match will be displayed on NAC screen.

Staff will verify the match summaries and initiate match action. When starting the match action, the system will refresh the match updates present on the NAC screen. (Worker Portal will prevent the worker from proceeding with the SNAP case flow when initial action is not taken on all NAC matches)

A. The following details define each type of State:

1. **Initiating State**, is the state which initiates the SNAP NAC inquiry during intake, recertification, reactivation, or member add.

   Example: Staff in Kentucky receive and process John Doe's SNAP application and verify identity, residency, and SSN. The system makes a call to NAC and receives a match in Illinois and Montana. In this case Kentucky is the Initiating State and Illinois and Montana are the Matching States.

   In this example, NAC will create a Match ID for Kentucky (Initiating State), Illinois (Matching State), and Montana (Matching State) and sends emails to all states with the match details.

2. **Matching State,** is the state in which a match is found when another state initiates the call to NAC.

   Example: John Doe is an active SNAP participant in Kentucky. John Doe applies for SNAP benefits in Illinois. Staff in Illinois run a NAC search and receive a duplicate match in Kentucky. In this case, Illinois is the Initiating State and Kentucky is the Matching State.

   In this example, NAC will create a Match ID between Illinois (Initiating State) and Kentucky (Matching State) and sends emails to both states with the match details.

B. **Initiating NAC Match Calls**

1. Staff are required to initiate a real-time NAC call within the case flow through Worker Portal during application, recertification, reactivation, or when adding an additional member to the SNAP household. Initiating NAC

calls are **not** expected to be made during SNAP Mid-Review, reinstatement, or when report a change actions do not include the addition of a SNAP household member.

2. Systematic initiated NAC calls are only made once per day.

C. Retrieving Updated Match Details

1. When staff are updating the SNAP Duplicate Participation (NAC) screen the latest match details will be retrieved and displayed.

2. There are no restrictions on the number of NAC calls made to the Get Match Details method.

D. Sending Initial Action and Match Updates to NAC

1. Valid Match Found

The Initial Action Date field is read-only and is displayed and enabled when the question "Is This a Valid Match" is answered Yes. When the initial action is updated and determined as valid, staff must select either, "Send RFI Notice" or "Client Provided Required Verification."

a. When "Send RFI Notice" is selected, the system will generate a SNAP RFI to the individual, requesting further verification of matched benefits from out of state. When this system entry is made, a NAC call is not made until the nightly batch runs. A response is sent to NAC notifying that a notice was sent to the individual.

1) If "Send RFI Notice" is saved as the Initial Action then sent to NAC, the NAC record will remain editable until the RFI is cleared.

2) If "Notice Sent" is selected, the information is sent to NAC as the initial action.

3) Once the "Send RFI Notice" option is selected it is not available again until the pending RFI is cleared.

4) If "Initial Action" was marked as "Send RFI Notice" and the RFI is **not** sent due to the SNAP case denying for not meeting other eligibility requirements, once the case is disposed a response is sent to NAC that shares an initial response as "Client Provided Required Verification" (if Kentucky is Initiating state). This updates the final disposition as Benefits Denied and the NAC match is closed.

b. When "Client Provided Required Verification" is selected the individual already provided the necessary verification to resolve the match.

When this system entry is made this sends a call to share valid updates to NAC.

2. Invalid Match Found

   a. When match is determined as invalid, worker must select either, "Incorrect Individual Information", "System Error", "Potential Identity Theft", or "Other." When system entry is made the response will be sent to NAC to share updates.

   b. "Incorrect Individual Information" is selected when inaccurate information about the individual was provided to the NAC for matching.

   c. "System Error" is selected when a system issue caused an invalid match to be created.

   d. "Potential Identity Theft" is selected when the agency has reasonable doubt the social security number and/or date of birth being used by an individual belong to that individual.

   e. Worker will select "Other" when the agency considers the match to be invalid (a false match) for a reason other than the choices provided.

   Note: Comments are only required when using "Other" as the invalid match reason.

3. Match Not Found

   When no match details are displayed on the NAC screen the worker can proceed with the SNAP application flow.

E. Manual NAC Calls

Staff may be required to manually send an initiating call to NAC if the following conditions are met (System will only allow for one manual initiating NAC call per day):

1. There are no pending or open matches;

2. There are only completed or closed matches;

3. Only during entry of application, recertification, reactivation, or member add action; and

4. There was no prior initiating call made on the same date or previous initiating call is in a failed status.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 4040 – R. 8/31/26 – OMTL – 705
National Accuracy Clearinghouse (NAC)- Procedures

[For matches received during SNAP applications, recertifications, reactivations, or the addition of a SNAP household member, households are provided at least 10 days from the date a NAC match is received to provide the information requested to resolve the match. The match must be resolved to determine appropriate actions to take on a case. For households that fail to respond to a notice of match results by the due date, the agency must issue a notice of denial.

For expedited SNAP (EXSNAP) applications, if the match is cleared within seven calendar days from the application date, the household will be approved for EXSNAP. If the match is not cleared within seven calendar days, the household will be determined as regular SNAP.**]**

For matches received during a household's certification period, the household is given at least 10 days from the date a combined notice of match results and adverse action is mailed to respond with the information requested. If the household fails to respond by the due date in the combined notice, the individual indicated in the NAC match will be removed from the SNAP Eligibility Determination Group (EDG) and benefits adjusted accordingly.

A. Resolving and Verifying NAC Matches

1. The agency must notify the individual of the match in a language and format they can understand.

2. Staff may use case closure information received through NAC or from other verification received from out-of-state agencies to make an eligibility determination without requiring additional verification.

3. Individuals can provide documentation from other state agencies to verify their case closure.

4. SNAP discontinuance information from another state that is deemed questionable must be verified with additional documentation. Benefits must not be issued if questionable information cannot be verified.

5. No action can be taken to deny, terminate, suspend, or reduce SNAP benefits based on information received from NAC until the information has been verified, the individual has been notified of the match, and the individual has been given an opportunity to respond or provide required verification timely, if necessary.

6. When a SNAP application is withdrawn, and there is a valid open and/or pending Review NAC Match task, staff will review the NAC task to validate or invalidate and mark the task complete. Upon submission of the withdrawal, the system will send NAC updated information.

7. When a SNAP application is denied, and there is a pending NAC match task, that task will remain open until staff acts on it. Once action is taken on the task, the system will send NAC updated information.

B. Resolving and Verifying Vulnerable Individual Matches

1. Vulnerable individuals are indicated as such in the system by the following:

   a. If the answer to the 'Domestic Violence' question is "Yes";

   b. If the living arrangement type is "Shelter for Battered Women and Children; and

   c. If the answer to the 'Safe at Home' question is "Yes".

2. Expedited SNAP benefits will continue to be approved when a NAC match is found, and the household resides in a shelter for battered women and children.

3. Any communication or notice resulting in a NAC match for a vulnerable individual must not include the location of the individual identified in the match to protect the individual.

4. If the match can be resolved and there is no potential for adverse action, a written notice of the match is not required; however, verbal notification of the match from the individual must be documented in case comments.

5. If more information is required to resolve the match or if information could lead to a denial or other adverse action on the case, then a written notice of match results clearly explaining what information is needed from the household as well as the consequences of failing to provide the requested information within the set timeline must be provided.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5000 – R. 10/1/24 – OMTL – 655
Resource Maximums

Determine SNAP maximum resource limits as follows:

A. Households in which all members receive Kentucky Transitional Assistance Program (KTAP) benefits and whose income does not exceed the SNAP gross income limit for the appropriate household size have automatically satisfied the resource eligibility criteria. Households composed entirely of Supplemental Security Income (SSI) recipients or households in which all members receive KTAP, Kinship Care, Work Incentive Reimbursement (WIN), or Family Assistance Short Term (FAST) are Categorically Eligible (CE) and satisfy the resource eligibility criteria. See MS 3160 - MS 3199.

B. Deny or terminate eligibility if the value of nonexempt resources, including both liquid and non-liquid assets for the household, exceeds:

   1. $4,500 for households that include a disabled member or a member aged 60 or over; or

   2. $3,000 for all other households.

C. Households that receive a Temporary Assistance for Needy Families (TANF) funded benefit or service (the TANF information sheet) are considered Expanded Categorically Eligible (ECE) and also satisfy the resource eligibility criteria. MS 3160 specifies who is not CE.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5010 – R. 8/1/10 – OMTL – 368
Resources - Self-Employed

Liquid resources that can be readily identified as used exclusively for the self-employment enterprise are not considered available to the household. If resources are commingled for both the household's and the business's use, they are divided based on the household's statement of the percentage of use.

However, a self-employed household that receives a business loan has the loan considered as a resource in the month received, even if the household anticipates spending some or all of it in the same month. Any amount remaining after the month of receipt continues to be counted as a resource until the money is spent.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5020 – R. 4/1/21 – OMTL – 574
Transfer of Resources - Allowable

Eligibility is not adversely affected if the household transfers resources which:

A. Would not otherwise affect eligibility; i.e., excluded personal property, such as furniture or money that, when added to other nonexempt resources, was less than the allowable limits at the time of the transfer;

B. Were sold or traded at or near fair market value;

C. Were transferred between members of the same household, including ineligible immigrants or disqualified persons whose resources are being considered available to the household; or

D. Were transferred for reasons other than qualifying or attempting to qualify for food benefits, such as a parent placing funds in an inaccessible educational trust fund.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5030 – R. 4/1/21 – OMTL – 574
Transfer of Resources - Disqualification

Any non-Categorically Eligible (CE) household or non-Expanded Categorically Eligible (ECE) household that transfers resources to a non-household member for the purpose of qualifying or attempting to qualify for food benefits is disqualified. The period of disqualification is up to one year and is assigned when the household:

A. Knowingly transfers resources in the three months before making an application; or

B. Knowingly transfers resources after it has been determined eligible or is receiving benefits.

The resource disqualification provision applies to any member of the household, ineligible immigrant, or disqualified person whose resources are considered available to the household.

If the household has knowingly transferred resources for the purpose of qualifying or attempting to qualify for food benefits, document the determination of ineligibility and the amount of transferred resources. Add that amount to the existing resource amount and compare it to the resource limit for the household size. If the household's resources then exceed the limit, take the amount over the allowable resource limit and determine the disqualification period based on the following scale:

Disqualification Period Based on the Value of Transferred Resources

Amount in Excess of the Resource Limit.	**Period of Disqualification**
$0 to $ 249.99	1 month
$250 to $ 999.99	3 months
$1,000 to $ 2,999.99	6 months
$3,000 to $ 4,999.99	9 months
$5,000 or more	12 months

The period of disqualification begins as follows:

1. Application: Begins with the month for which the household is requesting benefits;

2. Currently participating: Begins with the first issuance after the adverse notice period expires, unless a fair hearing is requested with continuation of benefits during the balance of the certification period.

MS 5040 RESOURCES - EXCLUDED

All resources other than those listed in MS 5050 or MS 5060 are excluded.

[Any household member who receives SSI benefits (unless the member has a current Intentional Program Violation (IPV) disqualification, a drug-related felony disqualification, or a work disqualification on the head of household) is categorically resource eligible for food benefits purposes, and that member's resources, if they can be identified separately from the household's resources, are disregarded when counting the household's total resources.]

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5050 – R. 5/15/25 – OMTL – 671
Countable Resources

Do **not** count the current month's income as both income and a resource. For example, if the current month's income is deposited into a bank account, deduct that amount from the account to determine the actual account balance.

The following resources are counted for households that are not Categorically Eligible (CE) or Expanded Categorically Eligible (ECE):

A. Cash on hand;

B. Checking account;

C. Savings account;

D. Certificates of deposit minus any penalty for early withdrawal;

E. Stocks;

F. Bonds;

G. Cryptocurrency such as Bitcoin, Doge, etc.

H. Any vacation pay of a laid-off employee that is paid to them at the time of layoff. If the vacation pay is withdrawn in one payment, the money is considered a lump sum payment. If the member receives the vacation pay in more than one payment, the pay is considered income.

I. Resources of a household member disqualified from program participation are counted in their entirety to the household minus allowable resource exclusions.

J. Resources of ineligible immigrant household members are counted in their entirety to the remaining household members

K. Funds received from Crowdfunding accounts, such as GoFundMe, Kickstarter, and Indiegogo, are considered liquid resources. The actual value of the accessible funds is counted.

L. Lottery or gambling winnings paid as a non-recurring lump sum are countable resources. Lottery or gambling winnings paid on an annual basis are considered unearned income; See MS 5000.

M. Money accumulated from attendant care payments to pay withholding taxes;

N. All loans, except educational loans with deferred repayment. Educational loans with deferred repayment are excluded until repayment begins;

O. Equity Lines of credit **once** accessed; and

P. First Time Home Buyers Credit payment.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5060 – R. 5/15/25 – OMTL – 671
Resources Which May or May Not be Counted

For households that are not Categorically Eligible (CE) or Expanded Categorically Eligible (ECE), the following resources may or may not be counted depending on the situation. These are:

A. Jointly held resources (i.e., checking, savings, certificate of deposit, savings bonds) are resources owned or held by more than one household. Determine the amount to be considered as follows:

   1. Resources owned jointly by separate households are considered available in their entirety to each household, unless the household can demonstrate that the resources are inaccessible. For households claiming that funds in an accessible jointly held checking/savings account do not belong to the household, consider as a countable resource unless the household does the following:

      a. Obtains written verification from the other account holder(s) that the household has not contributed funds to the account; and

      b. Removes the name of the household member(s) from the account.

      Upon verification that the household member's name is no longer on the account, do not consider it as a resource, or as a transfer of resources. This is effective with the month the member's name is removed from the account.

B. Resources of battered individuals and children residing in shelters are not counted if:

   1. The resources are jointly owned by such persons and by members of their former household; and

   2. The shelter resident's access to the value of the resources is dependent on the agreement of a joint owner who still resides in the former household.

C. Housing and Urban Development (HUD) retroactive tax and utility cost subsidy payments issued as a result of Underwood vs. Harris are excluded in the month received and the following month. Thereafter, any remaining balance is counted as a resource.

D. Resources whose cash value is not accessible to the household, such as but not limited to, security deposits on rental property or utilities.

   Exclude from consideration any resource available to the household, but of which the household is unaware, to the point in time the household is advised that the resource is legally available. The resource is then considered in determining eligibility.

E. Any funds in a trust or transferred to a trust and the income produced by that trust to the extent that it is not available to the household is not counted if:

1. The trust is under the control and management of an institution, corporation or organization;

2. The trust is under the control and management of an individual, whether or not a household member, appointed by the court who has court-imposed limitations placed on his/her use of the funds which meet the requirements outlined in this section;

   If the trust can be accessed by petitioning the court and funds can be accessed for reasons with no restrictions, the money withdrawn is countable as income in the month received.

3. The funds held in an irrevocable trust are either:

   a. Established from the household's own funds, if the trustee uses the funds solely to make investments on behalf of the trust or to pay the educational/medical expenses of any person named by the household creating the trust;

   b. Established from non-household funds by a non-household member; or

   c. Currently in an Irrevocable Funeral Trust Agreement with a funeral home.

4. The trust investments do not directly involve or assist any business or corporation under the control or influence of a household member;

5. The trust arrangement will not likely cease during the certification period; and

6. No household member has the power to revoke the trust arrangements or change the name of beneficiary during the certification period.

F. Money received in the form of a nonrecurring lump sum is counted as a resource in the month received and thereafter, unless specifically excluded from consideration as a resource by other federal laws. Nonrecurring lump sums are amounts such as, but not limited to: income tax refunds, or rebates; retroactive lump sum social security, Supplemental Security Income (SSI), public assistance, railroad retirement benefits, Tobacco Settlement Agreement Payments if received in a single payment; or other payments; insurance settlements; lottery or gambling winnings (annuities and lottery or gambling winnings which are paid annually are averaged over 12 months and considered countable income); refunds of security deposits on rental property or utilities.

   Tax refunds received are to be excluded as resources for a period of 12 months after receipt.

   If the total amount exceeds the allowable resource limitation, send the household form PAFS-2 and give the household 10 calendar days to update its entire resources statement. If the household declines to do so, take action to terminate the household's certification. If the household responds to the request and resources still exceed the limits, discontinue the case.

G. Excluded monies kept in a separate account and not co-mingled in an account with other non-excluded funds retain their exclusion for an unlimited period of time. When interest is credited to and retained in this type of account, co-mingling does not occur, and the principal of the account retains its exclusion.

Excluded monies co-mingled in an account with non-excluded funds only retain their exemption for six months from the date they are co-mingled. After six months from the date of co-mingling, count all funds in the co-mingled account as a resource.

If income of students and self-employed persons which is excluded has been co-mingled in an account with non-excluded funds, this money continues to be exempt during the period of time over which it has been prorated.

H. Military Personnel deployed overseas may provide a representative access to their bank account, or a portion thereof, solely for the purpose of paying the individual’s bills, etc., and otherwise handle the deployed individual’s affairs. If the applicant household can access the account for its own purpose, then the funds must be counted.

Generally, spouses have jointly owned bills/expenses, and therefore this provision would not apply.

In a situation where the couple was separated and maintained separate households/bills **before** deployment, this would apply to spouses too, as long as the funds are not used for the applicant household. If the household cannot use the funds for itself, the funds are excluded as an inaccessible resource.

It is the responsibility of the applicant household to provide documentation concerning such an arrangement. This could be in the statement from the involved financial institution, or other means attesting to the fact.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5200 – R. 10/1/25 – OMTL – 681
Income Eligibility Scale

Effective October 1, 2025, the income scale is:

Household Size	Net Income	130% Gross Income	165% Gross Income	200% Gross Income
1	$1,305	$1,696	$2,152	$2,610
2	$1,763	$2,292	$2,909	$3,526
3	$2,221	$2,888	$3,665	$4,442
4	$2,680	$3,483	$4,421	$5,360
5	$3,138	$4,079	$5,177	$6,276
6	$3,596	$4,675	$5,934	$7,192
7	$4,055	$5,271	$6,690	$8,110
8	$4,513	$5,867	$7,446	$9,026
Each additional member	+$459	+$596	+$757	+$918

The above gross income limit categories apply as follows:

A. **200 Percent Federal Poverty Limit (FPL)** – This applies to households meeting Expanded Categorical Eligibility (ECE) requirements.

B. **165 Percent FPL** – This applies to households that purchase and prepare meals with an elderly or disabled individual who is unable to purchase and prepare their own meals due to a disability. This income limit applies to the household members assisting the elderly or disabled individual, and not the elderly or disabled individual themselves.

C. **130 Percent FPL** - This applies to households not meeting ECE requirements, such as households that lost eligibility due to lottery or gaming winnings.

Determine allowable gross and net income as follows:

A. Do not impose a net income limit on households that are categorically eligible (CE) or ECE. Refer to MS 3160 to determine which households are deemed CE or ECE.

B. Elderly and disabled individuals and their spouses who live with others are considered a separate household as outlined in MS 2020. Compare the income of other persons with whom the applicant lives to the maximum gross monthly income for elderly/disabled separate households.

C. ECE households that do not contain an elderly or disabled member must meet the gross income eligibility standards as follows:

   1. Compare the gross monthly income to the gross allowable income for the appropriate household size.

2. If the gross monthly income is more than the gross allowable income, the household is ineligible.

3. If the gross monthly income is less than or equal to the gross allowable income, apply appropriate deductions.

4. Net income limits may not be imposed on CE or ECE households; however, the net income is still used when calculating benefit allotments for ECE households.

   a. If 30 percent of the net monthly income is greater than or equal to the maximum allotment for the household size, the household benefit allotment is calculated to zero, and the case will be denied.

   b. If 30 percent of the net monthly income is less than the maximum allotment for the household size, the household will receive the calculated benefit amount.

For example:

Household size:	3
Gross income:	$ 3454.00
Net income:	$ 2763.00
30 percent Net:	$ 829.00
Maximum allotment:	$ 785.00
Eligible amount:	$ 0.00

Household size:	5
Gross income:	$ 3606.00
Net income:	$ 2885.00
30 percent of Net:	$ 865.00
Maximum allotment:	$ 1183.00
Eligible amount:	$ 318.00

See MS 5800 for one- and two-member households that meet income guidelines.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5210 – R. 9/18/26 – OMTL – 709
Excluded Income

If a household has excluded income, enter the excluded income type on the Income Questions screen.

The following are excluded from household income:

A. In-kind (IK)Income: Consider any gain or benefit not in the form of money payable directly to the household as in-kind. This includes free rent, meals, clothing, public housing, or produce from a garden.

B. Vendor Payment (VP): A monetary payment made to a vendor on behalf of a household member by a person outside of the household or an organization. To be excluded, the payment cannot be made from funds owed to the household.

   1. If an employer, agency, former spouse, or other person makes payments for a household's expenses to a third party from funds not owed to the household, consider these payments as vendor payments. This does not apply to military Basic Allowance for Housing (BAH) payments, as these payments are legally obligated to the household. BAH payments shown on the Leave and Earnings Statement (LES) are countable income.

      Payments specified by a court order or other legally binding agreement to go directly to a third party rather than to the household are vendor payments. This includes amounts that exceed the amount specified in the court order or agreement.

   2. Dependent care payments by a government agency to an institution to provide day care for a household member.

   3. **[**Rent or mortgage payments paid to landlords or mortgage holders by the Department of Housing and Urban Development or by state or local housing authorities are vendor payments. Rent subsidy payments from the U.S. Department of Agriculture (USDA) are also vendor payments.**]**

      Do not exclude housing assistance distributed by Federal, State, or local organizations for households residing in transitional housing for the homeless. Although these payments are made to a third party, they are countable unearned income in the SNAP benefits case.

   4. Exclude any vendor payment that is converted to cash if it is provided by a demonstration project carried out or authorized under Federal law.

   5. Exclude annual school clothing allowances provided by the State, whether provided as a two-party check, voucher, or cash.

   6. Consider Kentucky Works Program (KWP) supportive service payments issued directly to the service provider as a vendor payment.

7. Flexible benefits offered to an employee in the form of credits, which are not legally obligated income to the employee, are excluded as income to the household.

C. Income Excluded by Law: Any income that is specifically excluded by Federal statute from consideration as income for the purpose of determining eligibility for the SNAP benefits. Examples include, but are not limited to:

1. Reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646, Sec. 216). The following payments are included under Title II of this Act:

   a. Payments to persons displaced as a result of the acquisition of real property by an agency acting under the auspices of this Act;

   b. Relocation payments to a displaced homeowner toward the purchase of a replacement dwelling. Such payment may only be to a displaced owner who purchases and occupies a dwelling within one year following displacement; and

   c. Replacement housing payments to displaced persons not eligible for a homeowner's payment.

2. Payments received under the Alaska Native Claims Settlement Act (P.L. 92-203, Sec. 21 (a)).

3. Payments received under P.L. 92-531, Sec. 22, made to Navajo or Hopi Indians.

4. Payments received under the Trade Adjustment Assistance (TAA).

5. Exclude allowances, earnings, and payments to individuals in the following Title I Programs of the National and Community Service Act:

   a. Serve-America;

   b. American Conservation and Youth Service Corps Act;

   c. National and Community Service Models Act;

   d. Higher Education Service and Learning Program; and

   e. AmeriCorps.

6. Exclude allowances, earnings, and payments to individuals in the following Title I Programs of the National and Community Service Act, **only** if that individual was receiving SNAP benefits or public assistance at the time they joined the Title I Program. Temporary interruptions in SNAP benefit participation **do not** change the exclusion once an initial determination is made:

   a. VISTA;

   b. University Year for Action; and

c. Urban Crime Prevention.

7. Exclude allowances, earnings, and payments to individuals in the following Title II Programs of the Domestic Volunteer Services Act of 1973:

   a. Foster Grandparents;

   b. RSVP;

   c. Senior Companion; and

   d. State and National.

8. Income derived from certain submarginal land of the United States which is held in trust for certain Indian tribes (P.L. 94-114, Sec. 6).

9. Indian Per Capita Payments are handled as follows:

   a. Exclude per capita payments made each calendar year from judgment awards and trust funds of $2000 or less, regardless of the frequency, from income for SNAP benefits purposes per P.L. 98-64. Apply this exclusion to each annual payment made to each individual included in the case, per P.L. 93-134.
   b. Count portions of these payments **in excess** of $2000 per payment as follows:

      (1) The recipient may elect to consider the excess as income in the month received or averaged over the certification period.

      (2) For households that receive their SNAP benefits allotment prior to receiving their per capita payment in the same month, or fail to report the payment, disregard the excess of the $2000 per payment as income in the month received. Consider any remaining monies in subsequent months as a resource.

10. Exclude allowances, Try-Out Employment, earnings other than On-the-Job Training (OJT), and Job Corps, and payments to individuals participating in programs (such as AmeriCorps) funded under the Workforce Investment and Opportunity Act (WIOA).

    Exclude payments funded through the WIOA, Title III, and National Reserve Grant, commonly called the Coal Grant.

    Exclude payments under YouthBuild, under the Housing and Community Development Act of 1992, regardless of age.

    Count WIOA-OJT earnings as income, unless paid to a member age 18 or under who is under the parental control of another household member. This includes any WIOA-funded OJT arranged in connection with the Kentucky Works Program (KWP).

11. Exclude Earned Income Tax Credit (EITC) payments.

Tax refunds received are to be excluded as income for a period of 12 months after receipt.

12. Exclude earnings received by individuals 55 years of age or older under the Senior Community Service Employment Program (SCSEP) as authorized by Title V of the Older Americans Act, P.L. 100-175.

    Organizations that receive Title V funds are:

    a. Experience Works;
    b. National Council on Aging;
    c. National Council of Senior Citizens;
    d. American Association of Retired Persons;
    e. U.S. Forest Service;
    f. National Association for Spanish-Speaking Elderly;
    g. National Urban League; and
    h. National Council on Black Aging.

13. Payments received by United States (U.S.) citizens of Japanese ancestry, Japanese permanent resident aliens, or their survivors and Aleuts, under the Wartime Relocation of Civilians, P.L. 100-383.

14. Payments received from the Agent Orange Compensation Exclusion Act, P.L. 101-201. Aetna Life and Casualty issues these payments to veterans or their survivors as lump-sum payments, retroactive to January 1, 1989.

    P.L. 102-4, Agent Orange Act of 1991, authorized veterans' benefits for service-connected disabilities resulting from exposure to Agent Orange. These Veterans Administration (VA) payments **are not** excluded by law.

15. Attendant care and childcare payments made to a SNAP benefits household member from their own pocket and not from monies from an outside source. Such attendant care and childcare payments are not earned income because the money is exchanged between household members.

16. Childcare payments authorized by Service Agents through the Child Care and Development Fund (CCDF) if the provider is not in the SNAP benefits household. To determine the allowable dependent care deduction when childcare payments are issued by Service Agents, see MS 5450.

17. Exclude any portion of the KTAP grant that the household receives because a childcare expense is subtracted from earnings as part of the grant calculation process. To determine the countable KTAP income for KTAP cases with earnings and childcare expenses, see MS 5650.

18. Exclude payments made to farmers due to a farm emergency resulting from a natural disaster as required by Section 312(d) of the Disaster Relief Act of 1974, as amended by P.L. 100-387.

This Act was additionally amended in 1988 by P.L. 100-707 to expand this exclusion to Federal assistance provided to persons directly affected by a major disaster, and to comparable disaster assistance provided by States, local government, and disaster assistance organizations. Examples of assistance types include, but aren't limited to: Disaster Unemployment Assistance (DUA) which provides financial assistance to individuals whose employment or self-employment has been lost or interrupted as a direct result of a major disaster and who are **not** eligible for regular unemployment insurance benefits; financial assistance to individuals or households to rent alternate housing accommodations (such assistance may include the payment of the cost of utilities), financial assistance for the repair of owner-occupied private residences, utilities, and residential infrastructure; financial assistance for replacement of owner-occupied private residences; financial assistance to an individual or household to meet disaster-related medical, dental, and funeral expenses; financial assistance to address personal property, transportation, and other necessary expenses or serious needs.

19. Payments received from the Radiation Exposure Compensation Trust Fund as compensation for injuries or death resulting from exposure to radiation from nuclear testing and uranium mining (P.L. 101-426).

20. Payments/fees withheld by a qualified organization or representative payee from funds received on behalf of a Supplemental Security Income (SSI) or Retirement and Survivors Disability Income (RSDI) recipient. The representative payee fee is excluded by federal statute. To qualify to collect a fee as a representative payee, an organization must be a community based nonprofit social service agency that is bonded or licensed in each state. Qualified organizations are determined by the Social Security Administration (SSA).

21. On-the-job training payments received under the Summer Youth Employment and Training Program (SYETP), P.L. 102-367.

22. Payments received by individuals as a result of their status as victims of Nazi persecution (P.L. 103-286).

23. Assistance payments made to children, not providers, under the National School Lunch Act, P.L. 94-105.

24. The value of assistance to individuals under the Child Nutrition Act of 1966, P.L. 89-642. This includes the Special Milk Program, the School Breakfast Program, and the Special Supplemental Food Program for Women, Infants, and Children (WIC).

25. Payments or compensation paid to any crime victim under the Crime Act of 1984, P.L. 103-322.

26. Payments received from SSA and directly deposited into an "SSI dedicated account", for eligible individuals under age 18, according to Section 213 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. However, consider interest earned by the account as income.

27. Benefits for individuals with covered birth defects who are the natural children of women veterans who served in Vietnam during the Vietnam War. There is no age limit for recipients of these benefits. These individuals receive the benefits until they die.

28. Income maintained in or withdrawn from an Individual Development Account (IDA), including interest earned, as long as the recipient is receiving Kentucky Transitional Assistance Program (KTAP).

    An IDA is a savings account established at an approved financial institution, matched by funds from a non-profit organization participating in the Assets for Independence Act (AFIA). There are currently two IDA granters under the AFIA demonstration project in Kentucky: The Center for Women and Families, in Louisville, KY, and Kentucky River Foothills Development Council, Inc., in Richmond, KY.

29. Family Assistance Short-Term Program (FAST) payments.

30. Work Incentive Reimbursement (WIN) payments.

31. Military Income Payments under the Consolidated Appropriations Act of 2005, received by military personnel while deployed to a combat zone. To determine excludable income in a SNAP household, use the following steps to process military pay:

    a. Establish the amount of the military person’s pay that was actually available to the household prior to the deployment of the military person to a designated combat zone as identified in item f.

        (1) If the military person was part of the SNAP benefits household prior to deployment, the amount would be the net military pay. For SNAP budgeting purposes, gross pay was counted; however, only the net pay was actually made available to the household. Therefore, once deployed, continue to consider the net pay as available to the household unless otherwise reported and verified.

        (2) If the military person was not part of the household prior to the military person’s deployment to a designated combat zone, for SNAP benefits purposes, this amount is the amount the absent military person actually made available to the family prior to deployment to the designated combat zone.

    b. Determine the amount of military pay that the absent member deployed in a designated combat zone is making available to the family.

    c. If the amount of the military pay that the absent member deployed in a designated combat zone is making available is equal to or less than the amount the household was receiving from the military person prior to deployment to a designated combat zone, all of the military pay would be counted as income to the household for SNAP benefits purposes. Any portion of the amount that exceeds the amount the household was receiving prior to deployment of the military person to a designated combat zone is excluded when determining the household's income for SNAP benefits purposes.

d. The deployed person's military pay record, the Leave and Earnings Statement (LES), can be used to verify if combat pay is being received, if the deployment is to a combat zone, and the amount of combat pay. Military orders can also be used to establish deployment. Although the LES is usually sent to the military person's family back home, this is not always the case. If the applicant household does not have the LES, the household can obtain the income information for this deployed person through the web or the local military base's financial office.

e. For SNAP benefits, this policy is retroactive to October 1, 2004. Any household that had an increase in income as a result of the deployment of the service member to a designated combat zone that was counted in their SNAP benefits case as of October 1, 2004, is entitled to restoration of lost benefits. Determine at the household's next recertification if they are due a restoration unless the household requests a review of their case prior to recertification.

f. The following are the Combat Zone Tax Exclusion Areas:

(1) **Executive Order 12744 (effective January 17, 1991)** established the Arabian Sea Portion that lies North of 10 degrees North Latitude and West of 68 degrees East Longitude, which includes:

- Bahrain
- Gulf of Aden
- Gulf of Oman
- Iraq
- Kuwait
- Persian Gulf
- Qatar
- Oman
- Red Sea
- Saudi Arabia
- United Arab Emirates

(2) **Direct Support of Executive Order 12744** established the following:

- Turkey - effective January 1, 2003
- Israel - effective January 1 to July 31, 2003
- Eastern Med - effective March 19 to July 31, 2003
- Jordan - effective March 19, 2003
- Egypt - effective March 19 to April 20, 2003

(3) **Executive Order 13239 (effective September 19, 2001)** established Afghanistan.

(4) **Direct Support of Executive Order 13239** established the following:

- Pakistan - effective September 19, 2001
- Tajikistan - effective September 19, 2001
- Jordan - effective September 19, 2001
- Incirlik AFB, Turkey - effective September 21, 2001
- Kyrgyzstan - effective October 1, 2001
- Uzbekistan - effective October 1, 2001
- Philippines (only troops with orders that reference OEF) - effective January 9, 2002
- Yemen - effective April 10, 2002
- Djibouti - effective July 1, 2002

(5) **Executive Order 13119 (effective March 24, 1999) Public Law 106-21, Establishing Kosovo as a Qualified Hazardous Duty Area (3/24/99)** established:

- The Federal Republic of Yugoslavia (Serbia/Montenegro)
- Albania
- The Adriatic Sea
- The Ionian Sea north of the 39th parallel

(6) **Public Law 104-117, Establishing a Qualified Hazardous Duty Area (11/95),** established the following countries:

- Bosnia
- Herzegovina
- Croatia
- Macedonia

32. Payments received from the Filipino Veterans Equity Compensation Fund. These payments were created under the American Recovery and Reinvestment Act (ARRA) of 2009 for certain veterans and the spouses of veterans who served in the military of the Government of the Commonwealth of the Philippines during World War II (Division A, Title X, Section 1002 of ARRA).

33. Chafee Independent Program payments under Title IV E.

34. State Supplementation payments (SSP) issued as a reimbursement.

Note: Community Integrated Services (CIS), a type of State Supplementation, is countable, as it is not a reimbursement.

D. Payments or allowances paid directly to the household, which are made under any federal law for the purpose of energy assistance or Federal or State one-time assistance for weatherization or emergency repair or replacement of heating or cooling devices. If a second payment is made on an as-needed basis, rather than as a regular periodic payment, it is also considered a one-time payment and excluded as income. These payments or allowances must be clearly identified as energy assistance by the legislative body authorizing the program or providing funds and must be approved as a legitimate provider of energy assistance based on existing criteria developed by the Food and

Nutrition Service. An example of payments authorized in Kentucky is the Low-Income Home Energy Assistance Program (LIHEAP).

Utility reimbursements that are provided by the Department of Housing and Urban Development (HUD) and USDA to households that receive housing assistance and are responsible for paying their utilities separately from their rent are excluded income.

E. Public Assistance (PA) vendor payments (payments made by a third party on behalf of a household.

F. Exclude monies withheld or received from any income source not otherwise excluded, which are used to repay a prior overpayment from that same income source. Do not exclude monies withheld from assistance payments from other means-tested programs to recoup an overpayment from a household because of failure to comply with the other program's requirements. See MS 5220.

Non-compliance with another program's policy does not apply to SSI. Exclude the recouped portion of SSI benefits as income.

Means-tested programs include SSI, KTAP, and publicly funded housing payments.

Since Social Security and Veterans benefits are not means-tested, exclude the recouped portion of these benefits as income.

G. Child support payments received by KTAP recipients, which must be sent to the Department of Child Support Services (DCSS) in the Department for Income Support.

H. Payments received as reimbursement for past or future expenses. The entire amount of the reimbursement is excluded. The following are examples of reimbursements:

1. Reimbursements or flat allowance for job or training related expenses such as travel, uniforms, and transportation to and from the job or training site, even if the reimbursements are provided in addition to wages. Reimbursements for the travel expenses of migrant workers are also excluded.

2. Reimbursements for out-of-pocket expenses of volunteers incurred in the course of their work.

3. **[**Reimbursements or Stipends for daily transportation.

   Example: A school district may offer a stipend to parents or guardians of students who are not offered bus service at their address.

   This taxable income is excluded because it is also excluded from Medicaid and/or Temporary Assistance for Needy Families (TANF) households.**]**

4. The transportation allowance is provided to reimburse eligible Kentucky Works Program (KWP) participants for transportation and related expenses (e.g., gas, tolls, parking fees) incurred as a result of participation in KWP.

5. Jury duty pay from the Kentucky judicial system is $12.50 per day, of which $7.50 per day is excluded.

6. Payments made to severely physically disabled adults to purchase attendant care services. Money accumulated from attendant care payments to pay State and Federal withholding taxes is excluded as income and considered a resource.

7. School clothing allowances provided by the State, for the purpose of obtaining children's clothing when the children return to school or day care, are excluded from income, whether provided as a two-party check, voucher, or cash.

8. Preparing Adults for Competitive Employment (PACE).

I. All Educational Assistance Payments are excluded except Ready to Work (RTW) and other educational assistance programs funded by Temporary Assistance for Needy Families (TANF).

1. Any allowable deductions, such as tuition, books, fees, and other items listed in MS 5650, can be deducted from the RTW/TANF-funded income.

2. For a complete overview of student financial eligibility, refer to MS 5650.

J. Monies Received for Third Parties: Monies received and used for the care and maintenance of a third-party beneficiary who is not a household member. If the beneficiaries of a single payment include both household and non-household members, the portion of the payment intended and used for the care and maintenance of the non-household member is excluded. If the non-member’s portion cannot be readily identified, the payment is prorated evenly among the intended beneficiaries. The non-household member's prorated share or the amount documented as actually used for the non-household member's care and maintenance, whichever is less, is the amount excluded.

K. Earnings of Children: The earned income of members of the household who are age 17 or younger, who are in elementary or secondary school, General Education Diploma (GED) classes, or accredited home schooling, and who live with a natural, adoptive, or stepparent or under the parental control of a household member other than a parent. This income is excluded during temporary interruptions in school attendance due to semester or vacation breaks, as long as the child's enrollment in school will resume following the break. If a homeschool is not accredited by the local Board of Education, the children are not considered to be in school. If the wages of several persons are paid as one sum and the child's earnings or the amount of work performed cannot be differentiated from that of the other persons, the total earnings are prorated equally among the working members, and the child's prorated share is excluded.

Client statement can be taken as verification of enrollment **and** earned income for students age 17 and under.

For applicant households, when a child who is a student at least half-time becomes 18 in the month of application, determine at the time of the interview how much of the child's earned income was received or anticipated to be received **after** turning 18. Consider this as income to the household. Exclude any amount received prior to the 18th birthday. For participating households, exclude the earned income of students whose 18th birthday is after the first of the month for the entire month. For those students whose 18th birthday falls on the first of the month, count the entire month's earned income.

L. Loans: All loans, including loans from private individuals, commercial institutions, and business loans for self-employed households. Reverse mortgages are also considered loans and excluded.

If the household receives payments to meet expenses on a recurring or regular basis from the **same source for more than three months**, but claims the payments are loans, the provider of the loan may complete and sign form PAFS-73, Verification of Contributions-Loans-Roomer/Boarder Status or sign a written statement. A written statement from the provider of the loan is acceptable IF it includes the offer and acceptance along with the complete terms of the loan and consideration. If the PAFS-73 is not completed and signed, showing that repayments are being made or that payments will be made in accordance with an established repayment schedule, consider the money as income to the household.

M. Irregular Income: Exclude any income not exceeding $30 in a quarter within the certification period that is received too infrequently to be reasonably anticipated.

N. Nonrecurring Lump Sum Payment: Consider a nonrecurring lump sum payment as a resource for SNAP benefits purposes. One-time payments from Federal or State assistance for weatherization or emergency repair or replacement of an unsafe or inoperative furnace or other heating or cooling devices are excluded as income.

O. Cost of Producing Self-Employment Income: The portion of the income that represents the household's cost of doing business.

P. Allocated Tips: Some employers may show allocated tips on an employee's check stub. Allocated tips are used by the Internal Revenue Service (IRS) for audit purposes only and are not included in the gross wages. Do not count allocated tips as income solely based on the check stub. See MS 5650 for further details.

Q. Cash Donations Based on Need: Exclude any cash donations of no more than $300 per quarter that are received from non-profit charitable organizations. Consider any amount of such payment that is in excess of $300 per quarter as income available to the household. A quarter is defined as follows:

January - March	July - September
April - June	October - December

R. If the household chooses to exclude foster adults or foster care children as members, exclude the entire foster care maintenance payment from consideration in benefit calculations.

S. Exclude any income necessary for the fulfillment of a Plan for Achieving Self-Support (PASS) under Title XVI of the Social Security Act. The income exclusion for PASS accounts is effective December 13, 1991, unless one of the following applies:

1. The agency had information that a household member had a PASS account. If so, the effective date for this household is October 1, 1990; or
2. There was a fair hearing on the subject of a denied income exclusion for a PASS account. In these cases, the effective date would be the date of the hearing.

   Exclude only PASS plans that have been approved by SSA for SSI recipients. Obtain a copy of the approved PASS plan from the recipient. It lists the amount of money set aside for PASS. The source can be resources, earned or unearned income, or a combination.

T. Tobacco Settlement Agreement payments received in a single payment. The SNAP benefits household is responsible for providing verification of the payment amount and how often the payment will be received. Application for the Tobacco Settlement payments can be made with the Kentucky Department for Agriculture. If recipients have questions about the payments, advise them to contact the Department for Agriculture.

U. Benefits for children of female Vietnam Veterans.

V. Payments made to a child of a Vietnam Veteran who suffers from disabilities resulting from Spina Bifida.

W. Dividend income.

X. Exclude payments made from the National Flood Insurance Program Act (NFIP) to SNAP households. Payments made under NFIP for flood mitigation activities are counted as income or resources for the owner of the property when determining eligibility.

Y. One-time only gift cards are excluded from consideration as income or resources.

Z. Federal Emergency Management Agency (FEMA) funds.

AA. Payments under the Uniform Services Former Spouse Protection Act are excluded from military pension when being paid to a former spouse.

BB. Census Bureau Income for those individuals who are temporarily employed through the Census Bureau.

CC. Unemployment Benefits paid under the American Recovery and Reinvestment Act (ARRA) of 2009.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5220 – R. 12/15/25 – OMTL – 686
Countable Income

Consider all non-excluded payments received by household members as countable income.

A. Earned Income: Consider the following as earned income:

1. Wages and salaries, includes all actual non-allocated tips for services performed as an employee, wages earned by a household member that are garnished or diverted by an employer and paid to a third party, any employee Federal insurance contributions paid by the employer, Workforce Innovation and Opportunity Act (WIOA) on-the-job training, except when paid to a member age 18 or younger who is under the parental control of another household member or paid to a member participating in the Summer Youth Employment and Training Program (SYETP), non-excluded earnings of children and cafeteria plans. A cafeteria plan refers to a variety of benefits, health insurance or childcare benefits, offered to an employee by their employer. If the benefit plan involves money owed to the recipient, it is countable income.

2. American Reinvestment and Recovery Act funds to assist employers in paying wages.

3. Vacation pay received in more than one payment of a laid-off employee no longer in active pay status.

   Vacation pay received by an employee on active pay status is considered in the gross income as regular wages.

   Vacation pay, which is paid in one payment, is a resource.

   Example: The individual works all week but also receives vacation pay for that same week. The wages are considered as earned income, and the vacation pay is a resource.

4. The total gross income from self-employment, excluding the cost of doing business. This includes payment from a roomer or boarder, selling blood, operating a business, operating rental property if a household member is actively engaged in its management more than 20 hours per week, and farming, including payments from the Agricultural Stabilization and Conservation Service.

   Child Care Assistance payments, which are paid by an outside source, such as the Child Care Assistance Program (CCAP), are treated as self-employment income to the person providing the childcare.

5. Training allowances from vocational and rehabilitative programs recognized by federal, state, or local governments, unless excluded by law.

6. Income shown on the Leave and Earnings Statement (LES) for basic military pay, housing, and/or food. This includes Basic Allowance for Housing (BAH), Basic Allowance for Quarters (BAQ), Variable Housing Allowance (VHA), Basic Allowance for Subsistence (BAS) or Rations, Regular Sea Pay, Sea Duty Pay, or Career Sea Pay. The household is entitled to a shelter deduction for rental expenses.

   However, any gain or benefit not in the form of money, e.g., free meals/housing furnished to military personnel, is in-kind income. On 1/1/98, the Armed Services began phasing in BAH to replace BAQ and VHA. BAH is paid as a single monthly amount for BAQ and VHA.

   The mandatory salary reduction amount for military service personnel, which is used to fund the Government Issue (G.I.) Bill, is excluded.

   Military personnel living in government-supplied, rent-free quarters, such as barracks, are not entitled to receive a BAQ. However, the Marine Corps shows an equivalent amount under "entitlements" and a similar amount under "deductions" on its LES. Depending on the Marine's living situation, the BAQ income may or may not be countable in the SNAP case.

   Disregard the BAQ as income and the corresponding deduction on the LES for Marine applicants living in government-supplied, rent-free quarters. BAQ income shown on the LES is considered countable earned income, and the rent is used to determine the household's shelter deduction.

   Foreign Language Proficiency Pay (FLPP) and Special Duty Allowance (SDA) are countable income.

7. Earned income from members excluded from SNAP participation is handled as follows:

   a. Intentional Program Violation (IPV) disqualification, fleeing felons, disqualification for noncompliance with an Employment and Training (E&T) requirement, including Kentucky Works Program (KWP) sanctions or refusal to work register: Attribute all of the earnings to the household. Allow only one earned income deduction from the gross countable earned income, which includes the earned income of the excluded individual.

   b. Social Security Number (SSN) Disqualification, Ineligible Able Bodied Adults Without Dependents (ABAWD), and Ineligible Aliens: A pro rata share of the countable income of the ineligible member is attributed to the remaining household members. The system automatically calculates the ineligible member's countable income; however, to manually calculate the pro rata share to determine if the correct amount of benefits has been issued:

      1) Allow exclusions, if any, from the ineligible member's gross monthly income to arrive at the gross countable income.

      2) Divide the countable income between the household members, including all ineligible members.

      3) Subtract the shares of ineligible members from the countable gross income.

4) Add the remainder to other household earned income.

5) Apply the earned income deduction to the household's gross monthly earned income.

8. Consider capital gains income derived from a self-employment enterprise as earned income. Calculate the earned income according to MS 5310. Consider capital gains income not derived from a self-employment enterprise as unearned income in the month received and as a resource thereafter. Do not apply capital gains calculations to determine countable unearned income.

9. Consider sick pay received as earned income if the person is still considered an employee by the employer and the sick pay is received for time off, such as a short-term illness. However, sick pay from an outside source, such as an insurance company, is considered unearned income, whether or not the recipient is still considered an employee by the employer.

10. Income from non-excluded educational assistance that has a work requirement is treated as earnings with the appropriate disregards given. See MS 5650 for procedures on computing this income.

11. $5.00 of the $12.50 per day received for jury duty pay from the Kentucky judicial system is considered earned income. See MS 5210.

12. Attendant care payments, which are paid by an outside source, are treated as unearned income to the person providing the attendant care.

13. Consider payments under Title I, VISTA, University Year for Action, Urban Crime Prevention, of the Domestic Volunteer Service Act of 1973 as earned income unless those individuals were receiving SNAP or public assistance at the time they joined the program.

14. Consider payments under the Consumer Directed Option (CDO) as earned income.

15. Michelle P. Waiver payments.

16. Relative Caregiver Mentor Program payments are considered self-employment, as taxes are not withheld.

17. Kentuckiana Regional Planning and Development Agency (KIPDA) payments.

18. Incentive Therapy (IT) Program and Compensated Work Therapy Program payments through the Veterans Administration (VA).

19. Holiday pay that is representative of ongoing income.

    Example 1: An individual works Monday through Thursday and is off Friday for a holiday. The check they receive for that week reflects what they normally make in a week. This holiday pay is countable income.

Example 2: An individual works Monday through Friday. Friday is a holiday, and the individual receives a higher rate of pay for working on a holiday (i.e., time and a half). In this situation, the holiday pay the individual receives is not representative of ongoing income and would not be counted.

B. Unearned Income: Consider the following as unearned income:

1. Assistance payments from federal or federally aided public assistance programs such as Supplemental Security Income (SSI), Kentucky Transitional Assistance Program (KTAP), or other assistance programs based on need. Kinship Care (KC) payments are considered in the SNAP case as unearned income. Children who receive Kinship Care payments must be included in the SNAP household.

   When it is determined that a SNAP benefits household member did not comply with the KTAP program, the actual amount of KTAP income received is counted in the SNAP case.

   If a 310 penalty is imposed, the household's SNAP benefit allotment will be reduced by 25 percent.

2. Annuities, lottery or gambling winnings paid annually, pensions, retirement, veteran's or disability benefits, including Agent Orange payments issued by the Department of Veterans Affairs, worker's compensation, unemployment insurance benefits (UIB), including the dependent allowance that other states receive as part of their UIB compensation, social security benefits, strike benefits and foster care payments for children or adults that are included in the household.

   Prorate over a 12-month period, annually paid annuities, and lottery or gambling winnings.

3. Count support or alimony payments made directly to the household by non-household members or by the Department of Child Support Services (DCSS) as income.

   a. Exclude corrective payments made in a later month to make up for missed payments as a nonrecurring lump sum payment. Count only the current month's payment as income. If the absent parent pays on a consistent basis more each month than the court-ordered amount to make up for arrearages, and the corrective payment has not already been counted, the corrective payment is no longer nonrecurring. The corrective payment has become the regular payment, and the entire amount must be counted as unearned income.

   b. Escrow is support that DCSS collects and holds because the KTAP amount is exceeded by the child support payments. Kentucky Automated Support and Enforcement System (KASES) generates a "Notice of Payment of Child Support Collections to KTAP Recipient" form to the local office. The form includes the amount of support and the month the support is forwarded to the recipient. If there are multiple absent parents tied to the KTAP case, the escrow notice might contain an incorrect absent parent's name. This incorrect name does not affect the amount of child support payment. The escrow is countable income for SNAP cases if it is anticipated to continue. See MS 5650.

4. For a complete overview of student financial eligibility, refer to MS 5650.

5. Any portion of a statutory benefit due the household but diverted to a third party or protective payee for purposes, such as managing a household's expenses, even if the household has the option of receiving a direct payment.

6. All money payments from any source which can be construed as a gain, including, but not limited to, royalties or payments from government sponsored programs, unless otherwise excluded.

7. Income from members excluded from SNAP participation is handled as follows:

    a. Intentional Program Violation (IPV) disqualification, fleeing felons, disqualification for noncompliance with an Employment and Training requirement, including Kentucky Works Program (KWP) sanctions, refusal to work register, reducing the number of hours working below 30 hours or below the 30 hours multiplied by the Federal minimum wage equivalent, or voluntarily quitting a job without good cause: Attribute all the income to the remaining household members.

    b. Social Security Number (SSN) disqualification, ineligible ABAWDS and ineligible Aliens: Consider the excluded member's monthly unearned income less exclusions and divide the total by the eligible household size plus all excluded members to determine the excluded member's prorated share. Once the excluded member's share has been subtracted, count the balance in with the household's unearned income total.

8. Income derived from rental property, including land contracts, if a household member is not actively engaged in the management of the property at least 20 hours a week.

9. Monies legally obligated and otherwise payable to the household but diverted by the provider of the payment to a third party for household expenses are counted as income. The distinction is whether the person or organization making the payment on behalf of a household is using funds that otherwise are payable to the household. If an employer or agency, owing funds to a household, diverts them to a third party to pay for a household expense, these payments are counted as income to the household (e.g., garnishment on wages).

10. Monies withdrawn from trust funds are excluded as resources. Such trust withdrawals are considered income in the month received unless otherwise excluded.

11. Income of non-household members, including an ineligible student, is handled as follows:

    a. Cash payments from the non-household member to the household are considered income unless the non-household member is making vendor payments.

    b. Income deemed to a community spouse, from an institutionalized spouse in a long-term care facility, is countable in the community spouse's case.

    c. When the earned income of one or more household members and the earned income of a non-household member are combined in one wage, the income of the household member(s) is determined as follows:

        1) If the household's share can be identified, that portion due to the household is counted as earned income.

        2) If the household's share cannot be identified, prorate the earned income among all those for whom it was intended to cover and count that pro-rated portion to the household.

12. Severance pay received after termination of employment is considered unearned income.

13. Recurring annual Tobacco Settlement Agreement payments are counted as follows:

    a. Prorate Tobacco Settlement payments over a 12-month period for the following SNAP recipients:

        1) Households actively engaged in farming either as owners or tenants, who are considered self-employed. In this situation, the income is entered under "Farm" self-employment, and the "number of hours" worked greater than zero is entered; this way, it will be counted as earned income.

        2) Households that previously farmed tobacco and are leasing their land to others, who are also considered self-employed. In this situation, the income should be entered under "Rental" self-employment; since hours worked are under 20, it is counted as unearned income.

    b. Count the payments in their entirety in the month received or average the payment over the period of time the income is intended to cover for households that do not own the land and are leasing their quotas to third parties to grow tobacco. This type of arrangement is not considered self-employment. Enter as Other Unearned Income and give the recipient the option of selecting the budgeting process that is to the household's advantage.

c. Do not enter farm income as Farm Income Self-Employment when an individual is not actively engaged in farming. Enter the income from the rental or lease of farm property as Self-Employment/Rental unearned income.

14. Consider sick pay received as unearned income if the person is not considered an employee by the employer while receiving the sick pay. Sick pay from an outside source, such as an insurance company, is considered unearned income, whether or not the recipient is still considered an employee by the employer. Do not consider these payments earned income.

15. Assistance payments that require, as a condition of eligibility, the household to work without any compensation other than the assistance payments.

16. Monies received by a household member (protective payee/benefit payee), which are used for the care and maintenance of a non-household member, are handled as follows:

    a. If all the money is used for the care and maintenance of the non-household member, it is excluded. For example, the grandparent is the payee for their grandchild's Retirement and Survivors Disability Insurance (RSDI). The grandchild does not live with the grandparent. The grandparent gives the grandchild the entire RSDI check. In this situation, none of the RSDI is counted as income for the grandparent.

    b. If the household member (protective payee/benefit payee) keeps some or all of the money, that portion of the money is considered unearned income to the protective payee's household.

    c. If the non-household member's portion cannot be readily identified, the payment is evenly pro-rated among intended beneficiaries. The non-household member's pro rata share or the amount documented as actually used for the non-household member's care and maintenance, whichever is less, is the amount excluded.

17. Any income of military personnel dispatched to bases in the United States or sent overseas, which is sent directly to the household. This includes money directly deposited by the military in a joint checking account in the name of the dispatched person and a household member.

18. Housing assistance for households residing in transitional housing for the homeless that is distributed by Federal, State, or local organizations to a third party.

19. Federal or State assistance in the form of money for weatherization or emergency replacement or repair to a heating or cooling device is countable income when periodic payments are received on a regular basis. The income is pro-rated over the period it is intended to cover. If one-time payments are made on an as-needed basis that cannot be anticipated, the assistance is excluded.

20. Payments received under the Trade Re-Adjustment Act (TRA). These payments are an extension of unemployment benefits and are considered countable unearned income.

21. Kentucky Wilson-Fish payments received by refugees.

22. Adoption Subsidy payments.

23. Voluntary Separation Incentive payments.

24. Student Conservation Association (SCA) payments**.**

25. Gift Cards received on an ongoing basis, as a method of payment for services rendered, or given in exchange for other types of income, such as child support.

26. If the household receives payments to meet expenses on a recurring or regular basis from the same source for more than three months, but claims the payments are loans, the provider of the loan may complete and sign form PAFS-73, Verification of Contributions-Loans-Roomer/Boarder Status or sign a written statement. A written statement from the provider of the loan is acceptable **if** it includes the offer and acceptance along with the complete terms of the loan and consideration. If form PAFS-73 is not completed and signed, showing that repayments are being made or that payments will be made in accordance with an established repayment schedule, consider the money as income to the household.

27. Community Integrated Services (CIS) is a type of State Supplementation that is countable, as it is not a reimbursement.

28. Interest Income.

29. Veterans Administration (VA) Aid and Attendance.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5300 – R. 8/1/12 – OMTL – 425
Types of Self-Employment Income

Self-employment is defined as income from which **no** taxes are withheld **prior** to the receipt of income. The following are types of self-employment enterprises:

A. Households that receive regular income from self-employment: These households receive income as profit on a regular schedule (weekly, monthly) or receive a certain amount from the business each week or month and may draw the balance of profit from the enterprise at the end of the business year. The self-employed in this category include households who receive their income from leases and/or rental property, small businesses such as grocers, or some farmers, such as dairy farmers.

B. Households in a service-type business: These households receive income on a frequent basis, yet many times the employment and receipt of income will be sporadic in nature. These households include craftsmen, certain repairmen, or franchise holders who work out of their homes.

C. Households deriving income from short-term, seasonal, self-employment: Calculation of monthly income depends on whether the self-employment provides the household's support for the entire year or if the income is only for a seasonal period of time and the household has other sources of income during the remainder of the year. Seasonal self-employment includes vendors who work only in the summer or tourist season, certain seasonal farmers or fishermen, etc.

   Farm workers for whom taxes are paid by the employer are considered self-employed. If the employer pays the farm worker's taxes at the end of the year, contact the employer to determine what the future payment arrangement will be. If the employer is going to pay the taxes on an ongoing basis, the taxes are included in the gross income and annualized with all other self-employment income. If the tax payment is paid one time only, consider the payment a resource in the month of receipt.

D. Cash-crop farmers: Households that receive their annual income from self-employment in a short period of time and who must control their expenditures so that these funds cover their expenses for the next 12 months. Included in this category are cash-crop farmers and some seasonal farmers, where the seasonal income is the household's primary support for the year. Cash crops include tobacco pounds, which are sold, not rented or leased.

E. For farmers receiving recurring annual Tobacco Settlement Agreement payments, consider the income as follows:

   1. Prorate Tobacco Settlement payments over a 12-month period for the following SNAP benefits recipients.

a. Households actively engaged in farming either as owners or tenants, who are considered self-employed. See MS 5220.

b. Households that previously farmed tobacco and are leasing their land to others, who are also considered self-employed. See MS 5220.

2. Count the payments in their entirety in the month received or average the payment over the period of time the income is intended to cover for households that do not own the land and are leasing their quotas to third parties to grow tobacco. This type of arrangement is not considered self-employment. Enter this income as Other Unearned Income and give the recipient the option of selecting the budgeting process that is to the household's advantage.

The SNAP household is responsible for providing verification of the payment amount and how often the payment will be received. Applications for the Tobacco Settlement payments can be made with the Kentucky Department of Agriculture. If recipients have questions about the payments, advise them to contact the Kentucky Department of Agriculture.

F. Households whose earnings are from irregular sources such as day labor, odd job income from yard work, small painting and carpentry jobs, selling scrap paper and metal, and selling blood or plasma. The employers change daily, and cash payments are usually received. These types of households do not have their income annualized.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5310 – R. 8/1/10 – OMTL – 368
Special Considerations

Give special consideration to the following types of income:

A. **Income from Rental Property:** Consider income derived from rental property as earned for the earned income deduction only if a member of the household is actively engaged in the management of the property at least an average of 20 hours per week. If the 20 hours per week are not met, the net income is considered unearned. Whether the income is considered earned or unearned, exclude the cost of doing business.

B. **Capital Gains:** Calculate the proceeds from the sale of capital goods or equipment as a capital gain. Even if only 50 percent of the proceeds from the sale of capital goods or equipment is taxed for Federal income tax purposes, count the full amount of the capital gain as income. For those households whose self-employment income is not averaged but is instead calculated on an anticipated basis, any capital gains the household anticipates receiving in the next 12 months are added starting with the date the application is filed, and this amount is divided by 12. This amount is used in successive certification periods during the next 12 months; however, if the anticipated amount of capital gains changes, re-average the monthly amount over this 12-month period. Add the anticipated monthly amount of capital gains to the anticipated monthly self-employment income and subtract the cost of producing the self-employment income. The cost of producing the self-employment income is calculated by anticipating the monthly allowable costs of producing the self-employment income. Depreciation is not allowed as a cost of doing business.

   Include tobacco pounds which are bought (not rented or leased) and can be resold without selling the land as a capital asset.

C. **S Corporation:** Any "distributions" that the household receives from the corporation must be entered as self-employment earned income to allow the 2 percent earned income deduction only. Although entered as self-employment, this is not considered self-employment. No other expenses should be entered. Distributions are most often reflected on the individual income tax return line, which includes Rental real estate, royalties, partnerships, S corporations, trusts, etc.

   Any "dividends" that the household receives from the corporation are considered unearned income. Dividends are most often reflected on the individual income tax return line, which includes Ordinary/qualified dividends.

   Any "wages" (in which taxes are withheld) that the household receives from the corporation are entered as earned income. Wages are most often reflected on the individual income tax return, which includes Wages, salaries, tips, etc.

D. For farmers receiving recurring annual Tobacco Settlement Agreement payments, prorate the income over a 12-month period. See MS 5300, D.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)

MS 5315 – R. 8/1/10 – OMTL - 368
Boarders

The income from a boarder includes all direct payments to the household for room and meals, including contributions to the household's shelter expenses. Shelter expenses paid directly by a boarder to someone outside the household are not counted as income to the household.

If the household operates a commercial boarding house, exclude the household's actual allowable cost of doing business. If the household does not operate a commercial boarding house, exclude that portion of the boarder payment that is the cost of doing business. The cost of doing business is equal to either of the following procedures, provided the amount allowed as the cost of doing business does not exceed the payment the household receives from the boarder for lodging and meals:

A. The full value of the Thrifty Food Plan (maximum allotment) for a household size that is equal to the number of boarders; or

B. The actual documented cost of providing room and meals if the actual cost exceeds the appropriate Thrifty Food Plan (maximum allotment). If actual costs are used, only separate and identifiable costs of providing room and meals to boarders are excluded.

Add the net income from self-employment to other earned income and apply the earned income deduction to the total. Shelter costs the household actually incurs, even if the boarder contributes to the household for part of the household's shelter expenses, are computed to determine if the household will receive a shelter deduction. However, any shelter expenses paid directly by the boarder to a third party, such as the landlord or utility company, are excluded as vendor payments and are not allowed as a deductible expense.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5320 - R. 3/1/16 – OMTL - 496
Business Expenses

Business expenses are the portion of the income that represents the household's cost of doing business. Some are deducted from gross income. If an income tax return is provided as verification, only the Schedule C portion from the most recent income tax return is sufficient to verify self-employment gross income and business expenses. Enter each business expense into the system in the appropriate field. Expenses without a designated field are to be entered under "Other Expenses".

A. The following are deductible expenses:

1. Wages, if paid to a non-household member;

2. Livestock or raw materials;

3. Rent of property or equipment;

4. Seed, fertilizer, and feed costs;

5. Utilities, maintenance costs, and repairs to income-producing properties;

6. Interest paid to purchase income-producing property;

7. Insurance premiums;

8. Taxes paid on income-producing property;

9. Mileage-if the individual uses their private vehicle in the performance of the self-employment enterprise, other than to and from the self-employment site, if other than where the individual lives. If the individual files a tax return, the amount on the tax return is used. If they do not file a tax return, use the Internal Revenue Service (IRS) business mileage rate for the time period the expense is claimed.

10. Tax preparation, professional or legal fees;

11. The Child Adult Care Food Program (CACFP) meal rate is used to calculate the cost of doing business for child day care;

12. Any costs allowed by the Internal Revenue Service and not listed in item B below;

13. Payments on the principal of the purchase price of income-producing real estate and capital assets, including purchased tobacco pounds, equipment, machinery, and other durable goods;

14. A household that operates a self-employment enterprise from home must be given the **option** of having shelter and/or utility expenses treated as a business expense or a shelter deduction. If the household chooses to have

the costs considered as a business expense, allow the deduction from the self-employment income, and do not allow shelter deductions. Receipt of the Low Income Home Energy Assistance Program (LIHEAP) does not override the individual's option.

Document the case sufficiently to indicate all options were explained to the household and the option(s) chosen; and

15. The costs associated with attracting customers, such as advertising, meals, and promotional activities, travel, and expenses required for work and repairs to income-producing properties, are allowable expenses. (For example, taking a potential customer out for a business dinner is an allowable expense.)

B. The following items are not allowable costs:

1. Net losses from previous periods;

2. Losses from a different self-employment enterprise, whether or not that enterprise is still in existence, except for certain farm losses;

3. Work expenses of household members, which include federal, state, and local income taxes, money set aside for retirement purposes, and other work-related personal expenses such as transportation to and from work. Costs whose purpose is for amusement, social activities, and related costs, such as meals, beverages, lodgings, rentals, transportation, and gratuities. These expenses are accounted for by the 20 percent earned income deduction. For example, going out to dinner while away on business is not an allowable cost.

4. Depreciation/depletion; and

5. Charitable contributions.

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 5330 – R. 8/31/26 – OMTL – 705
Budgeting – Non-Farm Income

Self-Employment Non-farm Income: Determine non-farm self-employment income in the following manner. If an income tax return is provided as verification, **only the Schedule C portion** from the most recent income tax return is sufficient to verify self-employment gross income and business expenses.

[If the self-employment activity has been in operation for at least 12 months, use the individual's Schedule C portion from their latest tax return (if filed and representative of the ongoing income) or the individual's business records for the last year to prorate the income over 12 months. Whenever records or receipts other than tax returns are used, document the reason the tax return was not used, and document in detail the records or receipts that were used to determine countable income.

If the self-employment activity has been in operation for less than 12 months, prorate the income by dividing by the number of months the activity has been in operation.

Households that report weekly payments of self-employment will have their monthly income determined by anticipating the monthly self-employment income. Compute the anticipated monthly income by using the actual income received by the household. Use the household's available self-employment income information (such as household records or an employer statement) to arrive at a monthly amount. Advise the household to keep records of self-employment income so an accurate determination can be made. Recalculate the self-employment income at the next recertification.

Note: Do not convert, as self-employment is budgeted based on actual income and prorated over the certification period.**]**

If the prorated income does not accurately reflect the household's actual circumstances due to a substantial increase or decrease in business due to unusual seasonal changes or other changes, base the amount of self-employment income on anticipated earnings that are representative of the ongoing situation. Use the individual’s records or a written statement of anticipated earnings in this situation. The anticipated earnings must be for an amount of no less than a period of a month. For example, the individual started babysitting and is paid $125 per week. The individual must anticipate and verify a monthly amount instead of a weekly amount.

A. Income is for a Year. Self-employment income, which represents all or a portion of a household's annual support, is annualized over 12 months, even if the income is received in only a short period of time. This self-employment income is annualized even if the household receives income from other sources in addition to self-employment.

B. Self-Employment Income is Received Monthly. Self-employment income, which is received every month, but which represents a household's annual support, is prorated over 12 months.

For households that receive Tobacco Settlement Agreement payments, count the payments in their entirety in the month received, or average the payment over the time period the income is intended to cover for households that do not own the land and are merely leasing their quotas to third parties to grow tobacco. This type of arrangement is not considered self-employment. Enter this income as unearned income and give the recipient the option of selecting the budgeting process that is to the household's advantage.

The SNAP household is responsible for providing verification of the payment amount and how often the payment will be received. Application for the Tobacco Settlement payments can be made with the Kentucky Department of Agriculture. If recipients have questions about the payments, advise them to contact the Kentucky Department of Agriculture.

C. Seasonal Self-Employment Income. Self-employment income, which is intended to meet the household's needs for only part of the year, is averaged over the period of time the income is intended to cover. For example, self-employed vendors who work only in the summer and supplement their income from other sources during the balance of the year have their self-employment income prorated over the summer months rather than 12 months.

D. New Business. If a household's self-employment enterprise has been in existence for less than a year, the income from that self-employment enterprise is prorated over the period of time the business has been in operation.

Example 1: The individual reports they started a babysitting service on November 1, 2025. They applied for SNAP on January 1, 2026. They charge customers $125.00 per week; the individual has records to verify two months of payments, November and December. Enter the income dates as November 1, 2025, through December 31, 2025, on the first self-employment screen. If the individual states November and December income is not representative of the household's ongoing self-employment income, use the customer's written statement and available records to determine the best estimate of the monthly income.

Example 2: The individual applies on December 1st for SNAP and has only one month of income verification. Determine the average monthly income by using the individual's written statement. In this situation, the individual stated they made $200 in November, and that is what they anticipate making each month. Enter the income dates as November 1st through November 30th on the first self-employment screen.

E. End of Self-Employment Activity:

When an individual's self-employment activity has ended, ask them to provide a written statement detailing:

the current month's gross income and expenses, and enter the end date of the self-employment.

If the end date is in the current month, but the last day of receipt of income is in the next month, request the client provide verification of the total income for the last month of receipt in addition to the written statement. The total income for the last month of receipt can only be verified after it is received by the client. Update the self-employment income with the current month's gross income and expenses, and enter the end date of the self-employment.

If the end date AND the last receipt of income were in a previous month, have the client provide the written statement as detailed above. Update the self-employment income with the end date of the self-employment.]

If the self-employment has not been in existence long enough to receive income, the individual must provide an estimate.

DOCUMENT the case record thoroughly of the actions taken to determine the self-employment income.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5340 – R. 10/1/15 – OMTL – 491
Budgeting – Farm Income

Self-Employment Farm Income: Determine farm self-employment income in the following manner. If an income tax return is provided as verification, only the Schedule F portion from the most recent income tax return is sufficient to verify self-employment farm income and business expenses.

If the prorated income as determined below does not accurately reflect the household's actual circumstances because the household has experienced a substantial increase or decrease in income due to unusual seasonal changes or other changes, base the amount of the farm income on anticipated earnings that are representative of the ongoing situation.

A. Farm income, which represents all or a portion of the household's yearly income, is averaged over the 12-month calendar year it is received. The 12-month period begins with the month of January. To determine the amount of farm income, use the Schedule F from the most recent federal income tax return covering the 12-month calendar year period. If the household does not file a return, use the household's receipts and personal records to establish the annual income and deductions. Whenever records and receipts other than tax returns are used, document the reason the tax return was not used, and document in detail the records and receipts that were used to determine countable income.

   If it is verified that the household received all of its income from the sale of crops in the current year rather than the past calendar year, count the income as though it were received in the same calendar year as the crop(s) were produced.

B. Farm Income is Received Monthly. Farm income, which is received every month but which represents a household's annual support, is prorated over a 12-month period.

C. New Farm. If a household's farm enterprise has been in existence for less than a year, the income from that farm enterprise is prorated over the period of time the farm has been in operation and the monthly amount projected for the coming year. However, if the farm has been in operation for such a short time that there is insufficient information to make a reasonable projection, the household is certified for less than a year until the farm has been in operation long enough to base a longer projection.

D. Annually recurring Tobacco Settlement Agreement Payments. Count annually paid Tobacco Settlement payments as income as follows:

1. Prorate Tobacco Settlement payments over a 12-month period for the following food benefits recipients:

    a. Households actively engaged in farming either as owners or tenants, who are considered self-employed. See MS 5220.

    b. Households that previously farmed tobacco and are leasing their land to others, who are also considered self-employed. See MS 5220.

2. Count the payments in their entirety in the month received or average the payment over the period of time the income is intended to cover for households that do not own the land and are merely leasing their quotas to third parties to grow tobacco. This type of arrangement is not considered self-employment. Give the recipient the option of selecting the budgeting process that is to the household's advantage.

The food benefits household is responsible for providing verification of the payment amount and how often the payment will be received. Application for the Tobacco Settlement payments can be made with the Kentucky Department of Agriculture. If recipients have questions about the payments, advise them to contact the Kentucky Department of Agriculture.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5350 - R. 10/1/15 – OMTL – 491
Farm Income Net Loss

Use farm self-employment net loss to reduce other countable income in the household only when the household receives or anticipates receiving annual gross farm income of $1,000 or more. Use the same verification used to calculate the gross income from the farm enterprise to determine the net loss, e.g., Schedule F from the most recent income tax return. Prorate the loss over the year in the same manner as net farm income.

Determine the household's countable self-employment income as follows:

A. If there is other non-farm self-employment income:

1. Compute countable non-farm self-employment income;
2. Subtract the prorated farm loss from the remainder;
3. Allow the 20 percent work expense.

B. If there is a farm loss remaining after this offsetting:

1. Total any other earned income (**not** self-employment);
2. Allow the 20 percent work expense.
3. Subtract the remaining farm loss from this figure; and

C. If there is still a farm loss remaining after this offsetting:

1. Total any unearned income; and
2. Subtract the remaining farm loss from this figure.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5400 – R. 10/1/25 – OMTL – 681
Deductions – General

Deductions from income are allowed only for specific expenses.

A. The following deductions are allowed:

1. Earned income deduction of 20 percent of the gross countable earned income;

2. Standard deduction of:

   a. $209 for a household size up to three

   b. $223 for a household size of four

   c. $261 for a household size of five

   d. $299 for a household size of six or more.

   For purposes of determining the standard deduction amount, the household size is the number of active eligible members;

3. Medical deductions of any expenses totaling more than $35 for elderly or disabled members;

   a. If verified medical expenses are less than or equal to $35, then no Standard Medical Deduction (SMD) is allowed.

   b. If verified medical expenses are more than $35 but less than or equal to $172, the SMD of $137 is applied ($172-$35=$137)

   c. If verified medical expenses are greater than $172, the actual medical expense, minus $35, is applied.

   d. If multiple individuals in the household are eligible to receive a medical deduction and have verified expenses more than $35, the system will apply the SMD to the household and not to each member.

4. Dependent care deduction;

5. Child support deduction;

6. Shelter costs in excess of 50 percent of the household's income after all other deductions, not to exceed the maximum shelter deduction of $744, unless the household contains an elderly or disabled member. Households containing an elderly or disabled member receive a shelter deduction for the total monthly shelter costs that exceed 50 percent of the household's monthly income after all other appropriate deductions are given; and

7. Homeless shelter deduction of $199 in lieu of shelter deductions.

B. The following are nondeductible expenses:

1. Any portion of an expense which is to be or has been reimbursed;

2. Any portion of an expense that is paid on behalf of the household by a third party as a vendor payment;

3. Any expenses for services rendered by a household member, such as dependent care or caretaker services. (For example, an elderly grandmother pays her granddaughter to take care of her, and the granddaughter is a member of the grandmother's case. This is nondeductible);

4. Any medical expenses for household members who are not elderly or disabled;

5. Any portion of a bill carried forward from past billing periods, even if it is included in the most recent billing, and it is paid by the household; and

6. Mandatory Severance tax for the extraction of Natural Resources from land.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5410 - R. 8/01/2025 – OMTL - 677
Members Eligible for Medical Deduction

Allow a deduction for medical expenses for any household member who is elderly or disabled as defined in MS 2000. Also, allow a deduction for a previous household member, if the current household is responsible for the medical bills and the household is eligible for a medical deduction. (Example: While receiving food benefits for self and spouse, the spouse passes away. The eligible recipient is responsible for any remaining bills for the deceased spouse and verifies they are being billed). Do not allow a deduction if the disabled member's Supplemental Security Income (SSI) or Retirement and Survivors Disability Income (RSDI) is suspended due to drug addiction or alcoholism, unless the member qualifies for the deduction based on another reason.

If a person turns age 60 during the initial month of certification, allow any medical and shelter deductions beginning that month. If the person turns age 60 later in the certification period, handle as a case change. For persons under age 60, certified for but not yet receiving disability benefits or persons currently having their entire benefit check recouped to recover a prior overpayment, consider these individuals as disabled and allow any medical deductions.

Persons receiving emergency SSI benefits based on presumptive eligibility may also be eligible for the deduction. The following are programs currently available for potentially eligible SSI recipients:

A. **SSI Presumptive Disability Payments:** Pays regular benefits for up to six months to persons who will likely meet SSI disability criteria. Persons in this category are considered SSI eligible by the Social Security Administration and receive a federal SSI check for the amount of the entitlement. Persons receiving this payment are eligible for the special medical/shelter deduction. If the SSI application is denied and the presumptive check is terminated, remove any considered medical expenses.

B. **SSI Emergency Advance Payments:** Provide a single payment to applicants who appear to meet the eligibility criteria and are considered in need of immediate assistance. Persons in this category are considered SSI eligible by SSA. Anyone receiving this payment is eligible for the special medical/shelter deduction each month until a final SSI determination is made. Once approved for SSI, the advance payment will be deducted from the current monthly benefits in up to 6 monthly installments.

C. **State Interim Assistance Payments**: SSI applicant households may receive temporary general assistance payments issued by a public agency pending a final determination of SSI eligibility. If such persons are later determined eligible for SSI, the agency receives a retroactive benefit check as repayment for benefits provided. These households are not considered SSI eligible during the period they receive general assistance. Persons receiving this type of payment are **not** eligible for the special medical/shelter deduction.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5420 - R. 8/01/25 – OMTL - 677
Medical Deductions – General

Handle allowable medical deductions as follows: If paid, the expense and, if applicable, the reimbursement **must** have been reported timely:

A. Determine if the reported medical expense is currently being billed and the reimbursement status of the expense.

Consider only the existing balance of a currently billed expense. If the expense is no longer being billed, do not allow the expense.

1. If verified medical expenses are less than or equal to $35, then no medical deduction is allowed.
2. If verified medical expenses are more than $35 but less than or equal to $172, the Standard Medical Deduction (SMD) of $137(the current average medical expense for the state) is applied ($172-$35=$137).
3. If verified medical expenses are greater than $172, the actual medical expense, minus $35, is applied.

If multiple individuals have verified medical expenses more than $35, the system shall apply the SMD to the household.

Do not consider any medical expense reported timely, which will be reimbursed or reimbursement is undetermined, until the reimbursement is verified or denied and the non-reimbursable amount is determined. If the reimbursement status cannot be determined, document the case record accordingly.

Refer to Items G. and H. when medical expenses are reported during the certification period.

B. Determine if the member eligible for a medical deduction has medical insurance or is included in a Medicaid case.

Medical insurance or a Medicaid case indicates the possibility of reimbursement, which must be resolved prior to consideration of the expense.

If an SSI individual has prescription medicine expenses not covered by Medicaid, advise the individual to contact the prescribing physician and ask about preauthorization by the Medicaid program.

C. Determine if any currently reported one-time only medical expenses were considered during any previous certification period. Examples of one-time expenses are hospital bills, ambulance bills, laboratory fees, non-continuing doctor visits and/or prescription costs such as treatment for flu, etc.

Once a one-time only expense has been considered during a certification period, do not consider the same expense in succeeding periods. However, if the household elected to receive a deduction for each month an installment payment is due, the deduction may span more than one certification period.

For one-time only, non-reimbursable expenses, the household may elect to receive the entire deduction at one time, have it averaged over the certification period, or receive a deduction for each month an installment payment is due. Monthly installment agreements need not be formal but are verified if questionable. Document the method chosen by the household.

For one-time only, non-reimbursable expenses reported during the last month of the certification period, the household may elect to have the entire deduction considered in the first month of the succeeding certification period, have it averaged over the succeeding certification period, or receive a deduction for each month an installment payment is due. Document the method chosen by the household.

A food benefits household receiving a medical deduction for a one-time only expense continues to receive a deduction as scheduled even if the eligible member dies.

D. For recurring medical expenses, such as attendant care or a regular bill for prescriptions, consider the non-reimbursable expense only in the month the expense is billed. Do not allow recurring medical expenses, which are past due or brought forward from prior billing periods.

E. For fluctuating medical expenses, such as a prescription that fluctuates in cost or frequency of use, obtain verification of all non-reimbursable expenses for the last two months, which are expected to continue, and consider the average monthly amount. Fluctuating expenses do not include one-time bills that are **not** expected to continue. If the last two months of fluctuating medical expenses do not adequately represent the anticipated expenses for the certification period, more or less than two months of fluctuating expenses can be considered.

F. For medical expenses paid by a credit card, allow only the expense and not the interest. Consider the expense to have occurred when the bill is received. Allow payments made on a loan when the loan is used to pay a one-time only medical expense. Do not allow the interest as part of the expense.

G. For allowable medical insurance charges, only the amount billed for the actual premium can be considered. Any surcharge or billing/handling fee in excess of the premium cannot be considered as part of the deduction.

Example: The household is billed annually for their medical insurance premiums. However, the household chooses to make monthly payments to the company. The company charges an additional fee for the monthly billing statements. Only the annual amount billed, divided by twelve, can be considered as the monthly amount for deduction purposes.

H. Medical expenses must be reported at application, reapplication, and recertification according to the reporting requirements in MS 6735. If the expense is not reported timely, no deduction is allowed.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5430 - R. 6/1/19 – OMTL - 548
Allowable Medical Deductions

The following are allowable medical expenses:

A. Medical and dental care including psychotherapy and rehabilitation services provided by a licensed practitioner authorized by State law or other qualified health professional;

B. Hospitalization or out-patient treatment, nursing care and nursing home care including payments by the household for an individual who was a household member immediately prior to entering a hospital or nursing home;

C. Prescription drugs prescribed by a licensed practitioner and other over-the-counter medication, including insulin, approved by a licensed practitioner or other qualified health professional, and the 0.25 cent revenue tax pharmacies charge per prescription.

D. Medical supplies, sick-room equipment including rental or other prescribed equipment and the cost of repairs necessary to keep the equipment in working condition. Authorization by a licensed practitioner or other qualified health professional is sufficient verification;

E. Health and hospitalization insurance policy premiums (without surcharges), for the elderly or disabled person. Medicare premiums paid by the eligible household related to coverage under Title XVIII of the Social Security Act. Supplemental Medical Insurance (SMI) premiums paid by the Medicaid Program, including those for Qualified Medicare Beneficiaries (QMB), Qualified Disabled Working Individuals (QDWI), or Specified Low-Income Medicare Beneficiaries (SLMB) eligible individuals, are not an allowable deduction.

F. Cancer insurance policy premiums (without surcharges) for cancer policies that relate to health and hospitalization. Cancer policies that pay the person money because they have been diagnosed with cancer are not an allowable deduction.

G. Any cost-sharing or spend down expenses incurred by Medicaid recipients. For spend down expenses, review the expense to determine if the expense was previously used as a deduction for SNAP benefits;

H. Dentures, hearing aids and prosthetics;

I. The cost of securing and maintaining "service animals," specifically service dogs or miniature horses trained to do work or perform tasks for persons with disabilities, including the cost of food and veterinary bills. Before allowing the medical deduction, verification that the animal is certified as a “service animal” and trained to assist with medical needs must be provided;

J. Eyeglasses and contact lenses prescribed by a physician skilled in eye disease or by an optometrist;

K. Telephone charges for telephonic aids, such as amplifiers and warning signals, for disabled persons and costs of teletypewriter equipment for the deaf;

L. Reasonable cost of transportation and lodging to obtain medical treatment or services. This includes trips to a doctor, dentist, or other health professional as well as trips to fill prescriptions for medicine, dentures, hearing aids, eyeglasses, sickroom equipment, etc. Reasonable transportation cost is the current business Standard Federal Mileage Rate when a personal vehicle is used, or the actual verified costs. Client statement is acceptable as verification of mileage; however, when the individual states they have mileage expenses, compare the stated total to a map program, such as MapQuest, to ensure the individual's stated total is reasonable. Have the individual provide a signed and dated statement detailing the total number of miles they are claiming and the period of time they cover, i.e., weekly, monthly, or the entire period. Lodging costs are the actual verified costs;

M. Maintaining an attendant, homemaker, home health aide, childcare services or housekeeper necessary due to age, infirmity or illness. State and Federal withholding taxes paid by the disabled individual for attendant care payment, even if paid with other monies received by the disabled individual, are allowable medical deductions. In addition, deduct an amount equal to the one-person benefit allotment if the household furnishes the majority of the attendant's meals. Deduct the amount equal to the benefit allotment in effect at the time of initial certification and/or recertification. If the household has attendant care expenses which qualify under both the medical deduction and dependent care deduction, treat the cost as a medical expense.

N. Reasonable cost for building a wheelchair ramp. A written statement from a licensed practitioner or medical doctor verifying the necessity of the ramp is required prior to allowing the deduction.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5440 – R. 8/1/14 – OMTL – 471
Disallowable Medical Deductions

The following medical expenses are disallowed:

A. The cost of health and accident policies, such as those payable in lump sum settlements for death or dismemberment, or income maintenance policies, such as those that continue mortgage or loan payments while the beneficiary is disabled.

B. Any surcharge or billing fee added to the monthly insurance premium.

C. The cost of membership by an insurance company which allows for reduced cost of certain medical expenses.

D. Premium payments on cancer policies that pay the owner of the policy upon diagnosis of cancer.

E. Expenses of spouses or other persons receiving benefits as a dependent of the Supplemental Security Income (SSI) or disability recipient.

F. Expenses for which the household will be reimbursed or for which an insurance company or government program will directly pay. Consider the nonreimbursable portion at the time the amount of reimbursement is verified or when the reimbursement is denied. If the reimbursement status cannot be determined, do not consider the expense and document the case record accordingly.

   For example: A joint application is taken for SNAP and Adult Medical (MA) (Z case) on 9/17/25. The SNAP case is approved on 9/7/25. The MA case is approved for Specified Low-Income Medicare Beneficiaries (SLMB) on 10/7/25. As the Supplemental Medical Insurance (SMI) premium is reimbursable, it is not allowed as a medical deduction in the SNAP case. If the MA application is denied, a case change would be made in the SNAP case to allow the medical deduction, and a restoration would be issued if appropriate.

   Applicants approved for Qualified Medicare Beneficiaries (QMB) may be due a SNAP restoration as the SMI reimbursement is not effective until the month following the QMB application approval month.

G. Expenses incurred jointly with other household members are not allowed in their entirety. Only the eligible person's expense is deducted. If the eligible person's share cannot be identified, the expense is prorated among the members the expense covers.

H. Medical expenses billed to a SNAP benefits household but are for a nonhousehold member.

I. Items used for medical needs, such as Ensure or Boost, when purchased with SNAP benefits.

J. Food items for “special diets”, such as lean meats and fresh vegetables.

K. Monthly car payments for handicapped accessible vehicles.

L. "Companion Pets"; pets not specially trained to care for disabled persons.

M. Medical marijuana.

Volume - Supplemental Nutrition Assistance Program (SNAP)
MS 5450 – R. 8/1/25 – OMTL – 677
Dependent Care Deduction

Allow a deduction for care of a child or other dependent when such care is necessary for a household member to seek, accept, or to continue employment, training, or education preparatory to employment. The dependent care deduction also includes the expense of transporting the child to and from the care provider. Effective 10/1/08, there is no longer a limit on the allowable dependent care deduction.

A. Recipients may potentially be eligible for childcare assistance:

When childcare is paid by the Childcare Assistance Program (CCAP), do not allow a dependent care deduction for the expense covered by vendor payment to the provider. However, if the participant's expense exceeds the vendor payment, allow a deduction for the difference.

For those households who receive CCAP benefits and are required to pay a daily co-payment to the childcare provider, allow the co-payment as a childcare deduction.

Do not allow a deduction for services provided by a household member.

B. If dependent care expenses for the household are covered by an excluded reimbursement, including reimbursements under employment and training programs and the childcare disregard in Kentucky Transitional Assistance Program (KTAP) budget calculations when childcare is not paid by CCAP, only the portion which exceeds the excluded reimbursement is allowed as a dependent care deduction.

Example: A KTAP recipient with earnings receives $372 in monthly benefits because they incur a childcare expense of $100 per month and do not receive CCAP assistance. If their benefits were calculated NOT allowing the childcare expense, they would receive $317. The KTAP benefits have been "adjusted" in the amount of $55 due to childcare. The difference ($372- $317 = $55) of $55 is the "adjusted" or reimbursable amount of childcare. This amount is excluded income. The difference in the total childcare expense and the "adjusted" or reimbursable amount ($100 - $55 = $45) is $45. $45 is the amount of dependent care deduction allowed in the case.

C. Do not allow as a dependent care deduction any portion of the dependent care expense which is allowed as an educational assistance payment exclusion. For a complete overview of student financial eligibility, refer to MS 5650.

D. Because kindergarten attendance is mandatory in Kentucky for any child expecting to enter the first grade, do not allow kindergarten expenses as a dependent care expense. School attendance is required for any child over the age of five and under the age of 17; disallow school costs for these children. If childcare is provided for these children before or after school hours, allow that expense as a deduction.

E. Allow the actual cost of boarding a dependent outside the home when the boarding of that dependent enables a household member to accept or to continue employment, training or education which is preparatory to employment.

F. If the individual is claiming a transportation cost when taking dependents to and from a care provider, allow the expense as follows:

1. If they are using a private vehicle, client statement is acceptable for the actual expense; however, point-to-point miles must be verified by a web-based mileage calculator. Those miles are then converted to a monthly amount and then multiplied by the current Standard Federal Mileage Rate. Further verification is not required unless there is a reason to doubt.

2. If they are using public transportation, expenses include the actual cost of service, and verification must be provided.

3. If the expense is billed by the provider (non-household member), allow the actual cost as billed.

   Note: For a dependent care expense to qualify as an allowable deduction, the expense must be necessary for a household member to seek employment, accept or continue employment, or attend school or training.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5470 - R. 10/1/14 – OMTL - 475
Allowable Shelter Deductions

Allow shelter expenses as billed or otherwise become due. Shelter expenses include rent or mortgage, electricity, fuel oil, coal, telephone, sewer, gas (natural or propane), wood, water, and garbage. If a household is billed for mortgage, rent, or utilities, the amount is an allowable deduction regardless of whether it is paid in advance. During the interview, ask the household how much they pay out-of-pocket for the stated expense.

Shelter expenses must be verified at application and when a household reports a change in their physical address or a change in shelter expenses. Accept any form of verification of shelter expenses that the client provides, such as a mortgage contract or coupon, receipt, utility bill, or collateral contact (CC). If a CC is used, contact with the service provider is the primary source of verification. For example: If an individual is paying rent, the landlord is the provider of the service and should therefore be the verifier of the rent. The primary source of verification should always be considered first before exploring alternate sources. Refer to MS 7050 for acceptable sources of verification. If a mortgage coupon is provided that does not break down the principal, interest, taxes, and insurance, enter the entire amount as the mortgage deduction. Client statement is an acceptable source of verification **only** at recertification and **only** if the stated amount has not changed and if their physical address has not changed.

A payment made by a third party as a vendor payment (see MS 5400) is not an allowable deduction.

A. Rent, mortgage or other continuing charges in order for the household to occupy a given shelter or leading to ownership of shelter, including condominium association fees. Enter these fees in the rent/mortgage field as part of the total costs of those expenses. Allow only the following mortgage-related expenses:

1. Allow the principal and interest charged for mortgages. For home equity loans, allow only the minimum amount due.

2. Allow the deduction for an open-ended mortgage that is for, and secured by, the property wherein the household resides. Average the amount of the entire principal and interest over the certification period wherein the note becomes due.

   Example: During the January recertification, the principal and interest total $4200 per year and the payment comes due in April. Divide the total by 12 and enter $350 as the monthly mortgage amount.

3. Some lending institutions initiate "on demand" mortgage contracts, which read as though the entire amount of the loan is due upon demand. If no other arrangements are made between the customer and the lending institution, consider these as open-ended mortgages as described above.

However, in most situations, some type of separate agreement is arranged by the bank to allow monthly payments to be made.

4. Actual property taxes, not the discounted or penalty amount, including State and local assessments.

5. Insurance on the shelter structure itself, including flood and earthquake insurance. Allow state and local taxes, assessments, and the 1.8 percent state-mandated surcharge, which are added to the cost of the insurance premium as deductions. Do not allow service fees mandated by insurance companies to cover processing costs as deductions.

6. For households who pay their mortgages yearly when a crop is sold, process these cases like an open-ended mortgage.

7. Promissory note payments are not an allowable deduction unless they lead to ownership and there is a verifiable lien.

8. Subsidy recapture payments are not an allowable shelter deduction unless the household has a continuing repayment agreement with the United States Department of Agriculture (USDA)/rural Development. They must provide verification of the established payment schedule before allowing the deduction.

B. Utility expenses including fees charged by the utility provider for initial installation.

C. Charges for the repair of a home substantially damaged or destroyed due to a natural disaster, such as fire or flood, which have not or will not be reimbursed.

D. Shelter costs for an unoccupied home if the home is temporarily unoccupied because of employment or training away from home, illness, or abandonment caused by a natural disaster or casualty loss. To receive a deduction, the following criteria must be met:

1. The household must intend to return to the home;

2. The current occupants of the home, if any, must not be claiming the shelter costs for SNAP benefits purposes;

3. The home must not be leased or rented during the absence of the household; and

4. If a household has both an occupied and an unoccupied home, only one Standard Utility Allowance (SUA) can be used.

E. Any household that operates a self-employment enterprise at their home must be given the **option** of having their expenses treated as a business expense **or** a shelter deduction. If treated as a business, refer to MS 5320. During the interview, advise the household of the following:

A shelter deduction may be given if the expense covers both the recipient's home and business. If the recipient chooses to have the expense considered as a shelter deduction, a business deduction **cannot** be given.

Document cases sufficiently to indicate all options were explained to the household and the chosen option.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5480 - R. 8/1/19 – OMTL - 548
Disallowable Shelter Costs

Do not allow the following as a shelter cost:

A. Charges for one-time deposits, including security deposits on utilities;

B. Charges for upkeep and repairing natural deterioration or wear;

C. Charges for insuring furniture and personal belongings;

D. Volunteer Fire Department dues, unless a mandatory expense. This expense can be mandatory **or** optional, depending on the county; a call should be made to verify each situation;

E. Charges for optional home buyers protection plans or extended home warranties;

F. Charges for repair of the home damaged or destroyed by a natural disaster which has or will be reimbursed by a private or public relief agency, insurance company, or from any other source;

G. Charges for recoupment. If a household understates its income to the Department of Housing and Urban Development (HUD) and as a result has paid less than the appropriate rent, do not include the recoupment as part of the household's shelter costs;

H. A utility or shelter expense which is reimbursed or paid by vendor payment;

I. Charges for keeping a pet in the residence; and

J. Payments made by the household to make up for delinquent shelter payments if the deduction for the payment was previously allowed.

   Example: The household failed to pay the mortgage to the bank from July through November. The bank allows the household to pay an additional $100 per month to make up the delinquent payments effective January. The household was given a shelter deduction July through November, so the $100 is not an allowable deduction.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5485 - R. 10/1/25 – OMTL - 681
Treatment of Homeless Households with Shelter Costs

A Homeless Standard allowance is available for homeless households who incur shelter expenses, in lieu of a deduction for shelter expenses. The allowance is deducted from net income after the child support deduction and before the medical deduction, rather than appearing as a shelter deduction.

If the only utility expense incurred by a homeless household is a telephone expense, then the household is only entitled to the Telephone Standard deduction.

A. Homeless households that reasonably expect to incur a shelter expense for rent or utilities are allowed to use the Homeless Standard allowance. Households claiming shelter expenses greater than the Homeless Standard may choose to use their actual rent expense and the Standard Utility Allowance (SUA) or Basic Utility Allowance (BUA), if eligible. When a homeless household reports they are responsible for shelter expenses, Worker Portal budgets using both the Homeless Standard allowance and the allowable shelter expenses, then automatically determines which deduction to use so the household receives the higher SNAP benefit. When the Homeless Standard allowance is used, the household is not entitled to any additional shelter deduction. If Worker Portal determines the benefits to be the same with each allowance, the homeless shelter allowance will be used. Accept any form of verification the household provides, such as a receipt, collateral contact, or written statement. If the homeless household pays only one utility and chooses to take the actual utility bill as a deduction, the actual amount of the utility expense must be verified.

   Example: An individual is homeless, but a friend lets the individual stay at their house at night and requires them to pay the water bill.

B. Homeless households receiving free housing and utilities throughout the month are **not** eligible for the Homeless Standard allowance unless they state that they reasonably expect to incur a shelter cost during the calendar month.

C. The Homeless Standard allowance is $199 per month. This figure may be updated annually when the shelter cap is adjusted by the Food and Nutrition Administration (FNA).

D. For non-homeless households eligible to use the SUA who also share utility expenses with a homeless household, do the following:

   1. Allow the non-homeless household the SUA.

   2. Advise the homeless household which of the allowable deductions Worker Portal determined will benefit them the most.

      Note: If Worker Portal determines the same benefit amount when budgeting the two deductions, the Homeless Standard allowance will be used.

E. For two homeless households living together temporarily and incurring shared shelter expenses, allow each household the Homeless Standard allowance if they choose to use it. Do not pro-rate the standard between the two households.

Example: Two households share a total rent or utility payment of $100. $50 is each household's share. Each household is eligible to use the Homeless Standard allowance.

Document the case regarding the households' use of actual utility expenses or shared shelter expenses.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5490 - R. 10/1/25 – OMTL - 681
Heating And Cooling Costs - Standard Utility Allowance (SUA)

A. The SUA is a standard amount used monthly for households with utility expenses that include the cost of heating or cooling their homes. Households that incur out-of-pocket heating or cooling costs must use the SUA; they cannot use actual utility expenses. The SUA amount for all households that incur a heating or cooling cost, regardless of household size, is $388. Eligible households include:

1. Residents of rental housing who are billed for primary heating or cooling costs monthly by their landlords for actual usage as determined through individual metering;

2. Recipients who own their home and live in that home, who are billed for its primary heating or cooling costs;

3. Households that include an elderly or disabled member who is receiving **a payment greater than $20 annually**, in the current month or in the immediately preceding 12 months, in energy assistance payments made under the Low-Income Home Energy Assistance Program (LIHEAP), regardless of any change in the household's address. This includes households with an elderly or disabled member who reside in public or private housing projects and are billed separately for excess costs or whose utilities are included in their rent or mortgage payments. Households with an elderly or disabled member who receives heating or cooling assistance from the Community Action Agencies are included in this provision. Access the HEAP Master Report to verify receipt of LIHEAP;

4. Recipients who expect to incur a primary heating or cooling expense during the certification period. Future heating or cooling expenses **must** reasonably be anticipated. For example, a household may apply during the summer and have no cooling expense, but will have a heating expense in the winter;

5. Recipients where two or more households live together and share utility expenses. See MS 5500;

6. Recipients of indirect energy assistance payments, other than LIHEAP, receiving **a payment greater than $20 annually** in the current month or in the immediately preceding 12 months, who have an elderly or disabled member in the home and continue to incur out-of-pocket heating or cooling expenses during any month covered by the certification period regardless of any change in the household's address.

   Note: If the recipient states they have received payment(s) totaling greater than $20 annually and there is an elderly or disabled member in the home, request verification, such as the assistance receipt or a collateral contact to the assistance agency, before allowing the SUA deduction. The individual can choose to verify a heating/cooling expense and not verify the total amount of energy assistance payments if they prefer.

Households that receive Housing and Urban Development (HUD) or United States Department of Agriculture (USDA) Rural Development utility payments are entitled to use the SUA regardless of whether or not they incur a primary heating or cooling cost that exceeds the amount of the reimbursement; or

7. Recipients residing in public housing who are billed for or anticipate incurring an out-of-pocket expense for excess utility charges for heating or cooling expenses do not have to incur a cost first. If the household states they do not expect to incur an out-of-pocket expense for excess utility charges, then they are not eligible to receive the deduction.

B. Households who are **not** eligible to use the SUA may be entitled to use the Basic Utility Allowance (BUA). These households include:

1. Residents in a public or private housing project who are billed **only** for excess utility usage for two non-heating/non-cooling expenses.

   However, if the resident is in receipt of LIHEAP benefits and the household contains an elderly or disabled member, they are entitled to and must use the SUA;

2. Recipients who are billed only for utility expenses other than heating or cooling expenses. The household is not eligible to use the SUA, except when two or more households live together, share utility expenses, and one of the households is entitled to use the SUA; or

3. Recipients who are billed only for a supplementary heating expense. For example, a household's apartment has gas as its primary heat source, and this expense is included in the rent, but the household is billed for electricity to run a blower fan on the furnace. The household is **not** entitled to use the SUA.

C. If the household changes residences within the certification period, entitlement to the SUA must be re-evaluated. The household's entitlement to the SUA is evaluated as follows:

1. If the household is billed for its primary heating or cooling costs separate from its rent or mortgage payments at the new address, the household is entitled to and must use the SUA;

2. If the household includes an elderly or disabled member and has received LIHEAP benefits or been approved to receive LIHEAP benefits) regardless of any change in the household's address that is **greater than $20 annually** in the current month or in the immediately preceding 12 months, as verified by the HEAP Master Report, the household is entitled to the SUA; or

3. If the household is billed only for excess non-heating/non-cooling expenses, or their utilities are included in the rent or mortgage payments, and the household has not applied or been approved for LIHEAP benefits at the new address, the household is not entitled to the SUA.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5498 - R. 10/1/25 – OMTL - 681
Non-Heating and Non-Cooling Costs - Basic Utility Allowance (BUA)

The BUA is a standard utility amount budgeted monthly for households that **do not** incur heating or cooling costs. To be eligible for the BUA, the household must be billed for at least two of the following utility expenses:

1. Electricity (non-heating/non-cooling);
2. Water;
3. Garbage or trash;
4. Cooking fuel;
5. Telephone;
6. Excess utility cost for non-heating/non-cooling expenses for households that live in public or private housing; or
7. Sewage

B. The BUA amount for ALL households is $331.

C. Households entitled to the BUA must use the BUA and are not allowed to use actual utility expenses.

D. Households using the BUA are not allowed a separate utility deduction for a telephone.

E. Households whose only utility expense is for a telephone are only allowed the telephone standard of $64.

F. If a household reports a change of address, entitlement to the BUA ends and should be re-evaluated.

Refer to MS 6765 for further procedures regarding acting on a reported change of address.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5500 - R. 10/1/25 – OMTL - 681
Treatment of Utility Expenses

A. Households who are eligible to use the Standard Utility Allowance (SUA) or Basic Utility Allowance (BUA) **must** use the appropriate standard. Only households that are not entitled to use the SUA or BUA are allowed to use their actual utility expense.

In the following instances, the household may be required to switch between standards or use their actual utility expenses.

1. The household moves from a residence, which qualifies it for use of the SUA, into a residence, which qualifies it for the BUA;

2. The household moves from a residence, which qualifies it for use of the BUA, into a residence, which qualifies it for use of the SUA;

3. The household moves from a residence, which qualifies it for the SUA or BUA, to a residence, which qualifies it for the actual utility expense; or

   Example: When a household moves from a residence where they were eligible for the SUA or BUA to a residence where they are billed for garbage only.

4. The household includes an elderly or disabled member and is approved for the Low-Income Home Energy Assistance Program (LIHEAP), which qualifies it for use of the SUA, if the SUA is not currently being used in the SNAP case.

B. If a household is eligible to use the SUA, apply the policy as follows:

1. Question SNAP households that include an elderly or disabled member regarding receipt or approval of LIHEAP benefits resulting in a payment greater than $20 in the prior 12 months at application, reapplication, recertification, and change of physical address.

2. If the household indicates they are in receipt of LIHEAP benefits or have been approved for LIHEAP at their current address, verify by using the HEAP MASTER list, explain SUA policy, and give the recipient the SUA.

3. The deduction is allowed through their certification period beginning the first month following the month of LIHEAP approval.

4. Review entitlement to the SUA at every recertification/reapplication.

   If a household has both an occupied and an unoccupied home, only one SUA can be used.

C. The HEAP Master list provides a statewide listing of all individuals who were approved for LIHEAP during the prior 12 months.

The report contains the applicant's last name, first name, Social Security Number (SSN), county of residence, and month/year of the approval.

D. If a household is only responsible for a telephone expense, allow the household the telephone standard of $64 regardless of the actual cost (this includes prepaid cell phones).

E. If two or more households live in the same residence and share utility expenses, do the following regardless of whether each household participates in SNAP:

1. Each household is **eligible** for and must use the SUA, if **either** of the households is billed for heating/cooling costs. If neither household is billed for heating/cooling costs but billed for two allowable non-heating/non-cooling costs, the household is eligible for and must use the BUA.

2. Additional applicant households living in the same residence **must** use the type of expense used by the first household, as long as they contribute to the utility expenses.

3. If the household is entitled to use actual expenses, allow the household the actual amount of the utility expense for which it was responsible, if verified.

F. If two or more households live in the same residence and separate the cost of utilities, then determine the utility deduction according to the bills each household pays.

Example: Two roommates maintain a separate household. Roommate A states he pays the phone and water bill, and roommate B pays the utility bill, which includes heating and cooling. Roommate A would receive the BUA, and roommate B would receive the SUA.

G. Households that live in separate residences but share the same utility meter device may both be allowed the SUA. The SUA is not prorated, and each household is allowed the full SUA for its respective household size.

H. If a household includes an elderly or disabled member and states no out-of-pocket heating/cooling costs, inquire the HEAP Master list to determine if the household may be allowed SUA.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5510 - R. 9/18/26 – OMTL – 709
Child Support Deduction

[During application, recertification, and when additional members are added to the SNAP household, allow a child support deduction for household members who are **legally obligated** to pay and are verified by either the Department for Child Support Services (DCSS) or the original court order, as paying child support for an individual living outside the household. The deduction is based on the amount of legally obligated child support the household pays, or expects to pay, during the certification period. Do not allow more than the legally obligated amount unless the excess is toward a verified arrearage. The child support payments may be paid directly to the custodial parent or other caretaker, or paid through a third party, such as a court. Alimony or spousal support payments, or payments made in accordance with a property settlement, are not allowable as part of the child support deduction.

Example: An individual is court-ordered to pay $550 in current child support obligation and $50 in arrearages, a total of $600 per month. An application is taken in April; January, February, and March are considered when reviewing the prior three months payments through DCSS. The individual paid an average of $650 in the prior three months. In this situation, no more than the $600 court-ordered obligation (current and arrearage) is allowed as a deduction, based on the verified payments and court-ordered amount.**]**

There are situations in which an obligation to pay child support may continue even if the child, or the child and the other parent, reside in the same household as the individual paying the child support. This may occur if the child moves back and forth between parents or if the payer has a continuing obligation to make arrearage payments through DCSS after the family is reunited. Do not allow a child support deduction if the payments are made to a household member. Payments to an individual or agency outside the household are allowable, even if the child for whom the support is paid is a household member.

Allow a deduction only for payments that are paid or anticipated to be paid on a continuing basis. Allow a deduction for amounts collected from income, such as Unemployment Insurance Benefit (UIB) intercepts, salary garnishments, and income tax refund intercepts. For child support collected through tax intercept, allow the household the option of using it as a one-time deduction or having it averaged over the certification period.

If a household member reports paying legally obligated child support to someone outside the household, the system forwards that information to DCSS. DCSS then matches it against its files and sends information back to the system.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5520 - R. 4/1/2021 – OMTL - 574
Special Considerations for Specific Households

The deductions of the following individuals are given special consideration:

A. Members disqualified for intentional program violation (IPV), fleeing felons, members disqualified for failure to comply with a work requirement (including Kentucky Works Program (KWP) sanctions), or members who refuse to work register. The entire household's allowable deductions, including the excluded member's deductions, are considered. Allow only one 20 percent earned income deduction from the household's gross countable income, which includes the gross earned income of the excluded individual. If the disqualified member is paying legally obligated child support to a non-household member, allow the entire child support deduction for the household.

B. Ineligible Immigrants, ineligible Able Bodied Adults Without Dependents (ABAWD), members excluded for failure or refusal to obtain or provide a Social Security Number (SSN), and members excluded for failure or refusal to sign the citizenship/immigration status declaration. (Providing an SSN is voluntary; however, failure to provide an SSN will result in the denial of food benefits to the individual failing to provide an SSN. Staff should advise applicants of this provision at initial certification and member add. Household members denied for this reason are considered excluded members.) Allow only one 20 percent earned income deduction from the gross countable income, which includes the adjusted earned income of the excluded individual.

   For ineligible immigrants, that portion of the household's allowable shelter and dependent care expenses and legally obligated child support payments are divided evenly among the household members, including the excluded member. This includes utility expenses when an actual expense is used. All but the excluded member's share is a deductible expense for the remaining household members. The system will calculate the allowed expense for shelter expenses.

   For Ineligible ABAWDS, allowable shelter, dependent care expenses, and legally obligated child support payments are only pro-rated if that individual is billed or responsible for paying.

C. Non-household members (Ineligible students). Only the portion of the expense actually contributed or paid by the household is an allowed deduction. The amount paid by the ineligible student is not an allowable expense.

Volume - Supplemental Nutrition Assistance Program (SNAP)
MS 5610 - R. 8/31/26 – OMTL - 705
Month of Application or Recertification

A. SNAP eligibility is based on circumstances for the entire month in which the household files its application and/or circumstances anticipated to exist in future months. The initial month's benefits are pro-rated from the date of application.

1. The initial month is the first month the household is certified, following **any** break in the certification period. Prorate benefits from the date of reapplication for **any** household that reapplies in the month following discontinuance.

2. Do not prorate benefits for the first month of the new recertification period for those households whose filing deadline for a timely recertification falls after the end of their current certification period.

3. Do not prorate benefits for migrant and seasonal farmworker households.

B. **[**Individuals who move to Kentucky from another state are considered to have participated in SNAP **if** the individual received benefits for the month. If an individual states they have received benefits in another state, **or** if there is reason to believe they may have, verification is required. If the state in which benefits were received is not yet participating in the National Accuracy Clearinghouse (NAC) Interstate Data Matching System, staff must rely on the Public Assistance Reporting Information System (PARIS). If the local office has access to the out-of-state worker (e.g., the individual has the previous worker's phone number), contact the state to determine if the individual received benefits in that state for the month and to verify if the case has been discontinued. Out-of-state numbers can be found at the National Directory of Contacts. If the worker is unable to verify this information, the application must be pended for verification. A Request for Information (RFI) will be generated, giving the household 10 days to provide verification. If verification is not returned, the case will be processed without it.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5620 - R. 8/1/10 – OMTL – 368
Eligibility Months

Because of anticipated changes, a household may be eligible for the month of application, but ineligible for the subsequent month(s). The household is entitled to benefits for the month of application even if the benefits are issued in the subsequent month. Likewise, a household may be ineligible for the month of application, but eligible in the subsequent month(s) due to anticipated changes in circumstances. Even though it is denied for the month of application, the same application is used to determine eligibility for subsequent months without requiring the household to reapply. Normal timeliness standards are met.

As a result of anticipating changes and/or proration of benefits, the household's allotment for the month of application may differ from its allotment in subsequent months.

Document when applications are either approved or denied for current and subsequent months.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5650 - R. 12/15/25 – OMTL - 686
Budgeting Income

For the purpose of determining the household's eligibility and monthly benefit, consider the income already received during the month and any anticipated income reasonably certain to be received during the remainder of the certification period.

If the amount of income that will be received or when it will be received is uncertain, do not count that portion of the household's income.

Example: A household is anticipating income from a new source, such as, but not limited to, a new job, Kentucky Transitional Assistance Program (KTAP) grant, Retirement and Survivors Disability Insurance (RSDI), or Supplemental Security Income (SSI), but is uncertain as to the time or amount of payment. These monies are not anticipated unless there is reasonable certainty of the month of receipt and the amount of payment.

Handle specific income listed below as follows:

A. Wages

1. Steady Employment:

   a. If anyone in the household is steadily employed, the best practice is to use gross income from all pay periods in the prior two calendar months to determine the amount of income that can be anticipated in the month of application and subsequent months. This includes tips as well as wages.

   Example: four semi-monthly gross paychecks of:
   $360.25, $325.30, $359.20, and $338.45 = $1383.20
   $1383.20 ÷ 4 = $345.80
   $345.80 x 2 = $691.60 per month, which the system will round to $692.00 per month.

   b. If the individual is unable to provide the prior two months verification but has provided verification that is representative of their ongoing income, accept their verification. Remember year-to-date income can sometimes be used to determine income for missing pay dates.

   Example: An individual comes in for a recertification in December and states they are paid weekly on Fridays. The worker asks for all the October and November check stubs, and the individual states they don’t have them all. They have two October check stubs and three November check stubs. They state they work 35-40 hours per week, and the provided check stubs reflect that. The provided verification is representative of their anticipated ongoing income and is sufficient. No further verification is requested.

c. Tips

(1) Consider tips that appear on an individual's check stub to be allocated tips. Allocated tips are not included in the gross wages shown on an employee's pay stub but are used by the Internal Revenue Service (IRS) for audit purposes.

Allocated tips displayed on the check stub may or may not be representative of tips received. The employee is responsible for reporting and verifying, usually by keeping a tip log, the actual amount of tips received. If the individual states the allocated tips are representative of income received by the employee, use the allocated tip amounts when calculating the monthly tip income.

(2) Non-allocated tips are not shown on the employee's pay stub at all.

(3) Tips are counted and entered separately from the wage amount when entering the check stub verification on the system.

Example: The individual comes in for recertification in August. They state they are paid every week on Friday. They have a daily tip log and provide the prior two months (June and July) tips. They were paid on the following dates in June and July. Tips should be entered exactly as verified, without rounding, as amounts will be rounded by the system.

6/05/25	$14.75	7/03/25	$65.85
6/12/25	$61.24	7/10/25	$67.50
6/19/25	$72.25	7/17/25	$74.15
6/26/25	$72.50	7/24/25	$49.95
		7/31/25	$91.95

The individual stated they only worked one day during the 6/05/25 pay period. The 6/05/25 tips are not considered, as they are not representative of ongoing tips.

The total tips earned for the weeks considered are $556.

d. If information supplied by the household or a collateral contact indicates future income will differ from the previously received income, use the pay-period(s) which are representative of ongoing wage payment to make a reasonable estimate of anticipated income.

Example: Individual receives occasional overtime once every few months; the check with the overtime would not be used as it is not representative of ongoing. Document the method used to determine income in the case.

e. If the income is **not** representative of the ongoing situation, enter the verified ongoing pay rate, hours worked in a pay period, how often paid, and the pay day on the system. When manually calculating the income to ensure the benefit amount is correct, do the following:

(1) For the recently employed who have not received 2 calendar months of earned income, calculate the monthly amount as follows:

(a) Multiply the hourly rate by the estimated number of hours to be worked in a pay period.

Example: An individual works 35 hours per week at $8.75 per hour.

Paid weekly (Every Friday) = $8.75 x 35 = $306.25

Paid bi-weekly (Every other Friday) = $8.75 x 70 = $612.50

Paid semi-monthly (twice per month) =
$8.75 x 35 hours per week = $306.25 (per week)
$306.25 x 52 weeks in a year = $15,925.00 (per year)
$15,925.00/24 pay-periods per year = $663.54 semi-monthly

This method is only used as an estimate. Once the check stubs are received, use them.

(b) For individuals who are paid on a daily basis, add all daily rates together for the pay period, without rounding, and enter the total as a weekly amount.

(2) For cases of new employment, where the employer verifies the individual will be paid for only a partial month, use the estimated weekly amount multiplied by the number of checks the individual will receive for the month of application. To determine ongoing eligibility, convert the weekly estimated amount by 4 1/3, the bi-weekly amount by 2 1/6, and the semi-monthly amount multiplied by 2 to get the monthly amount.

(3) For cases where the hours of employment or the rate of pay changes and the individual has not received two calendar months of earned income at the changed hours or rate, calculate the monthly amount using the steps outlined in A, 1, e, (1). If the individual reports only their rate of pay has changed, it is acceptable to use the prior two months check stubs, or whatever check stubs the individual has provided as their verification of anticipated income and calculate the income by using the hours on the check stubs multiplied by the verified new hourly rate of pay. If the individual also receives tips, use the tips on the corresponding check stubs being used if the individual states these are reflective of anticipated tip income.

2. Hourly and Piece-Work Wages

If income is received on an hourly wage or piece-work basis, weekly income may fluctuate if the wage earner works less on some days or is required to work overtime on others. Individuals should be interviewed thoroughly to ensure this income is representative of anticipated ongoing income.

3. Wages Withheld

   Consider wages that are withheld as follows:

   a. Count wages held at the request of the employee as income in the month the wages would **normally** have been paid by the employer.

   b. Count wages held by the employer that were not previously counted as income when received by the employee.

   c. Count wage advances in the month received and not in the month the advances are deducted by the employer.

   d. Count garnished wages and other wages withheld by court order, such as child support payments, as income to the wage earner.

   e. Wages held by the employer as a general practice, even if in violation of law, are **not** considered income.

4. Contract Wages

   Not every school employee is a contract employee. Refer to items a. or b. for treatment of income for school employees.

   a. Annualize income, which is governed by a verbal or written contract or payment agreement. This applies even if the income is received in less than 12 months. Begin to annualize income with the first month's payment.

      Example 1: Contract stipulates $10,000 for one year. This income is annualized. The system should count $833 per month.

      Example 2: Contract stipulates $10,000 for one year and is based on an hourly rate. The employee's contract is based on the number of hours expected and the hourly wage agreed upon to determine the annual gross. The employee will not receive any more or less than the total gross, no matter how many hours they work. It is a set, agreed-upon amount and will not go up or down without another contract. This income is also annualized. The system should count $833 per month.

   b. Do not annualize income that is received on an hourly or piecework basis that is not governed by a written or verbal contract.

      Example: Contract stipulates the individual is to be paid an hourly amount with no annual limit established. This income is not annualized but is prorated over the period of time the income is intended to cover.

c. For contract wages, other than school employees, who are governed by a written contract or payment agreement, divide the income over the amount of time the contract stipulates.

Example: Contract stipulates that the individual is to be paid $1200 for 6 months, beginning January 1st and ending June 30th. After six months, the contract ends, and no additional wages will be received unless a new contract is signed. The wages would be averaged for six months, beginning the first month the payment is received.

5. Terminated Wages

For terminated wages in the month of application, verify and count the actual wages received in the month. Additionally, review with the household any employment that occurred in the 30 days prior to the date of the application to determine the last day worked, last day paid, and the reason for termination or job end. This must be done in order to determine if any income was received, or will be received, in the application month, as well as to determine if a voluntary quit disqualification should be applied to that individual.

6. Bonus Income

If there is a pattern of bonus payments, determine the average monthly bonus income from the checks provided and enter the monthly amount separately as an earned income entry in Worker Portal.

7. Commission Income

For commissioned income that is included in the taxable gross amount of regular wages, separate the commission amount from the taxable gross wages. Enter the commission amount entered into the commissions section within the wage entries.

B. Child Support

Before budgeting child support income, determine if the average of the prior three months is representative of future child support. For new child support or a change in child support, use the court-ordered amount, or other verified amount, in cases where there is no court order, if representative of future support, to determine the anticipated ongoing amount. A thorough explanation of how ongoing support is determined is required. Use an average of the prior three months if this is more consistent with anticipated child support due to an absent parent making irregular payments. Allow a written statement from the absent parent if paid directly to the custodial caretaker and is representative of ongoing child support income. If verification of the prior three months child support is not available or is not representative of the ongoing amount, average and convert as follows to get the monthly amount: the weekly estimated amount by 4 1/3, the bi-weekly amount by 2 1/6, and the semi-monthly amount multiplied by 2. Do not round the weekly amount.

Example: The absent parent provides a written statement verifying they pay $75 per week cash to the individual for child support for their child. $75 X 13/3 = $325 per month.

If payments are received through the Department of Child Support Services (DCSS), the amounts provided to the family are listed in the columns entitled "$ CSUP to Family" and "$ Arrearages to Family". Use the following method to determine the anticipated ongoing child support income to be counted in the SNAP benefits case:

To make an accurate determination of what is to be considered, review both columns for patterns of payment and discuss any discrepancies with the individual. Further verification, such as a collateral contact with DCSS, may be required to resolve discrepancies.

For example, DCSS displays the following:

Child Support to Family		Arrearage to Family	
03/25	$0.00	03/25	$0.00
02/25	$100.00	02/25	$0.00
01/25	$100.00	01/25	$900.00
12/24	$100.00	12/24	$0.00
11/24	$0.00	11/24	$0.00

To determine whether or not the $900.00 listed in the "$ARR to Family" column should be considered when budgeting the child support income in the case, the worker must first confirm with the individual the payments were actually received. Look for a pattern of payment. In the example above, there does not appear to be a regular pattern of arrearage payments in this column. Therefore, the $900.00 would not be considered when determining the ongoing child support income. It would be considered a lump sum payment.

1. Manually add all three months together and divide by 3 to get an average monthly amount of child support to be considered in the SNAP benefits case. Enter the monthly amount on the system without rounding.

2. Enter the child support income under each child receiving the child support paid by the Non-Custodial Parent (NCP). If there is more than one child for the same NCP, determine the average monthly amount and divide it among the number of children for whom the support is intended. Enter the amounts in a manner that equals the total monthly amount of support due.

3. Document the case in enough detail to permit a reviewer to determine the accuracy of the entries.

C. Assistance Payments

Do not average monthly Federal or State assistance payments, such as KTAP, SSI, Veterans Administration (VA), or Social Security benefits, when two payments are received in a month as a result of the issuance date. If two payments are received due to changes in mailing cycles or pay dates or weekends or holidays, only count the monthly amount.

D. Student Income

1. A household member must be enrolled in one of the following types of educational programs to receive student educational income exclusions.

   a. Recognized institution of post-secondary education;

   b. School for the disabled;

   c. Vocational or technical school;

   d. High school;

   e. General Educational Development (GED) program.

   f. Accredited Home School Program.

   Students attending high school do **not** have to meet the student criteria outlined in MS 2300 to receive these exclusions.

2. Student income

   a. Educational Assistance Payments

      Assistance payments such as educational loans with deferred repayments, grants, scholarships, federally funded work study income, fellowships with no work requirements, and VA educational benefits are excluded income and should be entered as excluded income.

   b. Countable earned educational assistance is income funded by the Temporary Assistance for Needy Families (TANF) grant, such as Ready-to-Work (RTW). Some regions have different names for this program, such as Work and Learn.

      (1) Contact the RTW Coordinator to determine the number of hours the student is expected to work per week. The weekly hours must be verified and entered as anticipated hours per week.

      (2) Enter RTW income based on the frequency at which it is received. For example, if an individual is paid every week, the wages are entered as weekly wages.

3. Tuition, books, mandatory fees and supplies, transportation in excess of KWP supportive service payments, and other miscellaneous personal expenses other than room and board are excluded from RTW income received by a household member.

4. Exclusions are applied to RTW earned income as follows:

   a. Calculate the educational expenses that can be excluded.

b. Consider any remaining balance as GROSS earned income, subject to the 20 percent earned income disregard.

5. Verification of Student Income and Expenses

The only student income that must be verified is income received through RTW or other student income programs funded by TANF. This income is verified by form PAFS-700, Verification of Employment and Wages, a written statement from the RTW coordinator, or collateral contact with the RTW coordinator. It is imperative the worker question the individual as to whether they incur educational expenses. Educational expenses can be verified by, but not limited to, the student's educational account or a collateral contact to the institution.

E. Odd Job and Seasonal Income

Use income received during the past 30 days if it is reflective of the income that is or will be available to the household during the certification period. Do not use past income as an indicator of income anticipated for the certification period if a change has occurred or can be anticipated. If income fluctuates to the extent a 30-day period cannot provide an accurate indication of anticipated income, use a longer period of the past if it provides a more accurate indication of anticipated income.

If the household's income fluctuates seasonally, it may be appropriate to use the most recent season comparable to the certification period, rather than the last 30 days, as an indicator of anticipated income. Exercise particular caution in using income from a past season as an indicator of income for the certification period. In many cases of seasonally fluctuating income, the income also fluctuates from one season in one year to the same season in the next year. The amounts of any past income should not be automatically attributed to the household.

F. Unemployment Insurance Benefits (UIB)

When entering UIB on the unearned income screens, enter a minimum of two bi-weekly amounts. The gross benefit amount should be entered. Batch match compares the last two payments of the UIB database to the first two verified payments on the unearned income screen. Therefore, if only one bi-weekly UIB amount is entered, a monthly exception is generated even though the UIB income is being considered correctly. Special attention should be paid to the CS DED (child support deduction) so the expense is properly documented in the case record as well.

Volume 2 - Supplemental Nutrition Assistance Program – (SNAP)
MS 5660 - R. 2/1/11 – OMTL - 380
Converting Income

Income is converted to a monthly amount using one of the following methods:

A. Take the following actions to determine a representative monthly amount for stable or fluctuating income:

1. Verify the income from all pay periods in the last 2 calendar months.

   a. If the household does not have verification of income from the last 2 calendar months, request they provide verification that is representative of their anticipated income.

   b. Document the amount, the expected date of receipt, how the amount was determined, and why consecutive weeks were not used for any anticipated income, along with the documentation of previous income. When all attempts to verify income have been unsuccessful because the income provider fails to cooperate with the household and/or the worker or no other source of verification was available, determine an amount to be used based on the best available information. Document the method used to determine any unverified amount, including efforts made to obtain the missing verification.

2. Total the income from all provided pay periods and divide by the number of pay periods to establish the representative weekly or bi-weekly payment amount.

3. Multiply the representative payment amount by 4 1/3 if weekly and 2 1/6 if bi-weekly to determine the monthly income amount used in determining household eligibility and level of benefits.

4. Document the method used to establish a representative pay period, including dates and amounts of wages verified.

B. When the household's income is unstable, use the actual amount **received** or anticipated **to be received** when a full monthly amount is not anticipated due to terminations, layoffs, suspensions. **Do not** determine a representative payment amount and **do not** multiply by 4 1/3 or 2 1/6 for irregular income.

C. If a household derives its income by a verbal or written contract, **annualize** the income, provided the income is not received on an hourly or piecework basis. Annualize the income beginning with the first month payment is received.

Example 1: Contract stipulates $10,000 for one year. (This income is annualized.)

Example 2: Contract stipulates $10,000 for one year and is based on an hourly rate. The employee’s contract is based upon the number of hours expected and the hourly wage agreed upon to determine the annual gross.

The employee will not receive any more or less than the total gross no matter how many hours more or less they work. It is a set, agreed-upon amount and will not go up or down without another contract. (This income is also annualized.)

Example 3: Contract stipulates the recipient is to be paid so much an hour with no annual amount established. (This income is not annualized but is prorated over the period of time the income is intended to cover.)

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5670 - R. 2/1/13 – OMTL – 435
Budgeting Deductions

A. Household expenses are calculated based on the expenses the household expects to be billed during the certification period. Anticipation of the expense is based on the most recent month's bills unless the household is reasonably certain a change will occur. If a household receives a bill in one month and the due date on the bill is the following month, consider the expense for the month the bill is received rather than the month payment is due.

Households may elect to have fluctuating expenses averaged. Households may also choose to have expenses which are billed less often than monthly:

1. Prorated forward over the period between scheduled billings;
2. Prorated forward over the period the expense is intended to cover if there is no scheduled billing period; or
3. Deducted in the month billed or otherwise comes due.

Document the method of deduction chosen by the household.

If an expense is prorated over the period between scheduled billings or prorated over the period it is intended to cover, the expense does not have to be billed during the certification period to be deductible.

Convert all expenses billed weekly or bi-weekly using 4 1/3 or 2 1/6, as appropriate.

Example: Dependent Care Expense

09/07/25	$50	10/05/25	$50
09/14/25	$70	10/12/25	$60
09/21/25	$50	10/19/25	$50
09/28/25	$60	10/26/25	$70

$50 + $70 + $50 + $60 + $50 + $60 + $50 + $70 = $460 ÷ 8 = $57.50
$58 * 13 ÷ 3 = $251.33 per month

B. Households reporting one-time only shelter expenses may elect to have a one-time only deduction or to have the expense averaged over the **entire** certification period in which the expense is billed.

Households reporting one-time only medical expenses during their certification period may elect a one-time only deduction or have the expense prorated over the remaining months of the certification period beginning the month the change becomes effective.

Households which report a one-time only medical expense during the last month of the certification period may have the expense deducted in the last month of the certification period, deducted in the first month of the new certification period, or deducted over the new certification period.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5800 – R. 8/31/26 - OMTL – 705
Calculation of Allotment

For households with no elderly or disabled members, calculate the SNAP benefit allotment as follows: (See MS 5810 for calculation procedures for elderly or disabled members, excluded members, and self-employed members.)

A. Add all nonexempt gross monthly earned income minus exclusions by all household members. This figure is the household's total gross earned income.

B. Add all nonexempt gross monthly unearned income minus exclusions received by all household members. This figure is the household's total gross unearned income.

C. Add total gross earned income to total gross unearned income. This figure is the household's total gross income.

D. Compare gross income to the Income Scale in MS 5200. If the household's income is equal to or below the standard for its size, the net income and benefit level are calculated. If the income exceeds the gross income standard, the case is denied/discontinued unless the household is Categorically Eligible (CE).

E. Subtract the standard deduction.

F. Multiply the total gross earned income by 20 percent and subtract that amount to determine the monthly income.

G. Allow monthly dependent care expenses paid for each child or other dependent in the household.

H. Allow a deduction for legally obligated child support paid to someone outside the household.

I. Total the allowable shelter expenses to determine shelter costs. Subtract 50 percent of the household's monthly income, after all the above deductions, from total shelter costs. The remaining amount, if any, is the excess shelter cost. If there is no excess shelter cost, the net monthly income is determined. If there is an excess shelter cost, the shelter deduction is computed.

J. Subtract the excess shelter cost from the household's monthly income after all other appropriate deductions, up to the maximum of $744. The remainder is the household's net monthly income.

K. Compare net monthly income to the Income Scale in MS 5200 for the appropriate household size. If the household's income is above the allowable net income, the case is denied/discontinued, unless the household is CE or Expanded Categorically Eligible (ECE). ECE households are denied only when 30 percent of the net monthly income is more than the monthly SNAP allotment for that household size.

L. Calculate the allotment by multiplying the net monthly income by 30 percent. The result is rounded up to the next whole dollar. Subtract this amount from the Maximum SNAP Benefit Allotment for the household's size.

M. **[**For SNAP applications and recertifications submitted on or after June 26, 2026, benefits for eligible households will be subject to a maximum allotment cap equal to 200 percent of the federal maximum allotment for a four-person household.

Based on the 2026 four-person maximum allotment of **$994**, the cap is **$1,988**. Once this cap is reached, adding additional household members (including households with more than eight members) will not increase the benefit amount.

This change applies **only** to:

1. New SNAP Applications; and
2. SNAP Recertifications.

This change does **not** apply to:

1. Cases during an active certification period; or
2. Reinstatements.

Example 1: A 10-person household applies for SNAP on 6/27/2026. The maximum SNAP allotment for the household is $1988.

Example 2: A nine-person household reports an additional household member with no income during their recertification interview. The benefit amount will remain $1988, regardless of the number of additional members with no income reported in the home.

Maximum SNAP Benefit Allotment:

Household Size	Allotment
1	$298
2	$546
3	$785
4	$994
5	$1183
6	$1421
7	$1571
8	$1789
9 or more	$1988

N. Approve CE and ECE households whose initial month benefit results in less than $24 (regardless of application date), for the actual prorated amount, unless the amount is less than $10; those cases will approve for $0 benefits for the initial month if the application date is after the first day of the month.**]**

For CE households, issue benefits for months other than the initial month as appropriate for the individual case situation:

1. One- and two-person households that meet the appropriate income tests receive a minimum allotment of $24.

2. The minimum allotment does not apply to households with three or more members. These households are issued the actual benefits they are eligible to receive.

O. If benefits are prorated, the following formula is used for the initial month:

1. Subtract the date of application from 31. For households applying on the 31st of the month, the date of application is considered the 30th.

2. Multiply the amount calculated in Item 1 by the household's full month's benefit for the initial month.

3. Divide the amount from Item 2 by 30. This amount is the prorated allotment. If the result ends in anything other than a whole dollar, round it down to the next whole dollar.

4. If the initial month’s prorated allotment is less than $10, do not issue benefits.

5. If the monthly allotment is greater than $0 but the prorated amount is $0, the household is eligible, as the $0 allotment is the result of the date of application, not available income.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5810 – R. 8/31/26 – OMTL – 705
Special Procedures for Calculation

Special procedures are used to calculate the allotments of households with the following types of members:

A. Elderly or disabled household members have their special deductions allowed as follows:

1. Follow procedures outlined in MS 5800, items A through C.

2. Subtract the standard deduction.

3. If the household is entitled to an excess medical deduction, subtract any portion of the total medical expenses that exceeds $35.

4. Subtract monthly dependent care expenses, if any, paid for each child or other dependent.

5. Subtract legal child support payments that are paid to individuals outside the household.

6. If the household is homeless and reports shelter expenses, the system will budget using both the $199 Homeless Standard allowance and the allowable shelter expenses, then automatically determine which deduction should be used so the household receives the higher SNAP benefit. If Worker Portal determines the same benefit amount using both deductions, the Homeless Standard deduction will be used.

7. Total the allowable shelter expenses to determine shelter costs. Subtract 50 percent of the household's monthly income, after all the above deductions, from total shelter costs. The remaining amount, if any, is the excess shelter cost. If there is no excess shelter cost, determine the net monthly income.

8. Subtract the excess shelter costs from the household's monthly income after all other appropriate deductions. Determine the household's net monthly income.

9. Follow procedures outlined in MS 5800, items K through N.

B. If the only elderly or disabled individual in a household is an ineligible immigrant or an individual disqualified for failure to meet enumeration requirements:

1. The household **must** meet the gross income standards;

2. Do **not** allow the medical deduction or the uncapped excess shelter costs; and

3. Do **not** include this individual in the household size.

C. If the individual who is elderly and disabled and their spouse are being certified as a separate household, compute the gross income of the individuals with whom the household lives as follows:

1. Follow the procedures outlined in MS 5800, A through C, except do **not** give the earned or unearned income exclusions.

2. Compare these individuals' gross income against the maximum gross monthly income limits for elderly/disabled separate households.

3. If their income exceeds the limit, consider the individuals as one household.

4. If their income is at or below the limit, consider the elderly/disabled individual and their spouse as a separate household.

D. Excluded household members are included in the household size except for the following purposes:

1. Assigning a benefit level to the household; or

2. Comparing the household's monthly income to the income eligibility standards.

E. Determine the income of self-employed household members as follows:

1. **[**Add all self-employment income, including capital gains, and divide by the number of months it is intended to cover. **Do not round**;

2. Add the costs of producing the self-employment income and divide by the number of months the expenses are intended to cover. **Do not round**;

3. Subtract the monthly cost of producing the income from the monthly gross to arrive at the monthly net self-employment income to consider. **Round the net self-employment income to the nearest dollar**;

4. Add the income from item 3 to any other earned income received by the household; and

5. Follow procedures outlined in MS 5800, K through O.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 5820 – R. 8/31/26 – OMTL – 705
Rounding

When calculating gross or net monthly income and deductions, round the monthly amounts to the nearest dollar ($.01-.49, round down; $.50-.99, round up). Complete rounding before and after each calculation for income and deductions except for the calculation of shelter and medical expenses. Shelter and allowable medical expenses are calculated using exact dollars and cents. Round total expenses prior to determining the shelter or medical deduction.

[Note: See MS 5810 for calculation procedures for elderly or disabled members, excluded members, and self-employed members.**]**

Do **not** round cents before adding or multiplying hourly or daily earnings. Round all cents before adding or multiplying weekly, bi-weekly, semi-monthly, quarterly, or annual earnings. This policy also applies to child support deductions and dependent care. Staff must follow rounding procedures in MS 5650 for rounding child support income.

Do **not** round Retirement, Survivors, and Disability Insurance (RSDI). Enter the actual net RSDI amount. If there is an overpayment of RSDI retained in order to pay back an RSDI claim, subtract the current overpayment amount from the ‘net’ amount to calculate the amount of RSDI to be counted in the case.

When calculating the allotment, round the 30 percent of net income up to the nearest whole dollar.

Example: Round cents in gross weekly earnings prior to multiplying by 4-1/3. Round the cents resulting from this multiplication before calculating the earned income deduction. Round cents from this deduction before subtracting from earned income. Because rounding could result in a significant decrease in a household's shelter or medical expenses, the individual costs are calculated using exact dollars and cents. However, round the total shelter/medical costs to determine the deductions before determining net monthly income.

MS 6000 INITIAL CONTACT – RESPONSIBILITIES (1)

The worker, or other trained staff designated by the Service Region Administrator Associate (SRAA), is responsible for the following:

A. Prescreening all individuals to determine whether the household is applying for initial certification, recertification, or reporting changes.

B. Issuing form FS-360, Facts About The Supplemental Nutrition Assistance Program (SNAP), immediately to an individual expressing a desire to apply for SNAP benefits.

C. Prescreening all applications as they are filed to determine whether the household may qualify for expedited services.

D. Annotating the type of contact on the appropriate log.

E. Referring applicants to the appropriate caseworker for an interview.

F. Advising the individual of the Web Portal.

[G. Advising the individual of the call service center and providing the telephone number: 855-306-8959.]

MS 6010 HOUSEHOLD CLASSIFICATION (1)

[Supplemental Nutrition Assistance Program (SNAP) households are divided into the following classifications:]

A. PUBLIC ASSISTANCE (PA) includes all households where all members have been approved for a K-TAP grant or State Supplementation check regardless of whether the first payment is received in the month of approval.

B. NONASSISTANCE (NA) includes all households not classified as PA. This category includes households where some but not all members are included in a PA case.

[Include individuals who are normally considered members of the household, but who are excluded or ineligible to participate in the SNAP, when assigning a classification.]

MS 6020 CASEWORKER RESPONSIBILITIES (1)

The caseworker is responsible for:

A. [Interviewing the client, other responsible household members, or authorized representative and entering the individual's response to appropriate questions on the system. It is very important that a thorough interview is conducted with every contact made with the client. The worker must ask the client every question on the system. After the interview is complete, review the entries with the applicant, explain rights and responsibilities, and have the applicant sign the printed application.]

B. Accepting an application for a SNAP household or member who has received in another state. Follow these procedures to prevent duplicate participation:

   1. Contact the state agency to determine:

      a. The effective date of discontinuance;
      b. The last day benefits were received; and
      c. The period of time the last issuance covered.

   2. If the other state does not issue SNAP benefits on a calendar month basis, do the following:

      a. Accept a hardcopy application if the benefit period from the other state is still in effect;
      b. Enter the application date on the first day of potential eligibility in Kentucky;
      c. Answer "N" to "Received in another state"; and
      d. Document the action in comments.

   The application will approve with benefits prorated from the date of application.

   EXAMPLE: Household received benefits in Alabama on 6/24/10, which covered the period from 6/15/10 through 7/14/10. Enter the application on 7/15/10, the first day of potential eligibility in Kentucky.

C. Scheduling the household for an interview at the earliest possible time.

D. [Thoroughly questioning households reporting no income to determine how they are paying for necessities (particularly those households who continually report no income). Documenting the client's statement. Access all programs available, such as BENDEX, Eligibility Advisor, , UI BENEFITS, SDX, and child support (if children are in the home, or it is otherwise warranted), on all individuals who report no income.]

E. Documenting the case to sufficiently describe the household situation and the basis for the case action.

F. Assuring that all the appropriate forms are completed. This includes checking the electronic case file (ECF) to ensure any forms already completed remain valid for the new certification period.

G. Assisting the household in obtaining verification, if necessary.

H. Processing the case within the appropriate time standards.

I. Advising households applying for both SNAP benefits and KTAP that the KTAP time limits do not apply to the receipt of SNAP benefits. In addition, households which cease receiving KTAP because they have reached the time limit, have begun working, or for other reasons, may still qualify for SNAP benefits and must be so advised.

J. Explaining the use of the EBT card and eligible and ineligible SNAP EBT Purchases, e.g., the SNAP EBT card cannot be used to pay on a charge account.

K. Thoroughly explaining the applicable change reporting requirements to the household.

L. Thoroughly explaining the Quality Control (QC) process and providing PAM-PAFS-343.2, Quality Control, to the household.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6100 – R. 9/18/26 – OMTL – 709
Filing an Application

[All households have the right to apply for any program administered by the Department for Community Based Services (DCBS) at any county office, regardless of their county of residence. No one is refused the opportunity to apply. Telephone interviews are offered when an interview is required for initial application, reapplication, and recertification. Individuals **must** be informed of the opportunity for in-person interviews, and households **must** be granted in-person interviews if requested. Additionally, an application for SNAP can be made by the individual, their guardian, a power of attorney designated for SNAP purposes, or an Authorized Representative (AR). The AR designation must be made in writing by the head of household, the spouse of the head of household, or another responsible member of the household.**]**

A. Each household or its representative has the right, and is encouraged, to file an application the same day of contact with the office whether the contact is made in person or by telephone. In addition to in-person applications, households may file SNAP applications by submitting the application form to a local office themselves, through an AR, by mail, the Self-Service Portal (SSP), fax, or telephone.

B. Application time standards and initial benefit allotment are calculated from the date of application. An application is considered filed when the application is submitted online, by telephone, or the appropriate application form is signed and received in any Family Support office. The household does not have to be interviewed before an application is considered filed.

   Each applicant who contacts the office must be informed of and understand this right and its implications.

C. If an individual or representative signs an application by making a mark (X), the mark must be witnessed by one person who can write. The witness may be related or unrelated to the individual.

D. Electronic signatures are acceptable for SNAP applications, recertifications, and mid-reviews.

E. Explain to the household that an interview must be conducted to complete the application process. The worker and the applicant complete an application interview by answering **all** questions on the system, and the applicant signs the system-generated application. See MS 6320 and MS 6330 for interviewing procedures.

F. A household may reapply at any time even if their application has been previously denied or their assistance has been discontinued.

G. Residence in a domestic violence center does not affect the individual's right to apply.

H. If an AR is appointed, make the following system entries:

1. From the Application Information screen, answer "Yes" to the question, "Is there an Authorized Representative?" This triggers the Representatives screen.

2. From the Representatives screen, complete the Authorized Representatives Information section for all required entry selections. Complete an individual system search for the person(s) being appointed using the "Lookup" button located in this section. If the individual is established on the system with an individual number, then this needs to be uploaded in the "Individual #" box. For DAA facilities, enter the organization name.

3. Verification for the AR is completed under the "Level of Permission" section. From there, select the Program, Level of Permission, Permission Verification (once verified), and Permission Verification Date (once verified) fields.

4. Although not required, the system entry sections, the Address Information and Contact Information sections, should be addressed.

I. If a SNAP Intentional Program Violation (IPV) disqualification is applied to an individual who is the head of household, the Integrated Eligibility Enrollment System (IEES) now requires the household to identify an AR to assist them in making applications, recertifications, and using their Electronic Benefit Transfer (EBT) card.

1. If the individual who is selected to be the AR also has an IPV disqualification, a different AR must be appointed. The AR may be another responsible adult member of the household.

   Note: If the AR selected is another member of the household, the AR must still be listed on Worker Portal.

2. If the individual states there is no one else available to represent them, there is an option for a short-term good cause to be listed. The good cause can only be used temporarily and must be addressed at the next application or recertification.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6102 - R. 9/18/26 – OMTL – 709
Taking the Application

[All households have the right to apply for any program administered by the Department for Community Based Services (DCBS) at any county office, regardless of their county of residence. No one is refused the opportunity to apply. Telephone interviews are offered when an interview is required for initial application, reapplication, and recertification. Additionally, individuals **must** be informed of the opportunity for in-person interviews, and households **must** be granted in-person interviews if requested. Eligibility requirements or agency procedures do not prohibit an individual's opportunity to apply and obtain a determination of eligibility or ineligibility.**]**

A. The applicant's county of residence has no bearing on the county where the application is completed.

B. Accept all information or verification from individuals coming into the local office regarding their case. Information should be scanned on the date it is received.

C. If the individual is elderly or disabled, provide reasonable accommodation to any special needs they may have regardless of where the interview is conducted. Reasonable accommodation includes, but is not limited to:

1. Interpreter services for deaf and hard-of-hearing individuals. Refer to Volume 1, MS 0220;
2. Additional space for the interview to accommodate an individual in a wheelchair;
3. Scheduling appointments when special transportation services are available; or
4. Making a home visit.

D. If the individual has Limited English Proficiency (LEP), obtain interpreter services. Refer to Volume 1, MS 0230.

MS 6103 WHO SIGNS THE APPLICATION (1)

Supplemental Nutrition Assistance Program (SNAP) applications must be signed by an adult or an emancipated child who is a responsible member of the household or an adult authorized representative. By signing an application, the applicant is attesting he/she understands he/she is responsible for ensuring all the information in the application is accurate.

If an individual or their authorized representative signs an application by making a mark (X), the mark must be witnessed by one person, related or unrelated to the individual, who can write.

[For SNAP purposes, individuals who do not wish the Department to contact U.S. Citizenship and Immigration Services (USCIS) to verify immigration status are allowed the option of withdrawing the application or participating without that member. See Volume II, MS 5220 for how to consider income of ineligible immigrants.**]**

MS 6120 WITHDRAWAL OF APPLICATION (1)

The household may voluntarily withdraw its application at any time before final case disposition.

A. If the client requests withdrawal in person, enter the request on the system.

B. [If the client requests withdrawal by phone, verify identity of client prior to completing the case action. Verification of identity can be accomplished through a correct response to the following information on the head of household:

   1. First and last name

   2. Date of birth

   3. Social security number

C. Document the reason for the withdrawal, if a reason was given by the client.]

D. An automated denial notice is sent indicating the request for voluntary withdrawal and explaining the household's right to reapply.

MS 6210 RECERTIFICATION INTERVIEWS (1)

[A system-generated “Notice Of Renewal Interview” notice is issued on the 15th (or prior workday if the 15th is a weekend or holiday) of the month before the month of the certification end date.

If a recertification has not been entered on the system by the 15th of the certification end month, a “Notice of Missed SNAP Interview” is automatically issued to the household advising them that they must contact the Department for Community Based Services (DCBS) by the last work day of the month to complete a recertification interview or benefits will be discontinued.

When the application is approved under expedited criteria with postponed verification, the household is instructed on the RFI to call DCBS by the end of the certification period. The household is also notified on the SNAP approval notice that they must contact DCBS to complete a recertification interview and provide the missing verification by the end of the certification period. A recertification interview MUST be completed prior to approval of ongoing benefits.]

MS 6220 INTERVIEWS (1)
FOR WORKING RECIPIENTS

[If the applicant is unable to complete a phone interview during work hours, determine if another adult household member or a representative can be interviewed. In addition, the Department is responsible for setting office hours that take into account the special needs of all Supplemental Nutrition Assistance Program (SNAP) applicants, especially households containing working members. Use flextime to accommodate the needs of working recipients, which allows them to be interviewed before 8:00 a.m. and after 4:30 p.m. Any offices using protected hours for workers must ensure that those hours are staggered in order that clients can be assisted from 8:00 a.m. to 4:30 p.m. and during the lunch hour.]

MS 6300 REQUIREMENT FOR INTERVIEW (1)

All households who are applying or being recertified, must complete an interview with a worker.

The applicant is one of the following:

A. The head-of-household;

B. The spouse of the head-of-household;

C. Any other responsible member of the household;

D. The household's representative; or

E. The legal guardian or the authorized representative appointed by the legal guardian.

The applicant is able to bring anyone he or she chooses to the interview.

[The applicant is responsible for ensuring the information in the application regarding the household is accurate.]

MS 6310 TYPES OF INTERVIEWS (1)

[An in-office or out-of-office interview must be completed for application for the Supplemental Nutrition Assistance Program (SNAP). Out-of-office interviews are conducted by telephone or through home visits. A home based interview is allowable only when the household requests one due to hardship. Households can file applications for SNAP by submitting the form in person, through an authorized representative, by mail or via the Self Service Portal. Staff can also accept applications via fax. See Volume II, MS 6100 for application processing and MS 6320 and MS 6330 for interviewing procedures.]

MS 6320 SCOPE OF THE INTERVIEW (1)

During the in-person or out-of-office interview:

A. **[**Help the individual feel at ease and assist the household in completing the application process.

B. Complete appropriate forms.

C. Complete the individual’s statement fields on the appropriate screens or hard copy forms, as appropriate. Ask only questions which are related directly to household eligibility.

D. Review the individual's responses on the application and clarify any incomplete or conflicting information. Signed applications lacking information or containing incorrect information are corrected during the interview by the individual and worker and documented accordingly. Any additions or corrections to the hardcopy application must be initialed and dated by the individual and entered on the system.

E. Ensure that the application is SIGNED and DATED by the individual.**]**

F. Question the member regarding any possible outstanding claim(s). If a claim exists:

1. Determine if the claim is in the Claims Management Section located in the Division of Family Support.

2. Discuss method of repayment.

G. Provide the household with the following verbal explanations:

1. Enumeration requirement and the uses of the member's SSN;

2. The household's rights and responsibilities;

3. Proration of the initial month's benefits;

4. Timeframes for application processing;

5. The fair hearing process;

6. Penalties for intentional program violation;

7. The Quality Control (QC) process; and

8. Any portion of the application process which the household does not understand.

H. Explain which changes must be reported during the certification period and the interim change report process.

I. Explain and provide, if appropriate, the following to the household:

1. FS-360, Facts about the Supplemental Nutrition Assistance Program (SNAP);

2**.** FSET-101, SNAP Employment and Training Fact Sheet;

3. PAFS-706, Voter Registration Rights and Declination. See Volume I, **MS 0640** and **MS 0650;** and

4. PAM-PAFS-343.2, Quality Control, handout.

J. If a member of the household appears to have a disabling health condition (e.g., quadriplegia, head injury), advise the individual to go to the SSA to apply for SSI/RSDI benefits.

K. **[**Issue a Request for Information (RFI) to request all verification required to process the case and file a copy in the case record. Assist the individual in obtaining the necessary verification.**]**

L. Keep all information about the household's circumstances confidential.

MS 6330

CRITERIA FOR
OUT-OF-OFFICE INTERVIEW

(1)

Out-of-office interviews include both telephone interviews and home visits.

Workers MUST conduct telephone interviews upon request by the client.

A face-to-face interview is required only if:

A. Requested by a household;

B. When an authorized representative applies on behalf of another individual at the initial application; OR

C. When deemed appropriate by the agency. For example, initial application by the program's specified representative for applicants residing in Drug Addiction and Alcohol (DAA) treatment facilities, in cases where a household member has an Intentional Program Violation (IPV) or has had a recent trafficking allegation.

Waiver of the face-to-face interview may not affect the length of the household's certification period.

Waiver of the face-to-face interview does not exempt the household from the verification requirements. See MS 7050 for acceptable sources of verification.

[Home based interviews are used only if the household requests one due to hardship.]

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6340 – R. 9/18/26 – OMTL – 709
Conducting Out-of-Office Interviews

[All households have the right to apply for any program administered by the Department for Community Based Services (DCBS) at any county office, regardless of their county of residence. No one is refused the opportunity to apply. Telephone interviews are offered when an interview is required for initial application, reapplication, and recertification. Additionally, individuals **must** be informed of the opportunity for in-person interviews, and households **must** be granted in-person interviews if requested. A waiver of the face-to-face interview does not exempt the household from providing a signed application or the necessary verification. Procedures such as substituting collateral contacts for verification allow the household to obtain benefits on time. Waiver of the face-to-face interview does not affect the length of the household's certification period.**]**

Use the following procedures for conducting out-of-office interviews:

A. If a telephone interview is held:

1. Ask the individual qualifying questions to ensure the identity of the individual, such as first and last name, case number, date of birth, or Social Security Number (SSN).

2. Ask all questions and enter the individual's responses into the system.

3. Mail all necessary pamphlets and forms, including the application, if not signed electronically or by voice signature, no later than close of business the day after the phone interview is completed.

4. Pend the case for return of mandatory information and the signed application, if necessary. Do not approve the case without a signed application.

B. If a home visit is conducted, take all required pamphlets and forms to the interview and provide them to the applicant.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6400 – R. 5/31/26 – OMTL – 695
Overview of Application Time Standards

The processing standards of applications are as follows:

A. [If the household is not eligible for expedited services, process the application within 30 calendar days from the date the application is filed.

1. When households submit an incomplete Form FS-1, application for SNAP, or a Self-Service Portal (SSP) application for SNAP, a notice is generated by Worker Portal to inform the household of incomplete application and interview requirements.
2. When a completed Form FS-1 or SSP application is submitted, a notice is generated by Worker Portal to inform the household of interview requirements. If the required due date is on a weekend or holiday, the verification is due the next business day.

Households that provide all requested information must have action taken on their applications promptly. Action **must** be taken early enough that the household is able to participate in the program, or the household receives a notice of denial, by the 30th calendar day from the date of application. Only those cases pending requested information or completion of the interview are held until the 30th day from the date of application. If the household fails to provide mandatory verification, deny the application. If the required due date is on a weekend or holiday, the verification is due the next business day.

Note: See MS 6710 for information regarding changes to pending applications.

B. If the household is eligible for expedited services, the application must be processed by the 5th day. In order to meet the five-calendar-day timeframe, the application must be disposed by the 4th **calendar** day **after** the date of application. For example:

Application taken on:	Must be processed by:
Monday	Friday
Tuesday	Friday (as the 4th day is Saturday)
Wednesday	Friday (as the 4th day is Sunday)
Thursday	Monday
Friday	Tuesday

If the household is ineligible for benefits, notify them of the denial so the notice is received within five calendar days of the date of application. If the household fails to provide mandatory verification, the household loses its right to expedited services; process the application according to normal timeframes outlined in Item A of this section.

C. If the required action at application is not completed within 30 days, the application is denied. If the applicant completes the required action within 60 days from the initial application date or provides enough necessary verification to be certified for benefits, the application is reactivated even if it is not the information originally requested. A new application and interview are not required.

Example: An individual applied on May 15th and provided all mandatory verification except income verification. A Request for Information (RFI) was given to request income verification for the prior two months (March and April). The individual did not return the requested verification, and their application was denied on June 15th. On June 20th, check stubs for April and May are returned. The household is certified without an interview (as other requirements are met) because verification necessary to reactivate the case has been provided, even though it is not the verification that was originally requested. The reactivation date is June 20th.

D. A household must provide **mandatory** verification, but it may not necessarily be the verification originally requested. In this example, the **mandatory** verification provided was income verification for **April** and **May**. The **original** request was for **March** and **April** income verification.

Reactivate the case with benefits prorated from the date the requested action was completed. A reactivation must be entered using the date the required action was completed. Applications meeting these criteria should be reactivated as soon as possible, but no later than 60 days from the initial application date.

Example: An application is filed on April 20th and is pending for required action by the household. The applicant has until May 20th to complete the necessary action. The application denies the evening of May 20th. The mandatory verification was received on June 17th. The application is reactivated with June 17th as the reactivation date. Action must be taken early enough so the individual can participate in the program, or the individual receives a notice of denial, by the 60th calendar day from the initial April 20th application date.

E. When a Non-Case Decision (NCD) worker or any worker tries to dispose a case that pends for supervisor approval, a message will appear stating that a supervisor has to sign off on the case before it can be processed, and a supervisor task will be generated. The Eligibility Determination and Benefit Calculation (EDBC) process will proceed with the eligibility determination for the program, but benefits will not be authorized. This ensures RFI notices are generated and sent to the household timely. Actual disposition of the case, including approval, denial, or discontinuance of benefits, does not occur until a supervisor signs off on the case.

F. When a change is made to a pending case, the existing RFI due date will be recalculated if the current due date is less than 10 days from the original RFI due date (reference date).

1. Any unverified change reported on or prior to the reference date will generate an RFI that aligns with the case's timely action date. RFI due date will be 30 days from the application date (or next business day, if the 30th day is a weekend or holiday).

Example: If income from Wal-Mart has an active RFI due date of February 2nd and an unverified paystub is added on January 26th, the RFI due date remains February 2nd. No new 10-day RFI will be generated.

2. Any unverified change reported **after** the reference date will generate a new 10-day RFI. The RFI due date is 10 days from the date eligibility ran (or next business day, if the 10th day is a weekend or holiday).

   Example: Application submitted January 1st. Household composition is verified as of January 10th. On January 25th, the supervisor changed the status to "not verified." System generates a 10-day RFI with a due date of February 5th. The application is processed on January 25th based on verified information. On February 5th, if verification is still missing, benefits are discontinued.

   Note: Refer to MS 6710 for details on changes to pending applications.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6410 – R. 5/31/2026 – OMTL – 695
Verification Time Standards at Application

[Allow the household the appropriate length of time to provide verification as follows:

A. If the household is not eligible for expedited services, allow the household 30 calendar days from the date of application to return all mandatory verification.

1. If the 30th day is a workday, verification must be returned by the close of business that day.

2. If the 30th day is a non-workday (weekend or holiday), verification must be returned by the following workday. Benefits will be issued from the original date of application.

3. Allow the household to have a minimum of 10 calendar days (or the next workday if the 10th day falls on a weekend or holiday) on any subsequent Request For Information (RFI), to provide additional information in the following instances:

   a. To verify conflicting or questionable information. Document in the case record why the information was questionable. If the individual cannot be reached to explain why further verification is required, document on the second, third, fourth, etc. RFI, why the verification provided previously was not accepted;

   b. To provide information due to a change in the household's situation which occurred after the interview and the initial request; or

   c. To provide additional information that the worker discovers is needed to make an eligibility determination after the interview and initial request.

4. When all mandatory verification is received, during the extended 30-day period, reactivate the case and process the application. The date of reactivation is the date all the mandatory verifications are received. Optional verification is not required.

   Example: The individual returned all mandatory verification, identity, wages, etc., but they failed to return verification of rent. Reactivate the application using the date all mandatory verification was received and enter zeros for the rent (non-mandatory information). If the individual returns the rent information after the case has been disposed, process the information received as a change.

   When optional verifications have been received, but mandatory verifications are still missing, **do not** reactivate the case until all mandatory information is received.

Example: After the application is denied at 30 days, the individual returns verification of rent, wages, and child support, but fails to return all mandatory verification. **Do not** reactivate the application until all of the mandatory verification is received.

5. If the household returns requested verification during the extended 30-day period, after the application has been denied, and it is discovered household circumstances have changed, do the following:

   a. Reactivate the case immediately and process;

   b. Pro-rate benefits from the date verification is received; and

   c. Enter a case change for the new information and issue an RFI requesting verification of the change, allowing the normal 10 days to return the verification.

      If this is a Simplified Reporting (SR) household and the verification is not returned, the case cannot be closed unless it is one of the changes SR households are required to report.

6. When information is requested, be specific about the information needed. If income for the prior two months is needed, the original RFI should reflect the exact two months. If information is returned in the 30 days following the denial/discontinuance, use the same 2 months of verification. If the household returns all the requested information, process the application.

B. When a household applies for multiple programs, follow the normal procedure. However, advise the household that their due dates to return requested verification may be different, and they should make every effort to return the requested verifications for all programs by the earliest due date.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6420 – R. 5/31/26 – OMTL – 695
Issuance Time Standards at Application

Provide the household a timely opportunity to participate as follows:

A. **[**If the household is not eligible for expedited services, ensure that the household's benefits are available no later than the 30th calendar day following the date of application. If all mandatory verification has been provided, process the application by the 28th day to allow at least two days mailing time after approval for the household to receive benefits by the 30th day.

B. If the household is eligible for expedited services, provide benefits no later than the 5th calendar day following the date of application. Participating households must receive their Electronic Benefit Transfer (EBT) card in the mail no later than the 5th calendar day; allow two days for mail delivery. The count begins with the first day following the date of application. Refer to MS 6400 for additional information.

   If the 5th calendar day falls on a weekend or holiday, the benefits must be made available by the next business day.

C. Households applying after the 15th day of the month are issued the initial or prorated month's benefits **and** the second month's benefits when the application is approved, except in the following situations:

   1. Households determined ineligible for the first month but eligible for the second month receive only the second month's benefits when the application is approved;

   2. Households eligible for zero benefits the first month, because the prorated allotment is less than the minimum allotment, receive only the second month's allotment when the application is approved.

D. For applications with severely delayed processing (more than 1 year) due to agency error, refer to MS 6790.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6430 – R. 5/31/26 – OMTL – 695
Expedited Services Criteria

[Determine eligibility for expedited services during application prescreening. Households do not have to request expedited service to receive it and cannot waive the right to expedited service.

The following households are eligible for expedited services:

A. Households with liquid resources of $100 or less, and who:

   1. Have gross monthly income of less than $150; or

   2. Are destitute migrant or seasonal farm workers.

B. Households whose combined gross income and liquid resources are less than the household's actual monthly shelter expenses. Shelter expenses include rent or mortgage, electricity, fuel oil, coal, telephone, sewer, gas (natural or propane), wood, water, and garbage. **Do not** include taxes and insurance on the property in determining the household's shelter expense. If the applicant is eligible to use the Standard Utility Allowance (SUA) or Basic Utility Allowance (BUA), use the appropriate standard as the utility expense when determining eligibility for expedited services. If the household is not entitled to the SUA or BUA, use the actual utility expenses to make the determination.

C. Verification of noncitizen status is not required for expedited services. However, verification must be provided prior to determining ongoing eligibility.

   If an individual requests expedited services but is not entitled to them, process the application as any other non-expedited services application.

   There is no limit to the number of times a household may be certified under expedited procedures as long as, prior to each expedited certification, the household either completes the verification requirements that were postponed at the last expedited certification or was certified under normal processing standards since the last expedited certification.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6450 – R. 5/31/26 – OMTL – 695
Special Issuance Timeframes for Expedited Services

[The following special issuance timeframes exist for certain households eligible for expedited services:

A. If the household member is a resident of a Drug Addiction or Alcohol (DAA) treatment center, make the household's benefits available no later than five calendar days following the date the application was filed.

B. If the household member is a resident of a shelter for battered persons and children, make the household's benefits available no later than five calendar days following the date the application was filed.

C. If a telephone interview is conducted for a household and the application signature cannot be obtained by phone, the application must be mailed to the applicant for signature. The mailing time and the time the application is in the household's possession are not included in determining the time standards for expedited services. Expedited processing timeframes begin on the date the signed application is received in the local office. Enter the date the signed application is received in the Signature Date field. Make the household's benefits available no later than five calendar days after the signed application is received at the local office.

D. If prescreening procedures fail to identify a household as being entitled to expedited services and it is later discovered that the household is entitled, provide expedited services to the household within five calendar days of the date of discovery. Calculate the processing timeframes from the date it is discovered that the household is entitled to expedited services rather than from the date of application.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6460 – R. 5/31/26 – OMTL – 695
Assigning Certification Periods for Expedited Services

[The system-assigned certification periods for expedited applications with postponed verification cannot be changed.

A. Expedited applications with postponed verification taken on or before the 15th of the month are assigned a one-month certification period. A recertification interview must be completed by the last working day of the month in which the application is approved.

B. Expedited applications with postponed verification taken after the 15th of the month are assigned a two-month certification period. A recertification interview must be completed by the last working day of the last month of the certification period.

   A recertification interview **must** be conducted. If the individual does not complete the recertification interview, the case is discontinued at the end of the certification period. If the individual reapplies, they are not eligible to receive expedited services for the reapplication month unless the household completes verification requirements that were postponed at the previous expedited certification.

C. If a household meeting expedited criteria provides all verification, the system assigns a normal certification period.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6470 – R. 5/31/26 – OMTL – 695
Delays in Processing

[If the household's eligibility and opportunity to participate are not provided within 30 calendar days following the date the application was filed, use the following procedures:

A. If the delay is caused by the household, and any of the following conditions apply, deny benefits for the month of application on the 30th day following the date of application or the date of the initial Request for Information (RFI), whichever is later:

1. The household failed to complete the application process.

2. The household failed to complete the application form.

3. One or more members of the household failed to agree to work registration after being informed of the requirement and given up to 10 days from the date of notification to agree to work registration for those members. Benefits are denied only for the member(s) who refuse to agree to work registration.

4. The household failed to provide mandatory verification when the worker provided all required assistance to obtain the verification, and when the worker allowed the appropriate amount of time on the RFI for the household to provide the verification.

5. For households that fail to make contact with the agency for their first scheduled appointment, the system sends a notice advising the household that they have missed their appointment and to request they reschedule the appointment within 30 days following the date the application was filed. If the household fails to contact the agency for the first interview and is rescheduled at the household's request after the 20th day but before the 30th day following the date the application was filed, the household must complete the interview, supply verification, and agree to work registration for all members by the 30th day.

6. All requests for the individual’s cooperation in completing the application process after the application is filed must be made in writing by sending an RFI to the household. All appointments must be scheduled on the appointment calendar, and the system will generate the appropriate notice.

B. If the delay is caused by the agency, and any of the following conditions apply, provide benefits to the household retroactive to the date of application, if eligible:

1. The agency fails to provide required assistance to the household;

2. The household completes all necessary actions timely, but the agency fails to complete the application process timely; or

3. The agency fails to provide the household with an RFI, listing the required verification.

For applications with severely delayed processing (more than 1 year) due to agency error, refer to MS 6790.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6475 – R. 5/31/26 – OMTL – 695
Reinstatement and Reactivation

A. Reinstatement

1. **[**Reinstate a case when it has been discontinued or denied due to agency error. This includes cases that are denied in error during the mid-review period when Form FS-2 SNAP Review and all required verification are provided by the designated due date per MS 6410 and MS 6480. Click the "Reinstate" button on the Case Summary screen and follow system prompts. Document the case thoroughly.**]**
2. A reinstatement should never pend, as it should never be initiated unless all information necessary to process the case has been provided.
3. When a case is reinstated, it is restored to the circumstances as they were at the time of discontinuance. If anything has changed, complete a case change **after** the reinstatement is complete.
4. Never reinstate an application that was correctly denied. If an application is correctly denied, it must be entered as a reapplication.

B. Reactivation

The Reactivate function assigns a new certification period and applies to applications and recertifications.

1. Reactivate a case when all mandatory verification has been provided, and a 30/60 is appropriate.
2. A reactivated case should **never** pend, as it should never be initiated unless **all** mandatory information has been provided.
3. If the case was previously pended for both mandatory and optional verification, the optional information should be removed so the case will not pend.
4. Click the "Reactivate" button on the Case Summary screen and follow system prompts.
5. If anything has changed, complete a case change **after** the reactivation is complete.
6. Document the case thoroughly.

The reactivate button will only be enabled during the 30/60 timeframe. SNAP verifications required on this screen will be only those that caused the case to deny. Other Requests For Information (RFI)s with a due date past the original due date will be displayed but will not be mandatory. After this period, the household must submit a new application, which is accessed via the "Reapply/Add Program" button.

Note: SNAP 30/60 policy does not apply to cases that have been denied as a result of an unverified case change.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6480 – R. 5/31/26 – OMTL – 695
SNAP Interim Review Overview

A. [Form FS-2, SNAP Mid-Review, is automatically generated to the appropriate households during the month before the midpoint of the household's certification period.

   Example: households with a 12-month certification period will receive Form FS-2 during the 5th month of certification.

   If a household consisting entirely of elderly/disabled members without earned income is changed to include a non-elderly/disabled member or a member with earned income prior to issuance of benefits for the sixth month of the certification period, the household will then receive an FS-2 in the 5th month of certification.

B. Form FS-2 can be entered from the 25th day of the 5th month through the 17th day of the mid-review due month. If the form is not acknowledged by the 7th day of the mid-review due month, a notice is generated to inform the household that the SNAP case will discontinue unless the form and all necessary verification are provided and processed timely.

C. Determine the date the FS-2 was received as either the task received date or the date stamp on the form. If the FS-2 is received after the office closes, it is considered received the next business day. If the 17th day of the month the FS-2 is due falls on a weekend or holiday, the due date is extended to the next business day after the weekend or holiday.

D. If a blank FS-2 is received, meaning there is no signature and **no** questions have been answered, or if an FS-2 is received that has no signature and no changes reported, do **not** start the review. Generate a manual Request for Information (RFI) stating what is needed and the date the information must be provided to avoid discontinuance of benefits. Scan and file the original FS-2 into the Electronic Case File (ECF) and mail the original FS-2 and the RFI to the household.

E. If an FS-2 is received signed, initiate the review in Worker Portal and then:

   1. Enter all changes reported on the FS-2 into the appropriate data collection screens. Enter the verification sources, if provided, run eligibility, and dispose of the case.
   2. If verification is not provided, client statement is acceptable for the following elements unless questionable:
      a. household composition;
      b. residency;
      c. shelter expenses; and
      d. address.

      If not provided, request verification for income related fields, and run eligibility to generate an RFI to the household.
   3. If no changes are reported, **only** navigate to the eligibility summary, run eligibility, and dispose the case.

F. If an FS-2 is received that does not have a signature and changes were reported, process the FS-2, and navigate to the Pending Verification Summary screen to manually type in the RFI comments section that the FS-2 was received without a signature and request that the form be signed and returned. Scan the FS-2 into ECF and mail the original along with the RFI to the household.

G. The due date for the FS-2 when scanned into ECF will be the 15-day default task due date. A listing of FS-2s received for processing will be generated daily. This listing is to be used to monitor completion of the interim reviews.

H. IVR (Interactive Voice Response) allows individuals to initiate and submit no-change FS-2s through the Self-Service Portal (SSP). Worker Portal allows a SNAP Mid-Year Review to initiate through SSP if the following criteria are met:

1. The FS-2 is marked by Worker Portal as Review Required (status is updated by Worker Portal on the 25th of the previous month of the FS-2 due date), and
2. Individual age (as of IVR processing date) is greater than or equal to:
   a. 16 if Head of Household (HOH); or
   b. 18 if other than the HOH,
   c. The individual is eligible to receive benefits or ineligible due to not meeting technical eligibility criteria, such as refusing to provide a Social Security Number (SSN), etc. This does not include Intentional Program Violations (IPV). Excluded members, such as out-of-household, not a resident of KY, or an individual living in an ineligible facility, are not eligible to initiate a mid-review; and
   d. The date the FS-2 is initiated is on or prior to the 17th day of the mid-review due date month. If the 17th of the mid-review due date month is a weekend or holiday, the due date will be extended to the first business day following the weekend or holiday.

I. If the individual indicates there are changes, they are advised to complete the FS-2 and upload the document, along with supporting documentation, through the SSP, or fax it to 502-573-2007. If they indicate no changes, they may proceed and sign via IVR.

Furthermore, when an FS-2 is initiated via the IVR, the same action cannot be performed in Worker Portal. If the individual does not agree to a voice signature, details are systematically loaded to the case, and the FS-2 is not processed. If the FS-2 is not completed by the last day of the mid-review due month, the case is discontinued.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6485 – R. 5/31/26 – OMTL – 695
Snap Interim Review Process

A. If Form FS-2, SNAP Mid Review, is signed, select "Review" on the case summary screen:

1. If the individual reported changes, go to the "Data Collection" tab and select the section that corresponds to the reported change. Enter the verification if provided.
2. If verification of the reported change is not provided, it will be requested on the Request for Information (RFI).
3. Run Eligibility.

B. If the received FS-2 does not have a signature:

Navigate to "Manual Correspondence" on the "Correspondence" tab and manually type a notice stating that the review was received without a signature and to return the form with their signature. After scanning the FS-2, mail the notice and the original to the individual for signature.

C. If the received FS-2 does not have a signature and changes were reported:

1. Follow all steps in "A"; and
2. Navigate to the "Correspondence" tab and search for the RFI that was generated for the reported changes. Manually type in the comments that the review was received without a signature and return the form with their signature. After scanning the FS-2, mail the RFI and the original to the individual for signature.

D. The household may return verification by fax or other electronic means. If possible, use collateral contacts to assist the individual in getting the required information. When contacting collaterals, only request the information needed to process the action. Do not disclose the information is being used for SNAP purposes.

E. Once the review process is completed, benefits for the 7th month of certification will be issued on or before the household's normal monthly issuance date.

F. If the household fails to return a complete FS-2, the case is automatically discontinued.

G. If the household fails to return all mandatory verification timely, the case is automatically discontinued.

H. If the case is discontinued because the agency did not receive the requested information and the recipient states they returned the information, review the case situation to determine if the case should be reinstated. Document in the case record the actions taken to process the case.

I. If an individual contacts the agency to report the loss or non-receipt of Form FS-2, search the case in “Correspondence” for the previously issued FS-2. Then, reprint and mail the form, or give it to the individual if in the office.

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6490 – R. 5/31/26 – OMTL – 695
Snap Interim Review Verification Requirements

Review all information reported by the household on Form FS-2 SNAP Mid Review and update the case information if a change is reported. The household has until the 17^{th} day of the month to provide the FS-2 and any required verification. If the 17^{th} falls on a weekend or holiday, verification is due the first business day after the weekend or holiday.

The household's statement is accepted for all changes except:

A. Changes in the source(s) of income, unearned income amount of more than $100 per household member, as well as changes in a household member's employer, salary, or wage rate, and/or full or part-time employment status must be verified.

B. Income, or the lack of income, for any new adult household member.

C. Verify changes in the legal obligation to pay child support, including the amount of the obligation. Also, verify the amount of child support the household pays to individuals outside the household. Reported information that does not indicate a change is verified only if the information is incomplete, inaccurate, inconsistent, or outdated; and

D. Any questionable information.

[If verification of any questionable information is not received, the case will discontinue on the 17^{th} day of the month.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6500 – R. 7/15/26 – OMTL – 702
Overview of Recertification Time Standards

[At the expiration of the certification period, entitlement to SNAP ends. Establish further eligibility only when a completed application, an interview, and verification are provided. Do not continue benefits beyond the end of a certification period without a new determination of eligibility. All households keeping timely recertifications are entitled to uninterrupted SNAP benefits.

Use the following timeframes to process recertification applications based on whether the household makes a timely application:

A. If a household submits an application for recertification and meets the interview requirement by the 15th calendar day of the month, act on the recertification no later than the last workday of the month. Provide benefits to the household no later than its normal issuance date. If the household is not provided an opportunity to participate in the first month of its new certification period, the household is entitled to restoration of lost benefits.

B. If a household does not submit an application for recertification and/or complete interview requirements by the 15th calendar day of the month, act on the recertification no later than 30 days from receipt of the application; the household loses its right to uninterrupted benefits and maintenance of its normal issuance cycle. The household must be able to access their benefits no later than the 30th day from receipt of the application for recertification.

C. Consider a recertification from an expedited application timely if the application for recertification and an interview are completed within 15 calendar days of the initial approval or 17 calendar days if the Request for Information (RFI) is mailed to the household.

D. When a non-case decision (NCD) worker or any worker tries to dispose a case that pends for supervisor approval, a message will appear stating that a supervisor has to sign off on the case before it can be processed, and a supervisor task will be generated.

If the household fails to submit an application for recertification or the agency fails to act on a recertification application, the case is automatically discontinued on the last calendar day of the month.

For recertifications with severely delayed processing (more than one year) due to agency error, refer to MS 6790.]

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6520 – R. 7/15/26 – OMTL – 702
Verification Time Standards at Recertification

For recertifications, the household must provide mandatory verification as follows:

A. **[**If a household submits a timely application for recertification, it has until the last business day of the month the recertification is due to provide the requested mandatory verification. Optional verification is not required.

B. If a household files a timely application for recertification but fails to return the requested mandatory verification by the end of the certification period, the case will be discontinued. If the requested mandatory verification is returned within 30 days following the end of the certification period, the case is reactivated as an application, and benefits are prorated from the date the requested mandatory verification is provided. The household does not have to reapply.

   Example: An application for recertification is filed on April 10th and pends for mandatory verification. The household has until April 30th to complete the required action. The case discontinues on the evening of April 30th. The requested mandatory verification to process the case was received on May 6th. The application filed on April 10th is reactivated with benefits prorated from May 6th, and the household does not have to reapply.

C. If a household files an untimely application for recertification and fails to return the requested mandatory verification within 30 days, the case is discontinued. If the requested mandatory verification is provided within 30 days of the date of discontinuance, the case is reactivated as an application, and benefits are prorated from the date the requested action was completed and received. The household does not have to reapply.

   Example: An application for recertification is filed untimely on April 20th and pends for mandatory verification from the household. The household has until May 20th to complete the required action. The case discontinued the evening of May 20th. The mandatory verification was provided on May 29th. The application for recertification filed on April 20th is reactivated as an application with benefits prorated from May 29th. The household does not have to reapply.**]**

   Note: When optional verification has been received, but mandatory verification is still missing, **do not** reactivate the case until all mandatory verification is received.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6525 – R. 7/15/26 – OMTL – 702
Change Reported Prior to Processing Recertification

While a recertification is pending, handle reported changes as follows:

A. **[**If a household provides required verification at the time a change is reported, update the pending recertification with the changed information and verification. The change becomes effective when the recertification is processed.

B. For Changes to Timely and Untimely Recertifications:

1. If a household reports a change without verification, and the change is made with 10 or more days remaining before the 30th day, the RFI due date remains 30 days from the recertification initiation date (or next business day, if the 30^{th} day is a weekend or holiday).

2. If a household reports a change without verification, and there are less than 10 days remaining before the 30^{th} day, the RFI due date is 10 days from the date the change is initiated. (or the next business day, if the 10^{th} day is a weekend or holiday).

Refer to MS 6710 for additional details on changes to pending applications.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6530 – R. 7/15/26 – OMTL – 702
Issuance Time Standards at Recertification

[Use the following time standards for issuing benefits to recertified households:

A. If the household meets the criteria for a timely recertification, provide benefits by the household's normal issuance date.

B. If the household does not meet the criteria for a timely recertification, provide benefits no later than the 30th calendar day following the date the application is received. If the 30th day falls on a weekend or a holiday, ensure that the household's issuance is available no later than the first workday preceding the 30th day.

When information is requested, be specific about the information needed. If income for the prior two months is needed, the original Request for Information (RFI) should reflect the exact two months. If information is returned in the 30-day period following the discontinuance, the same two months of verification are used if the household returns all mandatory verification requested.

Whether the household submits a timely or untimely application for recertification, notify the household of its ineligibility or a decrease in benefits no later than the appropriate timely issuance day listed in this section.

For recertifications with severely delayed processing (more than one year) due to agency error, refer to MS 6790.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6540 – R. 7/15/26 - OMTL – 702
Failure to Complete Recertification

[Households that fail to submit an application for recertification, or whose case is not processed by the last business day of the month the recertification is due, are automatically discontinued.

If a household is discontinued in error, click the "Reinstate button on the Case Summary Screen. Do not prorate benefits.

If a household fails to submit an application for recertification prior to the end of its certification period, and the household submits a new application during the following month, it is treated as a new application. If the household meets expedited SNAP criteria, provide them with expedited services. Prorate benefits from the date of application **only** if there is any lapse in the household's certification periods. If a migrant or seasonal farmworker household received SNAP benefits in the month prior to the application, do not prorate the benefits for the application month.**]**

Volume 2 – Supplemental Nutrition Assistance Program
MS 6600 – R. 7/15/26 – OMTL – 702
Assigning Certification Periods

Establish a definite period of time during which a household is eligible to receive benefits.

[Certification periods conform to calendar months. At initial application, the first month of the certification period is generally the month of application, even if the household's eligibility is not determined until a subsequent month, provided all eligibility criteria are met for the month of application.

At recertification, begin the certification period with the month following the last month of the previous certification period.

Certification periods are assigned as follows:

A. **[A 4-month certification period** is assigned to households that include an Able Bodied Adult Without Dependents (ABAWD) individual who is not disabled/incapacitated and does not include a member who is less than 14 years old.

B. **A 12-month certification period** is assigned to households that do not meet the criteria for a four-month or a 36-month certification period.

C. **A 36-month certification period** is assigned to households in which all adult members are age 60 or older **and** receive either Retired, Survivors, and Disability Insurance (RSDI) **or** Supplemental Security Income (SSI) with no earned income. Children with no earned income can be present in the home. A reminder notice of reporting requirements will be issued to these households in the 12^{th} and 24^{th} months of the 36-month certification period.

If a household meets expedited criteria and provides all verification prior to approval, assign a normal certification period.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6705 – R. 5/1/26 – OMTL – 694
Simplified Reporting Households

All households are considered Simplified Reporting (SR) households and are subject to SR requirements. Households are only required to report when:

A. **[**Total gross (earned and unearned) monthly income exceeds the Federal Poverty Level (FPL) used to determine eligibility for their appropriate household size. For example, a household that is approved under 130 percent FPL must report when it exceeds 130 percent FPL. Households that are approved under 200 percent FPL must report when income exceeds 200 percent FPL;

B. A member of the household, who is 18 through 64 and subject to Able Bodied Adults Without Dependents (ABAWD) requirements, begins to work less than 20 hours per week; or

C. A member of the household receives substantial lottery or gambling winnings that may put the household over the resource limit. See MS 5000 for details regarding resource limits for households with and without an elderly or disabled member.**]**

These changes must be reported by the 10th of the month following the month the change occurred.

[Example: A household with no income approved under 130 percent FPL begins receiving income on May 12, causing gross monthly income to exceed the 130 percent FPL for their household size. The change must be reported by June 10.

Advise households they have the right to report other types of changes in their household that may impact their SNAP case but are not required to do so. For changes in household composition, households only have to report when the change in household size results in the household's gross monthly income exceeding the FPL threshold established for the last reported household size. The household must compare the income for the entire household to the FPL income guideline for the household size last reported**.**

Example: A household applies in May and reports three household members. In July, two more individuals moved in. If the recipient does not report this, they must compare the income of all five household members to the FPL threshold for a household size of three. If the recipient does report the change, then their household size will change to five and will be compared to the FPL threshold for a household size of five.**]**

Ensure recipients understand the differences in reporting requirements for each program. SR policy only applies to SNAP households and does not apply to Kentucky Transitional Assistance Program (KTAP) and Medical Assistance cases.

If a household voluntarily reports any change during the certification period, act on the change. Enter the change and request verification, if required. The change follows normal processing procedures. When a change is reported, all technical eligibility factors related to the change must be explored.

Example: If a new member is reported, all technical eligibility questions, such as those relating to citizenship, received benefits out of state, must be asked.

[Note: Households with substantial lottery or gambling winnings won in a single game before taxes, or other withholdings that are equal to or greater than the maximum allowable financial resource limit for elderly or disabled members, are required to report their winnings.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6707 – R. 5/1/26 – OMTL – 694
Simplified Reporting – Acting on Changes

[Use the following procedures to act on all changes reported to the agency, regardless of how they are reported.

A. Act on all changes in the SNAP case when they are reported directly to the agency by the household. This includes **all** programs.

B. If a household reports a change in income, and the new circumstance is expected to continue for at least one month beyond the month in which the change is reported, act on the change in accordance with policy outlined in MS 6750 and MS 6760.

C. If a household member moves from one household into another household, or becomes a separate household, remove the member from the first household to avoid duplicate participation**.**

D. Act on changes reported from any source, such as, but not limited to, the following:

1. The household;
2. A "Hotline" referral;
3. Other matches, such as the quarterly wage data match, prisoner match, and batch matches; or
4. When a household member receives substantial lottery or gambling winnings.

E. When a change is reported, enter the change on the system. A Request for Information (RFI) will be issued to verify the change, if necessary. When the requested verification is returned, enter the verification, and allow the system to process the change. If the verification is not returned, the system will act on the change in accordance with MS 6750 and MS 6760, as appropriate.

If enough information is not provided to enter the change on the system, and the household cannot be reached by telephone, click the "Unclear Information" button on the Case Summary screen to send an RFI requesting the individual contact the agency to verify information received by a third party or provide verification needed to process the change. Document the case thoroughly to explain why the Unclear Information button was used and what was requested on the RFI. Allow the household 10 days from the date the RFI is mailed to contact the agency or to provide the verification. If no contact is made and mandatory verification is not returned within 10 days, households with more than one or two members will automatically be discontinued or denied due to non-cooperation, and a Notice of Adverse Action will be mailed to the household. Households with one or two members will not discontinue; however, their monthly SNAP allotment will be reduced to the minimum monthly amount until their next recertification.

System Inquiries, including Eligibility Advisor (EA), cannot be used as verification for income without first speaking with the individual to ensure the income is correct.

Example: On June 5, a match is received that an individual who is included in a five-member SNAP household is employed. The employer and wages are available to view on EA. Attempts to contact the individual by phone to ensure EA accuracy are unsuccessful, and EA cannot be used. An RFI is mailed to the household requesting verification of employment income. On June 15, the verification has not been returned, and the household has not made contact to discuss the RFI. The system will discontinue the SNAP case.

F. After cut-off, do not enter changes that affect the next month's benefits when the case is due for a recertification in the next month.

The worker who receives the reported case change should document the reported change and the reason for the delayed action in case comments and upload any supporting documents to the Electronic Case File (ECF).

The worker completing the individual's recertification interview is responsible for reviewing case comments and ECF prior to the interview and must enter the reported change as part of the recertification.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6710 – R. 6/1/26 – OMTL – 694
Reporting Requirements and Entering Changes for Pending Applications

Explain to the applicant their responsibility to report changes during the interview.

A. **[**All applicants must report changes as follows:

1. Changes related to eligibility and benefits that occur between the time an application is filed and the time of the interview must be reported at the certification interview.

2. Changes related to the household's eligibility and benefits that occur after the interview but before approval of the application must be reported within 10 calendar days of the date of the Notice of Eligibility.

B. Changes must be completed using the following methods, regardless of which program for which the change is reported.

When a change is reported on a pending application in "Intake" mode, process as follows:

1. Enter the case via "Proceed to Verification.";

2. Enter the appropriate information and verification. If verification is not provided, select "Not Verified.";

3. Run eligibility. If verification is required, a new Request for Information (RFI) will be generated.**]**

C. Any unverified change reported **on or prior to** the reference date will generate an RFI that aligns with the case's timely action date. The RFI due date will be 30 days from the application date (or the next business day, if the 30^{th} day is a weekend or holiday). The reference date is 10 days prior to the 30^{th} day.

1. Any unverified information with an RFI due date that is the same as the case's timely action due date will be considered during application authorization.

2. Verification received by the timely action due date is used to determine eligibility and benefit amount for the initial application.

D. Any unverified change reported **after** the reference date will generate a new 10-day RFI. The RFI due date is 10 days from the date eligibility ran (or the next business day if the 10th day falls on a weekend or holiday).

1. All verifications received prior to case authorization are considered for eligibility and benefit calculation as part of the initial application.

2. If benefits are approved without using unverified post-reference date information, this unverified information will be handled as “report a change” after application authorization, in line with change reporting rules.

   Example: A SNAP application was submitted on November 15th, reporting income from Taco Bell, which was unverified. An RFI was issued with a due date of December 15th. On December 10th, the individual reports new income from Walmart, which is unverified. A new RFI is mailed with a due date of December 20th. On December 15th, the individual provided income verification from Taco Bell. The application was approved on December 15th, with Taco Bell income only. After approval, an RFI is issued for income verification from Walmart with a due date of December 20th.

E. Dispose of any program(s) not pending.

Note: Changes to pending applications must be entered via “Proceed to Verification” rather than “Report a Change”. If the information is entered via “Report a Change”, the system will generate an RFI allowing only 10 days to return all requested mandatory verification, causing the application to deny on the 10th day if the requested mandatory verification is not returned. This will result in the case being in error, as the applicant **must** have 30 days from the application date to return the mandatory verification requested on the original RFI.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6730 – R. 5/1/26 – OMTL – 694
Failure to Report Changes

If it is discovered that a household failed to report a required change that would have caused the case to deny, initiate a claim against the household. If the discovery is made within the certification period, the household is entitled to a Notice of Adverse Action if its benefits are reduced or terminated. Do not hold a household liable because of a change in household circumstances that it is not required to report. See MS 6705 for Simplified Reporting household requirements.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6732 – R. 5/1/26 – OMTL – 694
[Death of Head of Household

When the head-of-household (HOH) is reported as deceased, follow the policy below using normal processing procedures.

A. If the HOH dies:

1. Perform a case change, enter the date of death and verification source for the deceased individual, run eligibility, and dispose to discontinue the current SNAP case;

2. If the remaining members wish to continue receiving SNAP, complete a new application in the name of the new HOH;

3. Issue a new Electronic Benefit Transfer (EBT) card in the new HOH's, if needed;

4. All new benefits issued will be accessed with the new EBT account and card; and

5. Advise the household they may continue to spend any remaining benefits issued on the old EBT card until they are exhausted. Eligibility for benefits remaining on the deceased member's card was previously determined for those members and therefore belongs to them.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6735 – R. 5/1/26 – OMTL – 694
Worker Requirements for Acting on Changes in Medical Expenses

[Households eligible for a medical deduction are encouraged to report medical expenses at the time of application, reapplication, and recertification. However, if a household voluntarily reports a change in medical expenses, it must be reported timely for a deduction to be allowed. To be considered timely, the change must be reported within the certification period in which the medical expense was incurred.

Example: The household is certified from 1/1/25 through 6/30/25. The household incurs a medical expense on 4/15/25. To be considered timely, the household must report the expense before the end of the certification period (6/30/25).**]**

A. Handle allowable medical expenses as follows if reported within the certification period:

1. Determine if the reported medical expense was incurred during the current certification period;

2. Enter the reported medical expense and any verification into the system the same day it is reported;

3. If verification is not provided, a Request for Information (RFI) is issued, allowing the household 10 days to provide the required verification;

4. If verification that would increase benefits is not provided within 10 days, the system will revert back to allowing the recipient their previously verified medical deduction. If verification, which would decrease benefits, is not provided within 10 days, the system will apply the client stated amount and take action to decrease benefits; or

5. If verification is provided within 10 days, enter the verification. The change will be effective in the next issuance.

Allow the household the option to receive the entire deduction at one time (the next possible month), averaged over the remainder of the current certification period, or receive a deduction for each month an installment payment is due.

B. Follow steps in item A, for handling allowable medical expenses reported at the recertification interview or within the last month of the certification period. Allow the household the option of considering the entire deduction in the first month of the new certification period, averaged over the new certification period, or receive a deduction for each month an installment payment is due.

C. If the household reports an anticipated medical expense at the time of the certification, but is unable to verify, advise the household that the expense is allowed if the verification is provided during the certification period. Therefore, such reported expenses cannot be considered in the following certification period unless the verification is provided in the last month of the certification period in which the bill is reported.

D. **[**Do not act on changes to medical expenses during the certification period if they come from a source other than the household and require contacting the household to verify. Only act on changes in medical expenses if they come from a source other than the household, if those changes are verified upon receipt, and do not require contact with the household.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6740 – R. 5/1/26 – OMTL – 694
Worker Requirements for Acting on All Other Changes

[Act on all changes reported to the agency in writing or by other means, such as contacting call services, in person, through the Self-Service Portal (SSP), or through a computer match.

A. Enter the change on the system the day it is reported to determine if it affects the household's eligibility or allotment, except as outlined in MS 6750.

1. If verification is provided, enter the change and verification, run eligibility, and dispose the case.
2. If verification is not provided, enter the change and pend the case for verification.
3. If verification of a change that would increase benefits is not returned within 10 days, the system will revert to allowing the recipient's previously verified information.
4. If verification of a change that would decrease benefits is not returned within 10 days, the system will apply the client's stated amount and decrease benefits. This **does not** apply to shelter or utility deductions. See MS 6765 for acting on changes of address and shelter.
5. If verification of a change that would deny or discontinue benefits is not returned within 10 days, the system will discontinue cases with three or more household members. Cases with only one or two members will not be denied or discontinued; they will instead receive the minimum benefit amount until the end of the certification period.

Review all eligibility criteria to determine if any other elements are affected by the reported change.

Example 1: The household reports that their earned income has been terminated. The household is receiving a childcare deduction. Review the deduction to determine if the household is still incurring the expense and if it is still eligible for the deduction. If not, end the childcare deduction.

Example 2: The household reports a member's loss of Retirement, Survivors, and Disability Income (RSDI) or Supplemental Security Income (SSI). Inquire about changes in medical expenses.

B. Document the reported change.

C. A Notice of Eligibility is generated to advise the household of the income and deductions considered in determining their eligibility and benefits.

D. Take action to discontinue benefits before the next issuance when reliable information is received that the household is moving out of Kentucky.

For a change to take effect the following month after being reported, the change must be completed by the monthly cutoff date. The cutoff date for the 1st monthly issuance is the 7th business day before the end of the month. To calculate the cutoff date, count back from the last business day and exclude weekends and holidays.

The date the change is reported is the date the agency receives the household's written notification, or the date the change is reported to the agency.

Provide a restoration or establish a claim due to agency error if the worker fails to take action on a change within the time limits, and incorrect benefits are issued.

E. After cut-off, do not enter changes that affect the next month's benefits when the case is due for a recertification in the next month.

The worker who receives the reported case change should document the reported change and the reason for the delayed action in case comments and upload any supporting documents to the Electronic Case File (ECF).

The worker completing the individual's recertification interview is responsible for reviewing case comments and ECF prior to the interview and must enter the reported change as part of the recertification.

Note: Refer to MS 6710 for details on changes to pending applications.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6745 – R. 5/1/26 – OMTL –694
System Action on SNAP Changes with Missing Verification

The system takes the following action when a SNAP change is reported by a member of the household and entered with no verification:

A. After 10 days, **apply a change** that results in a **decrease in benefits** if the following items are not verified:

   1. **[**Earned income, including self-employment, farm income, or boarder income;
   2. Unearned income, including self-employment or farm income;
   3. Medical expenses;
   4. Dependent care expenses;
   5. Resources; and
   6. Entitlement to Standard Utility Allowance (SUA) or Basic Utility Allowance (BUA).

   Note: If an unverified change results in the discontinuance of benefits, only households with three or more members will be discontinued. One- and two-member households will receive the minimum monthly allotment until the end of the certification period.**]**

B. After 10 days, **ignore a change** that results in an **increase in benefits** if the following items are not verified:

   1. **[**Earned income, including self-employment, farm income, or boarder income;
   2. Unearned income, including self-employment or farm income;
   3. Medical expenses;
   4. Dependent care expenses; and
   5. Entitlement to SUA or BUA.**]**

C. Shelter and actual utility expenses: if not verified, the system will count $0 regardless of whether the change would cause an increase or decrease in benefits.

D. **[**After cut-off, do not enter changes that affect the next month's benefits when the case is due for a recertification in the next month.

   The worker who receives the reported case change should document the reported change and the reason for the delayed action in case comments and upload any supporting documents to the Electronic Case File (ECF).

   The worker completing the individual's recertification interview is responsible for reviewing case comments and ECF prior to the interview and must enter the reported change as part of the recertification.

   Note: Refer to MS 6710 for details on changes to pending applications.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6750 – R. 5/1/26 – OMTL – 694
Acting on Changes Which Increase Benefits

If a household reports a change that increases benefits, take the following action on the day the change is reported:

A. **[**Enter the change on the system.

B. If the change does not require verification, enter the change with client statement (CS) as the verification source.

C. If the change must be verified, inform the household that verification of the change must be provided within 10 calendar days of the date reported. Enter the change to pend the case and issue a Request for Information (RFI) to the household. If the 10th calendar day falls on a weekend or holiday, the system allows the household until the next business day to provide the verification.

D. If the household fails to provide the required verification within 10 calendar days, the reported but unverified information is not considered in allotment calculations. The system will revert to allowing the recipient’s previously verified amount. However, if verification is received at a later date, take action on the reported change no later than 10 days after verification is received.

E. Do not increase benefits when a household's benefit from another means-tested program is decreased due to a failure to comply with requirements. See MS 5220 for instructions.

F. A Notice of Eligibility is sent advising the household of action taken.

Note: Refer to MS 6707 for information regarding acting on changes reported after cut-off that affect the next month's benefits when the case is due for recertification in the next month. See MS 6710 for additional details on changes to pending applications**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6760 – R. 5/1/26 – OMTL – 694
Acting on Changes Which Decrease Benefits
[If a household reports a change that decreases benefits or makes the household ineligible, take the following action:

A. Enter the change on the system.

B. If the change does not require verification, enter the change using Client Statement (CS) as the verification source.

C. If the change must be verified, inform the household that verification of the change must be provided within 10 calendar days of the date reported. Enter the change to pend the case and send a Request for Information (RFI) to the household. If the 10th calendar day falls on a weekend or holiday, the system allows the household until the next business day to provide the verification.

D. The system acts on the change after 10 calendar days, effective with the allotment issued the month following the month the 10-day timely notice period expires, unless the household requests a fair hearing and continuation of benefits.

E. If the action is taken without verification, advise the household that the missing verification must be supplied at the time of recertification. If there is a decrease in benefits, the household will be issued a Notice of Adverse Action informing them of the change. Regardless of whether verification is provided, a Notice of Eligibility is sent advising the household of action taken.

F. If a verified change results in the discontinuance of benefits, only households with three or more members will be discontinued. One and two-member households will receive the minimum monthly allotment until the end of the certification period.

Note: Refer to MS 6707 for information regarding acting on changes reported after cut-off that affect the next month's benefits when the case is due for recertification in the next month. See MS 6710 for additional details on changes to pending applications**]**

Volume 2- Supplemental Nutrition Assistance Program (SNAP)
MS 6765 – R. 5/1/26 – OMTL – 694
Acting on Change of Address

[When the household reports a change of address, take the following action:

A. Update the address.

1. Add the new address start date on the Primary Applicant Address Information Screen with the date the household began residing at the new address.
2. Add the new physical address and a mailing address, if applicable.

B. Verify household composition.

1. After the address is changed, the system will automatically navigate to the household composition screen, as it is required to verify household composition when an address change occurs.
2. Enter verification of household composition if it is available at the time of change. If no verification source is available at the time of change, enter as Not Verified to allow the case to issue a Request for Information (RFI) that will allow 10 days to provide the requested verification.

C. Update shelter expenses.

1. Enter an "End Date" for all active shelter and utility expenses for the old address.
2. If the household received shelter and/or utility deductions at the previous address, inquire with the household about possible shelter and utility expenses at the new address. The household's entitlement to these deductions begins anew with the change of address.
3. The "Begin Date" of the shelter deductions must be the same as or a later date than the "Begin Date" of the address; otherwise, the system will recognize that the shelter deductions are no longer allowable.
4. Enter verification of shelter expenses if verification is available, or enter the unverified client stated amount of reported expenses at the new address and allow the case to pend. An RFI will be issued requesting proof of the unverified expense. If the individual does not provide the requested verification within 10 days, their Supplemental Nutrition Assistance Program (SNAP) allotment will be recalculated without the deductions.

   Note: If the Standard Utility Allowance (SUA) was verified by receipt of the Low-Income Home Energy Assistance Program (LIHEAP), the household may still use LIHEAP as the verification source if the assistance was received in the prior 12 months and other technical eligibility factors are still met at the new address.

D. Residency is verified at application only. Do not verify residency at a change of address unless there is reason to believe the household no longer lives in Kentucky.

E. Process and document the case change action(s).

F. When individuals report a change of address, advise them to complete a change of address through the post office to ensure mail is delivered to the new address.

G. When an individual reports they have moved out of state, it is essential to update the case with the new out-of-state address for all relevant members. Additionally, it is necessary to change the residency status to reflect the state of their new residence. Completing these steps will enable the individual to receive their discontinuance letter, which may be required for reapplication in their new state.

Note: Refer to MS 6707 for information regarding acting on changes reported after the cut-off date that affect the next month's benefits when the case is due for recertification in the next month. See MS 6710 for additional details on changes to pending applications**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6770 – R. 5/1/26 – OMTL – 694
Providing Supplementals

A household is eligible for a supplemental issuance based on a change if one of the following applies:

A. A member is added, and the member is not a member of another certified household; or

B. **[**There is a decrease of $100 or more in the household's gross monthly income.

For active cases, at case change or recertification, when a change is reported, enter the date the individual became aware of the change and the date the individual reported the change. If the change was reported untimely, staff should re-run eligibility from the first day of the month the individual became aware of the change. If benefits are owed to the household for any of the previous months, they will be shown on the Underpayment Discrepancies screen after running eligibility. Once the case is disposed, the system will automatically issue the supplemental payment to the individual.**]**

Manual supplemental requests are completed through Benefit Management and automatically create a task for supervisor review.

If a change is reported on or before the 20th calendar day of the month and verification is provided timely, authorize supplemental benefits beginning the month the change was reported.

If the change is reported after the 20th calendar day of the month and verification is provided timely, authorize supplemental benefits beginning the month the change should have been effective.

If required verification is not provided timely, authorize supplemental benefits beginning the month following the month verification is provided.

[The "Replacements, Supplementals, and Restorations" report captures all related manual and system-issued tasks and captures actions initiated by staff. The report is posted on the 4th workday of each month, reporting information for the previous month. It can be accessed on the system via the "Tools" tab. Regional office staff is to review and annotate this report by the 20th of each month and forward the annotated report to the Nutrition Assistance Branch Inbox.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 6780 – R. 5/1/26 – OMTL – 694
Overview of Public Assistance Changes Affecting SNAP Cases

Public Assistance (PA) SNAP households have the same reporting requirements as any other SNAP household. PA households that report a change in circumstances in their PA case are considered to have reported the change for SNAP purposes. The household is not required to submit separate sets of verification for each case.

[Notify SNAP households whenever their benefits are adjusted as a result of a change in PA benefits. Reduce or remove the PA grant(s) from the SNAP case, effective with the next appropriate issuance.

Note: When an individual is required to report hours monthly for a work participation requirement in another program, and monthly income is included with verification, it is not appropriate to update the individual's income monthly unless there is a substantial change. See MS 6705 for details regarding simplified reporting households.

Example: A self-employed individual is required to provide hours worked monthly for Kentucky Transitional Assistance Program (KTAP) participation and includes his monthly income on the statement. Self-employment income is calculated by averaging the prior 12 months or averaged from the date the individual began working, if less than 12 months. Updating the income monthly is not an accurate representation of the individual's average monthly income.**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 6790 – R. 5/1/26 – OMTL – 694
SNAP Restorations

[When a household receives fewer benefits than it is entitled to receive and the household did not cause the loss, restore those benefits which were lost, regardless of whether the SNAP case is active or inactive. Restorations are completed based on what the household **should have** received if the case had been processed correctly**.** Restorations are completed through Benefit Management.**]**

A. Process SNAP restorations within 30 days from the date of discovery, even if the household is not currently eligible. Complete calculations on form FS-103, SNAP Worksheet, and enter the amount owed on the system.

B. Do not restore benefits for any period of time more than 12 months prior to whichever of the following occurred first:

   1. The date the agency received a request for restoration of benefits from the household;
   2. The date the agency is notified or discovers that the household lost benefits; or
   3. The date the request for a fair hearing was received.

C. While there are situations when the amount restored may cover a period of time greater than one year, the determination of the amount of benefits to be restored can go back no further than 12 months prior to the date indicated above.

   Example: A participating household requests a restoration of benefits for a 12-month period. It takes two months to establish the household's entitlement. The household would receive restoration for more than 12 months.

D. **[**Use up to the entire amount of any restorations to offset already established claims. Do not delay issuing a restoration to allow time for a claim to be established.**]**

E. For each month affected by a SNAP benefits loss, determine if the household was actually eligible. If the case file contains no documentation that the household was eligible, send form PAFS-2, Application Letter, or Notice of Expiration to the household to request information to determine eligibility for the month in question. For each month the household cannot provide the necessary information to demonstrate its eligibility, consider the household ineligible for a restoration.

F. **[**To issue a restoration, navigate to “Manual Issuance Request” via “Benefit Management” in Worker Portal.**]**

   1. To issue a one-time restoration, enter the correct amount as a lump sum. The restoration is processed as a single payment during the daily issuance

cycle. If only one payment is to be made, make sure the amount is entered as a lump sum.

2. If the household requests monthly installments, enter the monthly restoration amount and the benefit begin and end dates. The monthly restoration amounts issue at first issuance for the months entered, whether the case remains active or inactive.

G. A restoration can be issued if benefits are denied.

[Example: Case denied on 9/24; on 2/25, it was determined that an agency error occurred and the household was eligible for benefits for 9/24.**]**

H. Restoration issuances pend for supervisor approval. Once the restoration has been entered, a task will be generated for the supervisor to review.

I. **[**The "Replacements, Supplementals, and Restorations" report captures all related manual and system-issued tasks and captures actions initiated by staff. The report is posted on the 4th workday of each month, reporting information for the previous month. It can be accessed on the system via the "Tools" tab. Regional office staff is to review and annotate this report by the 20th of each month and forward the annotated report to the Nutrition Assistance Branch Inbox.**]**

MS 7000 REQUIRED VERIFICATION AT APPLICATION (1)

Require the following verification for all initial applications that are not eligible for expedited services. Do not require the applicant to reverify information the agency already has unless there is reason to believe that the information possessed by the agency is inaccurate, incomplete, or inconsistent. If the household is required to return information, advise them not to wait until the final due date to return their information, as this may delay the receipt of benefits.

Inactivity of a case for more than 60 days deems verification as outdated, and current verification must be obtained unless the verification currently in a case record is dated specifically for the application time period:

Example 1: A case is discontinued on June 10, 2021. The individual reapplies on September 18, 2021, and requests the PAFS-76 in the prior case record be used as verification of residency. This exceeds the 60-day time period, and current verification must be provided.

Example 2: The same situation as above, but the previous case contained a lease that is for the time period of January 1, 2021, through December 31, 2021. The lease can be used as it is for the current time period.

A. **[**GROSS NONEXEMPT INCOME. Verify all income before initial certification. Complete inquiries on all available programs and system verification sources, i.e., BENDEX, SDX, Eligibility Advisor (EA), Program 48, 4B-Unemployment Insurance Benefits (UIB), and the Department of Child Support Services (DCSS) External Search if children are or have been in the home for all adult household members.

> **Example 1**: An applicant applies for themselves and 3 children and states the children do not receive child support. Inquire DCSS External Search to ensure the household is not receiving child support through the DCSS.
>
> **Example 2**: An applicant states they were recently laid off from their job. Inquire Program 4B-UIB to determine if they have applied for, or are receiving, UIB.

Please see Vol. I, MS 0131, for acceptable Electronic Income Verification (EIV).**]**

Furthermore, SDX cannot be used as a source of income verification for RSDI or VA, as it is not an accurate source for “other” income.

When requesting separate household status due to inability to purchase and prepare meals, the elderly and disabled individual or representative is responsible for obtaining the cooperation of the individuals with whom they reside in providing the necessary income information about them.

Verify termination of employment that occurred within 30 days of the date of the SNAP application to determine the date the last pay was received, and if a voluntary quit disqualification applies.

Verify the lack of income for all adult household members by form PAFS-702, Proof of No Income, written statement, or a collateral contact (CC). The verification must be completed by an unrelated individual who does not live in the same SNAP household as the member. An in-depth interview is conducted so that sufficient information is obtained concerning each member and the household's situation to ensure an accurate eligibility determination can be made:

[Example 1: An Individual reports they have no income but pays rent and utility expenses. Inquire all system verification sources, i.e., BENDEX, SDX, EA, Program 48, 4B–UIB, and DCSS External Search, if children are or have been in the home. Question the individual about how they are paying bills with no income. Require verification of the lack of income for all adult household members.

Example 2: An individual states their spouse pays child support. They also state their spouse has no income. DCSS External Search inquiry verifies that the spouse is making regular child support payments. Question the individual to determine how their spouse is paying child support with no income. Require verification of the lack of income for the spouse as well as all other adult household members.**]**

Refer to MS 7020 for a list of what is considered questionable information.

B. HOUSEHOLD SIZE COMPOSITION. Verify household size and composition at every application. Verification must list EVERY household member.

C. **[**SHELTER EXPENSES. Verify the amount of any shelter expense, such as utilities, entitlement to SUA/BUA, rent, mortgage, property taxes, homeowners' insurance, or telephone expense.**]**

Acceptable sources of verification include written statements, receipts, bills, and 'CC'.

D. ACTUAL UTILITY EXPENSES. Verify an actual expense for a household. If the actual expenses cannot be verified within 30 days, the unverified expense is not allowed.

Any utility expense for an unoccupied home must be verified.

E. MEDICAL EXPENSES. Verify the amount of any medical expense, including the amount of reimbursement, if the household wishes to claim medical expenses. Verification of other factors, such as the allowability of services provided or the eligibility of the person incurring the cost, is required if questionable.

F. RESIDENCY. Residents of Kentucky who are either Expanded Categorically Eligible (ECE) or Categorically Eligible (CE) have met the residency requirement, and no additional verification is needed. Residency should only pend for individuals who are not ECE or CE.

When a resident of Kentucky has a home address served by a postal district in a border state, enter the abbreviation for that state in the “State” field of the home address. Document the address situation in case comments.

G. IDENTITY. Verify the identity of the person making the application. In instances where a representative applies on behalf of a household, verify the identity of both the representative and the head of household. Identity is verified by readily available documentary evidence or, if this is unavailable, by a ‘CC’. Examples of acceptable documentary evidence include a driver's license (it does not matter if the license has expired), work or school ID, an ID for health benefits or for other assistance or social services program, a voter registration card, wage stubs, or a birth certificate. Accept any documents that reasonably establish the applicant's identity and impose no requirement for a specific type of document, such as a birth certificate.

NOTE: Eligibility Advisor (EA) cannot be used to verify identity for SNAP.

H. **[**ALIEN STATUS. Verify eligible alien status for any person in the household who is not a United States citizen. Refer to MS 2910 for the list of acceptable documents used to determine alien status. Aliens must meet qualified alien status outlined in MS 2900, Item 1, and special SNAP benefits criteria outlined in Item 2, to be eligible for SNAP benefits.**]**

I. STUDENT STATUS. Verify eligible student status for any persons in the household 18-49 years of age enrolled at least half-time in an institution of higher education. Student status is verified through readily available documentary evidence. Examples of acceptable documentary evidence are, but are not limited to, school records or a ‘CC’ with the school’s admissions office.

J. **[**LEGAL CHILD SUPPORT. Verify all legally obligated child support payments that were paid to individuals outside the household during the past three months. Verify the legal obligation to pay and the obligated amount of child support through documents such as a court order, administrative order, or a legally enforceable separation agreement. Verify amounts paid with cancelled checks, wage withholding statements, verification of withholding from unemployment compensation, and statements from the custodial parent regarding direct payments or third-party payments the noncustodial parent pays or expects to pay on behalf of the custodial parent. If payments are made through DCSS, use the DCSS External Search inquiry to verify the legal obligation and the payments.**]**

K. DEPENDENT CARE. Verify the actual cost for each dependent. When a flat rate is charged for more than one dependent, request a breakdown of the expense from the provider; consider the total amount only when the amount of the expense per dependent cannot be obtained. Verification must include the names of the dependents provided care and the amount billed for each. If the household does not verify the expense, the deduction is not allowed.

L. DISABILITY. The following verification is required for the types of disability defined in MS 2000.

1. For individuals in items A or B of MS 2000, the household must provide proof that the disabled individual is receiving benefits under one of the mentioned titles of the Social Security Act.

2. For individuals in item D of MS 2000, the household must provide proof that the individual receives a Railroad Retirement disability annuity from the Railroad Retirement Board and has been determined to qualify for Medicare.

3. For veterans in item E of MS 2000, the household must present a statement from the VA that clearly indicates that the disabled individual is receiving VA disability benefits for a service-connected or non-service-connected disability and that the disability is rated as total or paid at the total rate (100%) by VA.

4. For individuals in items F and G of MS 2000, the household must provide proof that the disabled individual is receiving VA disability benefits.

5. For individuals in items C or H of MS 2000, if it is obvious that the individual has one of the listed disabilities in H, document the case accordingly. If the disability is not obvious, the household must provide a statement from a physician or licensed/certified psychologist, stating the individual has one of the listed disabilities.

6. For individuals in item I of MS 2000, the household must provide proof that the disabled individual receives disability related medical assistance under Title XIX of the Social Security Act.

7. For those **elderly and disabled persons** unable to purchase and prepare meals, verify the disability as follows:

   a. If it is obvious the individual is unable to purchase and prepare meals because of one of the listed disabilities in MS 2000 or because it is obvious they suffer from a severe physical or mental disability, even if not one of those listed, consider disabled and document the case accordingly.
   b. If the disability is not obvious, verify the disability by requiring a statement that the individual, in the physician's or psychologist's opinion, is unable to purchase and prepare meals because they suffer from one of the non-obvious disabilities or they suffer from some other severe, permanent physical or mental disability.

M. If initial verification provided by the individual is considered questionable and the worker requests additional verification, annotate in comments the reason the additional verification was requested:

Example: An individual provides a current lease listing the individual and their spouse as household members; however, the individual states that a child also lives with them, additional verification of household size would be required.

N. Client statement is not used as a verification source if the household can provide original verification or a collateral contact to verify the household situation. If the individual and worker have exhausted all avenues of obtaining verification, the client's statement is accepted **as a last resort**. Document in the case comments why the client's statement was accepted in place of other verification.

O. DISQUALIFICATIONS. The system does not display any current disqualifications until eligibility has been run on the case.

P. SCHOOL ENROLLMENT. Verify school enrollment using client statement at application, recertification, and member add for a child aged 17 and younger.

If the child aged 17 and under has earned income, client statement is an acceptable source of verification for both school enrollment and earned income unless there is a reason to doubt.

NOTE: If a verification source is entered for another program, DO NOT change the verification source. Document to explain the source was previously entered for another program.

MS 7010 EXPEDITED VERIFICATION

Obtain as much verification as possible, but do not delay the certification of the household if it is unlikely that the verification can be obtained within the timeframe to provide expedited benefits. This includes requests or pending information from the Disqualified Recipient Subsystem (DRS).

[A. At a minimum, verify the applicant's identity by a collateral contact or readily available documentary evidence. Acceptable documentary evidence includes, but is not limited to, a driver's license (it does not matter if the license has expired), work or school ID, voter registration card, birth certificate, rent receipt, or any document that can reasonably establish the applicant's identity.]

B. Require each applicant to register for employment unless otherwise exempt.

1. If the applicant claims physical or mental disability and the disability is evident, the worker must provide a detailed description of the individual's disability or incapacity in case comments.

2. [If the disability is not evident and the applicant refuses to work register, request verification of the disability or incapacity. If the verification is not provided within the expedited services timeframe, postpone the verification. See Volume IIA, MS 1650 (C), for acceptable verification of disability.]

3. If the household designated a representative to apply on its behalf, the representative completes the appropriate work registration forms for the head of household.

C. When the household does not provide a collateral contact or otherwise provide verification of identity within the expedited services timeframe, the case reverts to the 30-day processing standard. The household also loses the right to postpone verification of other eligibility factors and the right to the special income exclusions for destitute households. If the needed verification is later provided, process the case within 30 days from the date of application.

D. The following is required at the time of application but may be postponed if the application is expedited:

1. [Make all reasonable efforts to verify the household's income and all other items of mandatory verification within the expedited processing standards. However, except for identity, do not delay benefits beyond the time standards solely because these items of mandatory verification are not provided. Accept client statement as verification of resources.]

2. Postpone verification of actual utility expenses if the household is not entitled to SUA or BUA or the telephone standard and any utility expense for an unoccupied home regardless of entitlement to SUA, BUA

or actual expenses if the application is expedited and the verification cannot be obtained within the expedited services timeframes. This

includes rent or mortgage expense, any separately billed property taxes and homeowner's insurance, and entitlement to the Heating and Cooling Costs/SUA or the non-heating and non-cooling costs/BUA as appropriate.

If the household is entitled to use an actual utility expense or expenses for an unoccupied home and fails to verify the expense within the expedited services timeframes, allow the unverified expenses. If the household fails to verify the expenses within 30 days from the date of application, do not allow the household a utility expense for any unverified utility expenses.

3. Homeless households which state that they have incurred or reasonably expect to incur a shelter cost for the month may select the homeless standard allowance. Verification of the household's shelter expense is not required unless the household's statement is questionable.

4. Ask the household to provide or apply for social security numbers (SSN) prior to certification. If the household is unable to provide the required SSN, allow 30 days from the first day of the first full month of participation to apply for or provide the SSN. Providing this requested information is voluntary; however, failure to provide an SSN will result in the denial of food benefits to the individual failing to provide an SSN. Staff should advise applicants of this provision at initial certification and member add. Household members denied for this reason are considered excluded members. For newborns, the household must provide an SSN or proof of an application for an SSN at its next recertification or within 6 months after the month the baby is born, whichever is later.

5. Attempt to register the head-of-household and all other household members for work, unless otherwise exempt.

   a. An application can be approved for expedited benefits once the head-of-household work registers, leaving the other members' work registration pending.
   b. Do not delay expedited benefits for verification of questionable work registration exemptions

6. **[**Do not require the applicant to verify information the agency already has unless there is reason to believe that the information possessed by the agency is inaccurate, incomplete, or inconsistent. Verification documents provided by the individual less than 60 days from date of application can be used if the individual states no change in circumstance.

   When the postponed verification is later provided, determine if the household was entitled to the benefits that were calculated based on the best available information provided by the individual. If there is no evidence that information was withheld, no claim exists. In the instance of a system error or worker error that causes erroneous benefits to be issued, or it is determined that the household withheld information in order to receive more benefits than they were entitled to receive, a claim is pursued.**]**

To be considered questionable, the information on the application must be inconsistent with statements made by the applicant, with other information on the application or previous applications, or with information received from other sources.

When determining if information is questionable, base the decision on each household's individual circumstances. If information is considered questionable, verification is required for:

A. [HOUSEHOLD SIZE AND COMPOSITION. Factors such as boarder status and separate household status require independent verification. Individuals who claim separate household status are responsible for proving the claim. Hotline calls which report that other members are in the household that are not listed on the application, require independent verification of household size.]

B. INCOME/EXPENSES. A household's report of expenses which exceed its income is questionable. Example: A household who reports no income but is still managing to pay bills, justifies further verification. However, this circumstance is not sufficient grounds for a denial. Instead, explore with the household how it is managing its finances, whether the household receives excluded income or has resources, and how long the household has managed under these circumstances.

C. DEDUCTIBLE EXPENSES. A household’s report of shelter costs for a home that is temporarily unoccupied because of employment or training away from the home, illness, or abandonment caused by a natural disaster or casualty loss are responsible for providing verification of the expense, if the expense would result in a deduction. If a deductible expense must be verified and obtaining the verification may delay the household's certification, tell the household that their eligibility and benefit level may be determined without providing a deduction for the claimed, but unverified expense. The expense will be allowed after the verification is provided.

D. FOOD LOSS. Repeated requests for replacements from the same household may be considered questionable and require independent verification such as a written statement from a collateral contact, landlord statement, receipt of new appliance, or an appliance repair receipt.

E. [LIQUID RESOURCES AND LOANS. When verifying that income is exempt as a loan, a legally binding agreement is not required. However, a contract or written statement signed by both parties that have the basic parts of a loan contract is acceptable. The loan document must consist of an offer and acceptance that is made, full and complete terms, and a consideration.

If the household receives payments to meet expenses on a recurring or regular basis from the same source for more than three months, but claims the payments are loans, the provider of the loan may complete and sign form PAFS-73, Verification of Contributions-Loans-Roomer/Boarder Status or sign a written statement. A written statement from the provider of the loan is acceptable IF it includes the offer and acceptance along with the full and complete terms of the loan and consideration. If form PAFS-73 is not completed and signed, showing that repayments are being made or that payments will be made in accordance with an established repayment schedule, consider the money as income to the household. Accept the client statement as verification of liquid resources.

[Resources that are at or the resource limit are considered questionable and and must be verified. Before requesting verification, inquire the Eligibility Advisor (EA). If EA returns no bank accounts or returns accounts but does not verify the balances, appropriate verification must be requested.]

MS 7030 REQUIRED VERIFICATION AT RECERTIFICATION (1)

At recertification, review all information and update verification if a change is indicated. If the household is required to return information, advise them not to wait until the final due date to return their information, as this may cause a delay in the receipt of benefits. At a minimum, verify the following:

A. **[**All gross nonexempt income. As a part of the recertification, any Income and Eligibility Verification System (IEVS) "hits" must be resolved.

   Complete inquiries on all system verification sources, i.e., BENDEX, SDX, Eligibility Advisor (EA), Program 48, Program 4B-Unemployment Insurance Benefits (UIB), and the Department of Child Support Services (DCSS), External Search if children are or have been in the home for all adult household members.**]**

   Please see Vol. I, MS 0131, on acceptable Electronic Income Verification (EIV).

B. Verify the lack of income for each adult household member by form PAFS-702, Proof of No Income, written statement, or a collateral contact. Form PAFS-702 must be completed by an unrelated individual not living in the same SNAP household as the member.

   [Complete inquiries on all system verification sources, i.e., BENDEX, SDX, EA, Program 48, Program 4B-UIB, and DCSS External Search, if children are or have been in the home for all adult household members claiming no income.**]**

C. Household composition. Verification must list EACH household member.

D. Any questionable information.

E. Actual costs incurred by the household for allowable dependent care expenses.

F. **[**Changes in the legal obligation, including the amount of the obligation, and the amount of child support the household pays to individuals outside the household. Reported information that has not changed is verified only if the information is incomplete, inaccurate, inconsistent, or outdated. If payments are made through DCSS, use the DCSS External Search inquiry to verify the legal obligation and the payments.**]**

G. Actual utility expenses, if the household incurs only one type of utility expense or any utility expenses for an unoccupied home.

H. Medical expenses, if the source or the total allowable amount for the household has changed by more than $25.

I. SCHOOL ENROLLMENT. Verify school enrollment using client statement at application, recertification, and member add for a child aged 17 and under.

   If the child aged 17 and under has earned income, client statement is an acceptable source of verification for both school enrollment and earned income, unless there is a reason to doubt.

NOTE: Except for items A-H above, do not require the applicant to re-verify information the agency already has unless there is reason to believe that the information possessed by the agency is inaccurate, incomplete, or inconsistent.

If the household does not provide the requested verification of the expenses in items E through H, the recertification is processed, but the deduction is not allowed.

MS 7040 VERIFICATION OF CHANGES (1)

[Verify and process case changes reported during the certification period according to the procedures for acting on changes.]

Verify medical expenses only if the source or the total allowable amount for the household has changed by more than $25.

Verify reported changes in the legal obligation, including the amount of the obligation, and the amount of child support the household pays.

[Verify a reported change in household composition.]

MS 7050 SOURCES OF VERIFICATION (1)

Verify information provided by the household by the following sources:

A. **[DOCUMENTARY EVIDENCE.** Use documentary evidence as the primary source of verification for all items in which verification is mandatory. The agency shall also accept verification from collateral contacts so long as the collateral contacts can provide accurate third-party verification.

When requesting verification of information from the household, first request that verification be provided by the original source or service provider before exploring alternate sources. A collateral contact call to the service provider can be used as documentary verification. This is the procedure that Quality Control (QC) uses when reviewing a case for accuracy.

For example: A landlord, or property manager are the best sources of rent verification. An employer or manager is the best source of employment verification. A collateral contact call to the original source can be used to obtain documentary verification.

Documentary evidence is written, or verbal confirmation of a household's circumstances. Examples include, but are not limited to: computer matches, social security cards, wage stubs, related tax forms for individuals with self-employment income, rent receipts, utility bills, or medical bills. Acceptable verification is not limited to any single type of document and is obtained from the household or other source. The household is not required to personally present verification at the food benefits office.**]**

For example: Tip income may be verified by a daily log, kept by the individual, of actual tips received. Alternatively, the allocated tip amount listed on pay stubs may be used, but ONLY if the individual states that this amount is representative of the actual tips received.

Whenever documentary evidence cannot be obtained or is insufficient to make a firm determination of eligibility or benefit level, use alternate sources of verification such as those listed in the remainder of this section.

For example: Documentary evidence is considered insufficient when the household presents pay stubs which do not represent an accurate picture of the household's income or if provided verification appears falsified.

Please see Vol. I, **MS 0131**, on acceptable Electronic Income Verification (EIV).

When verifying pensions and statutory benefits such as RSDI, SSI and VA, for the first time or in the event of change, verification from the provider must be obtained. This includes benefit award letters, or online computer matches. Furthermore, computer match sources intended to verify one income type cannot be used to verify another income type.

For example: a computer match source intended to verify SSI cannot be used to verify RSDI.

In instances of mass change, when all recipients of the benefit will receive a raise, DO NOT use the check to verify the increase. Contact the authorizing agency to verify the new benefit amount and any deductions.

Below are example scenarios of how to consider provided verification:

Example #1: An individual applying for SNAP reports they incur rent/mortgage and utility expenses. The worker should ask for verification from the original source first (landlord, banking institution, utility company) before using an alternate source of verification.

Example #2: An individual provides a PAFS-76 with the intent to verify household composition and shelter expenses; however, the question "Are you the manager or landlord" is unanswered. This makes the shelter expense section questionable. Staff should attempt to contact the individual who completed the form to confirm whether or not they are the landlord. If they cannot be reached, the form is still acceptable to verify household composition, but the worker will need to request additional verification of shelter expenses and explain the discrepancy on the Request For Information.

Example #3: An individual applying for SNAP reports they have wages but is working under a different name and/or social security number (SSN). As a result, the name and/or SSN on the check stubs provided to verify their wages do not match the name and/or social security number with which they are applying. In this situation, the household should be allowed to provide verification to explain the discrepancy, such as a written statement or collateral contact to verify it is the same person.

B. **[COLLATERAL CONTACTS.** The agency shall use collateral contacts as documentary evidence for verification if such verification is acceptable and would result in better service to the household. Acceptable collateral contacts are individuals outside the SNAP household who have knowledge of the household's circumstances. While acceptable collateral contacts cannot be restricted to a particular individual, staff must always attempt to get verification from a primary source such as service provider or employer before exploring other sources or contacts.
When using collateral contacts for verification, case notes should include the telephone number and the name of the person that provided the verification.**]**

[Examples of acceptable collateral contacts include but are not limited to employers, landlords, social service agencies, community action agencies, migrant service agencies, neighbors of the household or other persons outside the household. When using relatives as contacts for verification purposes, immediate family members should not be used for verification of zero income.**]**

Note: An Authorized Representative can be used as collateral contact, provided they are not making application on behalf of the household.

Rely on the household to provide the name and phone number of any collateral contact. Staff cannot use a collateral contact if the collateral contact cannot be expected or is unable to provide accurate third-party verification. If a collateral contact is deemed unacceptable, require the household to designate another collateral contact or explore alternate verification sources. The household may request assistance in designating a collateral contact.

Once an acceptable collateral contact is designated, the worker is responsible for obtaining verification from the collateral contact. When making contact, only request the information needed to process the application. Do not disclose that the information is being used to obtain food benefits. If the collateral contact will not provide the requested verification, do not immediately deny/discontinue the case. Ask the household for another means of obtaining the information.

Households with irregular income that could not be verified at certification must be told that form PAFS-121, Irregular Work Form, or comparable verification must be presented at the next recertification interview.

C. Home visits are to be used on a case-by-case basis and may be used as verification only if documentary evidence or collateral contacts cannot be obtained. Schedule the visit in advance with the household.

D. The Agriculture Stabilization and Conservation Service (ASCS) may be contacted to determine tobacco poundage quotas and base arrangements; however, information regarding the production and sales price is protected by the Privacy Act and cannot be released.

E. In addition to the methods listed above, the household may return verification by fax or other electronic devices.

F. Unless questionable, electronic signatures are acceptable on all SNAP verification documents.

F. If all avenues of obtaining verification have been exhausted by the applicant and worker, the individual’s statement can be used as verification **as a last resort**. Thoroughly document in case notes the steps taken and the reason client statement was accepted in lieu of other verification.

MS 7060 HOUSEHOLD COOPERATION (1)

The household or its representative must cooperate with the agency so that eligibility can be determined. The household or representative cooperates by:

A. Being interviewed;

B. Answering questions regarding eligibility;

C. Reviewing the application form;

D. Signing and dating the application;

E. Providing all required verification. However, the agency must assist the household if the household is cooperating in other areas of the eligibility process, but is experiencing difficulty obtaining required verification; and

F. **[**Resolving any questionable information. If the household failed to cooperate in providing any requested information related to a fraud report affecting eligibility, and their SNAP case discontinued or denied, the household must resolve the report with contact to DCBS before the SNAP case can be re-approved. The only exception is for expedited applications which will approve, but the issue must be resolved prior to the recertification of an expedited household.**]**

Each worker must review prior case comments to see if the question "Is contact needed to verify unclear information?" has been previously used and the case discontinued for not complying. If this situation is found, the worker will review prior comments and case documentation to learn why the question was utilized and inform the applicant they must go to their local office to resolve or explain the questionable information that was received before the case can be finalized. The application is taken as usual and will pend for the household to complete the face-to-face contact. Workers should avoid using the terms 'trafficking' or 'fraud' when directing households to resolve these complaints; state only that the action is needed due to the receipt of questionable or conflicting information.

MS 7070 HOUSEHOLD FAILURE TO COOPERATE (1)

A. A household or its representative has failed to cooperate when the household or representative:

1. Is able to cooperate, and states or clearly demonstrates that he/she will not take an action required to complete the application process; or

2. Refuses to cooperate in any subsequent review of its eligibility.

Deny or discontinue the household when it is determined that the household or its representative fails to cooperate as outlined above. Once a household has been denied or discontinued, it may reapply but eligibility does not exist until the household cooperates.

B. A household is not denied or discontinued solely because an individual who is not a household member refuses or fails to provide the agency with information required to determine the household's eligibility. If this situation occurs, assist the household in finding another means to obtain required verification and document "Comments" accordingly.

The following individuals are considered household members and therefore must cooperate with the agency in the application process:

1. Ineligible students;

2. **[**Ineligible immigrants;**]**

3. Individuals disqualified for IPV;

4. Individuals disqualified for failure to comply with a work requirement;

5. Individuals disqualified for refusing to apply for a social security number;

6. **[**Individuals refusing to attest to citizenship or immigration status; and**]**

7. SSI recipients in a cash out state;

8. Fleeing felons; and

9. Drug felons.

MS 7090 METHOD OF PROVIDING VERIFICATION (1)

The household may provide verification:

A. In person;

B. Through the mail;

C. Through the representative; or

D. [By fax or other electronic methods.]

MS 7100 WORKER RESPONSIBILITY FOR VERIFICATION

The worker has responsibility for the following if the household has difficulty, cannot obtain the necessary verification, the household provides insufficient verification or indicates the verification was provided, but the agency failed to receive the information:

A. If the household has difficulty or cannot obtain the necessary verification, assist the household in obtaining the verification.

1. Assist the household by using collateral contacts;

2. Allow the household additional time if possible; or

3. Conduct a home visit.

B. If the household presents insufficient verification.

1. Accept any reasonable documentary evidence provided by the household which verifies the information provided on the application;

2. Contact collaterals or other sources to substantiate the verification received or to obtain the additional verification required to complete the case action; or

[3. Mail form KIF-2.2B, Request for Information (RFI), to the household to request any additional verification if required; and]

4. Allow the household 10 calendar days from the date the RFI is sent to resolve any discrepancies in the evidence provided before making an eligibility determination.

C. If the agency does not receive requested information from the household and the client states they forwarded the requested information, do the following:

1. Ask the client when the information was returned or mailed to the local office;

2. If the client can provide documentary evidence, such as an employer or collateral statement, that he/she have cooperated or attempted to cooperate with the agency to provide required verification, assist the client in obtaining the information. This assistance can be accomplished by allowing the client additional time to return the information if possible, contacting collaterals or other sources. Document the case record thoroughly concerning the actions taken to process the case;

3. If the case is denied or discontinued because the agency did not receive requested information and the client states that he/she returned the information, review the case situation to determine if reapplication or reinstatement is warranted. The determination is made on a case by case basis by evaluating the circumstances which caused the nonreceipt of the requested information. If the client can provide documentation that he/she returned the requested information and all verification required is available take action to approve or reinstate the case; and

4. Advise the household that for future certifications it must provide all necessary verification.

MS 7110 TIMELY NOTICE OF DECREASE, DISCONTINUANCE (1)

If information in a SNAP case indicates reduction or discontinuance of benefits is appropriate, notify the client of the proposed action 10 calendar days prior to the effective date, unless one of the exceptions to the timely notice requirement applies (see MS 7115) or unless this happens during the recertification process. This 10-day period is the Timely Notice Period.

A. The system issues form KIM-105, General Notice of Action, when the change is entered on the system.

B. Case changes entered on the system with a timely notice period expiring on or before the last calendar day of the month, are effective with the following month's issuance.

C. [If the timely notice period does not expire in the month form KIM-105 is sent, action is taken by the system the day following the expiration of the timely notice period.]

MS 7115 EXCEPTIONS TO TIMELY NOTICE PERIOD – SNAP (1)

A timely notice is required on action taken in SNAP cases; however, an individual notice of timely action is not required for the following actions:

A. [MASS CHANGE. Changes initiated by State or Federal government, which may affect a significant number of cases. These changes include: adjustments to the income eligibility standards; maximum shelter deduction; dependent care deductions; adjustment to the Thrifty Food Plan; standard deduction; annual adjustments to SUA and BUA; cost-of-living adjustments to state or federal benefits; and changes in eligibility criteria based on legislative or regulatory actions.

B. NOTICE OF DEATH. Based on reliable information, it is determined the recipient is deceased.

C. MOVE OUT OF STATE. Based on reliable information, it is determined the household has moved out of Kentucky.]

D. COMPLETION OF RESTORATION OF LOST BENEFITS. The household has been receiving an increased allotment to restore benefits; the restoration is complete; and the household was previously notified by form KIM-105, General Notice of Action, when the increased allotment would terminate.

E. EXCLUDED FOR INTENTIONAL PROGRAM VIOLATION. A household member is excluded for an intentional program violation and the benefits of the remaining household members are reduced or terminated to reflect the disqualification of that household member.

F. RESIDENTS OF DRUG OR ALCOHOLIC TREATMENT CENTERS OR GROUP LIVING ARRANGEMENT. The eligibility of a resident in a drug or alcoholic treatment center or a group living arrangement is terminated due to the facility's loss of either its certification from the appropriate state agency or agencies, or its status as a representative is suspended due to FNS disqualifying it as a retailer.

G. BENEFIT REDUCTION TO REPAY A CLAIM. Converting a household from cash repayment to benefit reduction as a result of failure to make an agreed upon repayment.

H. HOUSEHOLD REQUEST. The household voluntarily requests, in writing, to terminate its benefits.

MS 7200 DISCLOSURE OF INFORMATION – SNAP (1)

All SNAP case records are confidential and information contained in them cannot be disclosed or opened for public inspection. The use or disclosure of information obtained from the applicant household is available only to employees of the Cabinet for Health and Family Services and USDA officials in the performance of duties directly connected with the administration and enforcement of the SNAP. The local office may withhold confidential information, such as the names of individuals who have disclosed information about the household without the household's knowledge or the nature or status of pending criminal prosecutions.

Disclose information to others only as follows:

A. Cooperate in providing information directly connected with the administration of federal or federally aided, means-tested assistance programs such as K-TAP or the School Lunch Program.

B. If there is a written request by a responsible member of the household, its current representative, or a person acting on the household's behalf, the material and information contained in the case file is made available for inspection during normal business hours.

C. Employees of the United States Comptroller General's office for authorized audit examination purposes.

D. Provide Local, State or Federal law enforcement officials with the recipient's address, Social Security Number, and photograph, if available when they:

   1. Furnish the recipient's name and indicate that the individual:

      a. Is fleeing to avoid prosecution, custody, or confinement for a felony;
      b. Is violating a condition of parole or probation; or
      c. Has information necessary for the officer to conduct an official duty, related to a felony or parole violation.

   2. Are investigating an alleged violation of the SNAP and provide a written request. The written request must include, at minimum, the following information:

      a. The identity of individuals requesting information and their authority to do so;
      b. The violation being investigated; and
      c. The identity of the person for whom the information is requested.

   3. If the requesting officer indicates that they wish to take the case record material with them, make the determination of whether the material is available in a hard copy case record (as it may be older

information that they are requesting) or in an electronic case record. If the information is in a hard copy case record, offer to provide photo copies. If they indicate that only original materials will suffice from a hard copy case record, make photo copies for the case record. If the information that they are requesting is in an electronic case file, make copies for them and explain that these are the only materials available. Annotate the case record.

If the entire case record is requested, discuss with the officer what specific pertinent information may be acceptable rather than the entire case record. If they are requesting an entire hard copy case record and they have stated that photo copies will not suffice, make photo copies of the last two packets for the case record.

4. If the recipient is identified as a fleeing felon, refer to Volume II MS 2350 prior to imposing a disqualification.

5. The Kentucky State Police (KSP) may identify a potential SNAP fraud during the course of other investigations.

   a. KSP use form KSP-58, Request for Confidential Information, to request information concerning fraud or potential fraud investigations, whether identified by DCBS or another source.
   b. [Upon receiving form KSP-58 for the release of information, ensure it is completed in its entirety. If the form is not completed in its entirety, DO NOT provide the information and DO NOT sign the form. If the form is complete, provide the information. If KSP is requesting EBT transaction data and a complete KSP-58 is provided, release the information and DO NOT require a court order or subpoena.]

E. Anyone the household has authorized, via a signed form DCBS-1, Informed Consent and Release of Information and Records, to receive the information.

F. Persons directly connected with the administration or enforcement of the programs which are required to participate in the Income and Eligibility Verification System (IEVS), to the extent SNAP benefits information is useful in establishing or verifying eligibility or benefit amounts under those programs.

G. Persons directly connected with the administration of the Child Support Program under Part D, Title IV of the Social Security Act in order to assist in the administration of that program and employees of the Secretary of Health and Human Services as necessary to assist in establishing or verifying eligibility or benefits under Titles II and XVI of the Social Security Act.

H. Cooperate in providing information necessary to verify a suspected or known senior or child abuse situation, which has been reported to the proper authorities.

I. Follow court orders, unless otherwise notified by Regional Office staff or the court.

1. Court orders must be signed by a judge and have an assigned docket number, but may or may not require a court appearance.

   a. If the officer of the court, such as an attorney provides the local office with a court order, signed by a judge, the specified information must be released to the officer of the court.
   b. If a court appearance is required, the agency must comply or be held in contempt.

2. For procedures regarding subpoena requests, refer to Volume I MS 0170.

J. [Only Board of Elections officials may view forms and/or information used directly in the voter registration process. Otherwise, voter registration information remains confidential.]

MS 7450 CASE RECORD CONTENT (1)

All case records represent a continuing documentation of eligibility for assistance. The case record contains sufficient material to substantiate validity of all authorized assistance.

[The SNAP electronic case record contains the following material, as applicable to the case situation:]

1. Applications;

2. Documentation;

3. Verification;

4. Forms;

5. Notices;

6. Hearing information;

7. Claims information;

8. Restoration information;

9. Any other relevant information.

MS 7475 SNAP CASE DOCUMENTATION (1)

[Each worker that interacts with a case must document all relevant actions. This allows the next worker in the case to sufficiently understand the circumstances and substantiate the validity of all authorized assistance. This section contains documentation requirements specific to SNAP case records. In conjunction with Volume I, MS 0130, the following information is recommended to be documented in the SNAP case:

A. Interview.

1. An explanation regarding a deviation from standard case work procedures. For example, when a work around is necessary to process the SNAP case.

2. The reason why a Request for Information (RFI) was issued.

3. Document the name and phone number of a collateral contact (CC) when used for any verification.

4. If Client Statement Last Resort is used in lieu of verification.

5. Reason for any delays in case processing, i.e., when an additional RFI must be issued.

B. Rights & Responsibilities (R&R)/Forms/Quality Control (QC).

1. R&R were explained & the individual states they understand.

2. All required forms were given to the individual.

3. The QC process was explained & the QC pamphlet was provided.

C. Immigrant.

1. Document when an individual who is a member of the SNAP household is ineligible due to immigration status.

2. Document if enumeration has not been met and the date the individual applied for an SSN.

3. Document when good cause is requested for the individual.

D. Household (HH) Composition.

1. Explain the reason an individual living in the household is not included in the case, i.e., an ineligible student or immigrant, disqualified member, a joint custody child, or nonmember.

2. Explain the relationship of any nonmembers.

E. Income.

1. Excluded income types that cannot be shown on the system. If it can be entered on the system, it is not necessary to comment.

2. If no income, how is the HH meeting basic needs?

3. If expenses exceed HH income, how long this situation has existed and how they are paying their bills/getting basic needs.

4. Wages.

   a. If all paychecks in the prior 2 months were not used and the reason why.

      Example: The individual's work hours increased in the last month. Instead of using the prior 2 months' wages, the last 2 paychecks were used, as they are representative of ongoing. Document that the work hours increased and only the paychecks reflecting the increase were used. This is a deviation from standard office procedures.

   b. If income is terminated: last day worked, date of final pay, and if job quit disqualification has been explored.

5. Self-Employment.

   a. Whether a household operating a self-employment enterprise in their home chooses to treat the utility expense as a business expense or a shelter expense.
   b. Explain if the tax return or personal records for the prior 12 months are not reflective of ongoing.

6. If child support from the prior 3 months is not used and the reason.

7. Unearned Income. Explain any income entered as "other"

F. Resources. For a non-CE or non-ECE HH, if resources are near the limit.

G. Shelter and Utilities. Document if telephone expense has been explored for households with no other utility expense

H. Child Support Deduction. If the prior 3 months of legally obligated child support payments are not used.

I. Medical Deduction.

1. When a medical deduction is not considered, enter a statement that a member who is eligible for medical deductions does not have any out-of-pocket medical expenses or chooses not to provide verification of the expenses.

2. Anything unusual that would keep any person from easily understanding how or why an amount was allowed or not allowed.

J. Document when additional verification is requested over and above what the individual provided.

Example: An individual provides a current lease listing 2 household members, but the individual states there are 4 people in the household. Comments should also be added to any additional RFI's requesting more or other verification than has already been provided so the individual has a better understanding of what the agency needs to process the case.

K. Document the resolution of a computer match and how it was resolved**.**

L. Document when a case change is reported and actions taken to complete the task.

M. If a claim is suspected, document the reason it is or is not referred.

N. Help Desk. Enter details of the issue, i.e., specific error message received, any actions taken based on special instructions from the Help Desk, and any ticket number assigned.

O. The reason a disqualification was imposed.

P. The reason for a determination that information is questionable and how this was resolved.

Q. Document the reason why a Worker Portal record is deleted**.]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 0420 – R. 6/1/2026 – OMTL – 697
Management Evaluation (ME) – Program Access Reviews

[ME reviews are conducted through OnSpring to measure compliance with SNAP federal regulations, provide a systematic method for monitoring and assessing program operations, and serve as a basis for staff to improve and strengthen operations by identifying and correcting deficiencies in case processing. Program Access reviews are conducted to ensure local office services are accessible to the public. Counties are reviewed either yearly or on a two or three-year schedule, depending on their size, past review history, and potential impact on the food benefits error rate. Copies of review findings are forwarded to the Family Support Supervisor (FSSV), Public Assistance Program Specialist (PAPS), Service Region Administrator Associate (SRAA), and the Nutrition Assistance Branch (NAB).**]**

Volume 2 – Supplemental Nutrition Assistance Program (SNAP)
MS 7600 – R. 6/1/2026 – OMTL – 697
Corrective Action Plan (CAP)

[A CAP must be completed when draft information from the review is received. A Management Evaluation (ME) exit conference will **only** be offered to the county, branch, or unit upon their request. The county or branch will decide if an exit conference is beneficial to them and may choose not to have a formal exit conference. During the exit conferences, as areas of deficiency are discussed, all parties, including the Management Review Officer (MRO), Program Assistance Program Specialist (PAPS), Service Region Administrator Associate (SRAA), Family Support Supervisor (FSSV) or designee, and local office staff, contribute to the plan development. Regional staff may also request a revision to the CAP.

CAP plans are completed as follows:

A. Name of Service Region.

B. Date: This is the date the CAP is completed by the Department for Community Based Services (DCBS).

C. Indicate the County, Unit, or Branch for which the plan is being made.

D. Description of Deficiency: ME indicates the deficiency area addressed. DCBS identifies the root cause and error element.

E. Data sources used: Region, county, or unit in which the deficiency has been identified and how the deficiency was identified; i.e., ME reviews, Quality Assurance (QA) findings, QC.

F. Complete Description of Activity to Resolve Deficiency: DCBS completes a description of the activity that the region, county, unit, or branch implemented as a result of the review, such as training and workshops (formal and in-house), tip sheets, team reviews, project recall, special element reviews, etc.

G. Tasks/Steps, timeframes, and staff responsible for each step: DCBS lists the tasks/steps, timeframes, and staff responsible needed to implement the activity in F.

H. Description of plan to monitor activity: DCBS must explain how the tasks/steps will be monitored to ensure they have been implemented.

I. DCBS must develop and describe a plan to evaluate the effectiveness of the initiative: Is the activity implemented working to reduce and/or correct the deficiency identified?

   Form FS-343.2, Response to Management Evaluation Errors, must be completed for cases cited by ME with an issuance error that results in an allotment change and scanned to the Electronic Case File (ECF).
   Form FS-343.2 includes the following information that will be used to determine and correct deficiencies.

1. Review element(s) for issuance error(s);
2. Issuance error(s) cited;
3. If the worker has case decision;
4. If manual calculations were completed (FS-103, SNAP Worksheet);
5. If a QA review was completed;
6. If a program inquiry was requested;
7. If the related policy is clear and understandable;
8. The corrective action taken on the case;
9. The date cumulative errors will be reviewed with staff;
10. Corrective action that can be taken to prevent this type of error in the future, and the date it will be implemented;
11. If a claim, supplemental, or restoration was necessary; and
12. If the error was attributed to the system, then the steps taken that led to that conclusion.

J. Expected outcome: The expected percentage of the reduction in error rate for the projected months is submitted by ME, setting an attainable goal that can be reached.

K. ME will evaluate the current status of completing tasks/steps and progress in implementing this initiative.

L. Name and title of DCBS staff member who has overall responsibility for this initiative.**]**

A. Benefits issued on first monthly issuance are available to the recipient in the benefit month based on the last digit of the head of household's Social Security Number.

[Benefits for all SNAP households are available at 12:00 a.m. EST, according to the following schedule and can be viewed in Benefit Management:

0-----benefits available on the 1st calendar day
1-----benefits available on the 3rd calendar day
2-----benefits available on the 5th calendar day
3-----benefits available on the 7th calendar day
4-----benefits available on the 9th calendar day
5-----benefits available on the 11th calendar day
6-----benefits available on the 13th calendar day
7-----benefits available on the 15th calendar day
8-----benefits available on the 17th calendar day
9-----benefits available on the 19th calendar day

Benefits for approvals, replacements, supplementals, and lump sum restorations are available the day following the date the action is approved. However, for approvals or re-approvals for recipients who do not have an Electronic Benefit Transfer (EBT) card or for those who have requested a new EBT card, benefits cannot be accessed until the EBT card has been received, activated, and a personal identification number (PIN) selected.**]**

MS 8220 AUTHORIZING REPLACEMENTS DUE TO A CASUALTY LOSS (1)

A household can receive a replacement for the amount of food purchased with SNAP benefits that is later destroyed in a household disaster such as a fire, flood or power outage of four hours or more per Public Health Guidelines. The household's electricity being turned off for failure to pay the bill is not a power outage and does not meet the criteria for a replacement. Food purchased with an EBT card that is later stolen is not considered a casualty loss. The household may receive a replacement for the amount of loss up to the household's current month's allotment. Replace SNAP benefits only for the amount of food lost that was purchased with SNAP benefits. **Do not automatically replace the household's full monthly allotment**.

[Note: When a Presidential disaster declaration is issued (e.g., tornado, earthquake, etc.), and a household is eligible for DSNAP benefits due to the declaration, the household cannot receive both the disaster allotment and a replacement allotment.
See MS 9000.**]**

Before issuing a replacement, complete an in-depth review to ensure the request meets policy requirements and verification is provided. If the household has a pattern of requesting replacements, additional verification is needed and/or receipts should be requested before approval of the replacements. The Food and Nutrition Service (FNS) now requires states to separate replacement amounts from normal issuance amounts on budget reports, and large numbers of replacements be substantiated. As a result, an in-depth investigation and verification of replacements is of utmost importance.

When a household reports food purchased with an EBT card has been destroyed, take the following action:

A. Question the household thoroughly to determine if the reported amount of food spoiled is reasonable based on the situation. If the casualty loss happened at the first of the month, did the household just receive their SNAP benefits and spend them on a full month's worth of food, or is it the end of the month and they have very little food left for the month? Ask the household where the food was located when it spoiled (i.e., cabinet, refrigerator, freezer, etc.). This is necessary as food stored in a cabinet would typically not spoil in a power outage, but the same food would most likely be destroyed in a fire. Investigate all requests for replacement of SNAP benefits, especially requests made due to power outages that are:

   1. Made by households on a regular basis;
   2. A result of a misfortune other than a natural disaster; or
   3. Requests for replacement of the household's entire monthly allotment.

   Document the case record in sufficient detail for a reviewer to follow the actions taken in the case. Only replace food purchased with SNAP benefits.

B. Review case circumstances:

1. **[**If food loss was a result of a power outage of at least four hours or more per Public Health Guidelines, determine the loss date as the date the household discovered the food was spoiled. The DCBS Utility Portal can be accessed from the Kentucky Online Gateway (KOG) and used for verification of a power outage, if results are available. If the incident occurred more than 10 days prior to the report, deny the replacement request.
2. If the loss was reported timely, obtain a signed form FS-70, Request for SNAP Replacement, from the household. A voice signature option is acceptable for form FS-70. If voice signature is unavailable, allow the household 10 days to return form FS-70. If the 10th day is a non-business day, and the form is received on the next business day, consider the signed request as received timely. If form FS-70 is received more than 10 calendar days after the report of loss, deny the replacement request.

   A voice signature is obtained by generating form FS-70 through Benefit Management while entering the replacement request. Form FS-70 should be completed with the following information and "Voice Signature" should be written or typed into the signature line:

   a. Physical Address;
   b. County;
   c. Phone Number;
   d. Type of SNAP benefits lost;
   e. Amount of benefits lost;
   f. Name and phone number of person or agency who can verify the loss;
   g. Request Date;
   h. Incident Date; and
   i. Explanation of how food was destroyed.

   Once form FS-70 is completed and a voice signature is obtained, the form must be uploaded or scanned into the Electronic Case File.

3. Verify the destruction of food purchased occurred in a household disaster. Verification can be obtained through the DCBS Utility Portal, collateral contact, documentation from a community agency including, but not limited to, the fire department or the Red Cross, or a home visit. Upon contacting an individual provided by the household as a collateral contact, read the following statement to the individual: *Any person who aids another person to obtain assistance (or benefits) fraudulently is subject to penalties provided by state and federal law, including fines, imprisonment, or both.* Request additional verification when there is reason to doubt the household's statement of loss, or the original verification source provided by the household. Examples of additional verification may include a written statement or repair receipt.**]**

4. There is no limit to the number of replacements a household can receive as a result of food destroyed in a household disaster.

5. Provide the replacement to the eligible household within 10 calendar days after the reported loss, or within two working days of receiving signed form FS-70, whichever date is later.

6. Replacements are provided in the amount of the loss to the household, up to the household's full monthly allotment.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 9000 – R. 9/1/26 – OMTL – 708
Disaster - General

[The Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1988 allows distribution of Disaster Supplemental Nutrition Assistance Program (DSNAP) benefits to victims of a Presidentially declared major disaster. The Food and Nutrition Administration (FNA) must approve the operation of DSNAP. The approval includes the geographical area of service and the time frame for accepting applications. Individuals who currently receive regular SNAP benefits are not eligible for DSNAP benefits in the same month.

FNA oversees the operation of the DSNAP program, including the following:

A. Application Period. FNA usually approves a seven-day period in which applications for DSNAP may be accepted.

B. Disaster Benefit Period. The disaster benefit period is the budget period in which only **net** income, resources, and expenses during the period are considered for DSNAP eligibility. It begins on the date of the disaster or the date of mandatory evacuation. FNA typically approves a period of 30 days except in extraordinary circumstances.

To be eligible for DSNAP benefits, individuals who reside or work in the disaster area must have incurred one of the following adverse effects, **and** they must plan on purchasing food during the disaster benefit period:**]**

A. Damage to home or self-employment property;

B. Disaster-related expenses;

C. Income source disrupted;

D. Inaccessible liquid resources; or

E. Food Loss (Food loss is only when requested by a waiver).

[Applications for DSNAP are taken both in person and by phone. Access to DSNAP is limited to those areas where FNA has approved operation of the program. If the system is not available where applications are accepted, hardcopy application forms and worksheets are used. Information from the hardcopy forms and verification is transferred to the system.**]**

During a disaster, regional and county field staff have primary responsibility for informing the public about the program.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 9005 – R. 9/1/26 – OMTL – 708
Disaster Supplemental Nutrition Assistance Program (DSNAP) eligibility

Eligibility for DSNAP is based on the following:

A. Identity- The identity of the applicant **must** be verified.

B. **[**Residency - The household must have lived or worked in the disaster area at the time the disaster occurred. This includes households temporarily staying outside of the disaster area at the time of the application but were living in the area at the time of the disaster. Verification of residency should only be requested if questionable.

C. Household Composition- Persons living and eating together at the time of the disaster are considered a household. This does not include individuals of a household with whom applicants are temporarily staying during the disaster. Verification of household composition should only be requested if questionable.**]**

D. Immigration Status - Citizenship and immigration status do not apply.

E. Student Status - Student status does not apply.

F. Social Security Number (SSN) - Failure to provide SSN does not result in a disqualification.

G. Work Requirement - Work requirements do not apply.

H. **[**Resources - Only liquid resources are counted. Liquid resources inaccessible for at least half of the disaster benefit period (e.g., bank closed due to the disaster) are not countable. Verification of resources should only be requested if questionable.

I. Income - **All** net income expected to be received during the disaster benefit period is countable. There are no special provisions for the elderly and disabled. Verification of income should only be requested if questionable.

J. Expenses - Households are allowed the maximum standard and shelter deductions for their household size. Households are also allowed a deduction for unreimbursed out-of-pocket disaster-related expenses they expect to pay during the disaster benefit period. Verification of reported expenses should only be requested if questionable.**]**

Examples of disaster-related expenses are:

1. Home or business repairs;

2. Temporary shelter expenses;

3. Evacuation expenses;

4. Home or business property protection;

5. Medical expenses due to personal injury;

6. Disaster-related funeral expenses;

7. Disaster-related pet boarding fees;

8. Replacing personal and necessary household items (e.g., clothes, fuel, tools);

9. Fuel for primary heating source;

10. Clean-up items;

11. Disaster-damaged vehicle expenses;

12. Storage expenses; and

13. Other reasonable disaster-related expenses.

K. Intentional Program Violations (IPV)- Disqualification status from regular SNAP does not disqualify an applicant from DSNAP. An IPV in DSNAP **will** count towards a disqualification in regular SNAP.

[For a household to be eligible for Disaster Supplemental Nutrition Assistance Program (DSNAP) benefits, the total net income of the household received during the benefit period, plus accessible liquid resources, minus allowable disaster-related expenses, must not exceed the disaster gross income limit (net income limit for the regular SNAP).

For example:

Household of 4

$3,000	Net Income + accessible resources
- $500	Disaster-related expenses
- $223	Standard deduction for household size
- $744	Maximum shelter deduction
= $1,533	Adjusted income

The net income limit for the regular SNAP for a household size of 4 is $2,680. This household is eligible for DSNAP and will receive the maximum allotment for a 4-person household, $994.**]**

The limits for income and deductions are determined annually by the Food and Nutrition Service (FNS) and provided to field staff when approval is received to operate DSNAP in Kentucky.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 9015 – R. 9/1/26 – OMTL – 708
Disaster Supplemental Nutrition Assistance Program (DSNAP) Allotment

Eligible DSNAP households receive an allotment equal to the maximum monthly allotment established for the appropriate household size in a regular SNAP case.

[Recipients of regular SNAP benefits who have suffered the following may also receive a replacement or supplement if the approval by the Food and Nutrition Administration (FNA) to operate the DSNAP allows.**]**

A. Food loss: May be eligible to receive a replacement of SNAP benefits for the value of their food loss.

B. Disaster-Related Expenses: May be eligible to receive a supplement to bring their SNAP allotment up to the maximum amount for their household size.

Recipients of regular SNAP who have suffered both food loss and disaster-related expenses may be eligible for **both** a replacement **and** a supplement.

In some disasters, mass supplements may be authorized and automatically generated to affected households by the system. Individual disaster-related supplements are not appropriate when mass supplements are issued.

[Information regarding supplements and replacements for SNAP recipients will be provided to staff when approval to operate DSNAP is received. FNA approves different services based on the circumstances of the disaster.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 9020 – R. 9/1/26 – OMTL – 708
Disaster Supplemental Nutrition Assistance Program (DSNAP) Caseworker Responsibilities

The worker must:

A. Interview one of the following:

1. Head of household;
2. Spouse;
3. Responsible household member; or
4. Authorized representative (AR). If the household designates an AR, the designation must be in writing by the head of household, spouse, or other responsible household member.

All Department for Community-Based Services (DCBS) employees applying for DSNAP must have their application taken and approved by the supervisor or a person designated by the supervisor. All employee applications will be reviewed by Quality Control (QC) within six months of the application period.

B. Review the application with the applicant and ensure:

1. All questions and statements are answered and understood;
2. **[**The application is signed by one of the individuals in A (1-4) above, who completed the application interview;**]**
3. The household is aware of its rights and responsibilities;
4. The household understands its eligibility period; and
5. The amount of benefits.

C. Advise the household of their civil rights and criminal penalties for violations of the Food and Nutrition Act.

D. Inform the household how to use the Electronic Benefit Transfer (EBT) card and of the proper use of benefits (e.g., eligible purchases and transactions).

E. Provide all applicants with the tip sheet, "EBT Tips for Disaster SNAP Shoppers".

F. Advise all households that they may be subject to a post-disaster QC review.

G. Advise all households of regular SNAP eligibility criteria.

H. **[**Obtain any necessary verification within seven days from the application date.**]**

I. Explain the issuance of DSNAP benefits to the applicant.

J. Enter each application on the Disaster Daily Application Log.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 9025 – R. 9/1/26 – OMTL – 708
Dual Participation

[System edits are in place to prevent dual participation by matching the Social Security Number (SSN), if available, of all household members to previously approved or denied Disaster Supplemental Nutrition Assistance Program (DSNAP) applicants. The system will also match SSNs with regular SNAP to prevent participant duplication.

Review the individual's information on the system to determine if they are currently receiving regular SNAP benefits and if they were previously approved or denied DSNAP benefits.**]**

If hard copy applications are taken, they must be entered on the system daily to prevent dual participation. This includes approved and denied applications.

[If an applicant for DSNAP has an application pending for regular SNAP for the same month of the disaster issuance, they may choose to withdraw their SNAP application and apply for DSNAP.**]**

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 9030 – R. 9/1/26 – OMTL - 708
Disaster Supplemental Nutrition Assistance Program (DSNAP) Fair Hearings

DSNAP households requesting a fair hearing must be given an immediate supervisory review on-site.

A. Once the review is complete, the household still has the right to request a fair hearing. If the household requests a hearing, regular hearing procedures found in Volume 1, MS 0440 are followed.

B. Hearing decisions must be made within 30 days of the request.

C. If the household chooses to withdraw their request for a hearing, they may do so verbally or in writing. Verbal withdrawals must be followed up in writing.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 9035 – R. 9/1/26 – OMTL – 708
Disaster Supplemental Nutrition Assistance Program (DSNAP) Electronic Benefit Transfer (EBT) Issuance

The DSNAP EBT card is issued with two series of numbers. The first series is a 16-digit number, which is the **EBT card** number. The second series is 6 digits, which are the last 6 digits of the **EBT case** number. The entire **EBT case** number is 14 digits.

When the application is approved, the recipient's DSNAP **EBT case** number must be entered into the system. The first 8 digits are specific to Kentucky EBT cards and are uploaded by the system. To complete the 14-digit **EBT case** number, the worker enters the 6-digit second series of numbers shown on the EBT card.

Every applicant approved for DSNAP must be given an EBT card and related instructions.

A. The DSNAP EBT card is active upon receipt; however, no benefits are loaded on the account until the day after the application is approved in the system. Individuals **do not** have to call to have their EBT card activated.

B. Explain to the individual their four-digit personal identification number (PIN) is the four numbers in positions 11-14 of the 16-digit card number on the front of the card. Individuals should be encouraged to call the customer service number and change the PIN.

C. DSNAP benefits will be expunged after nine months of inactivity, unless other processes are approved by the Food and Nutrition Administration (FNA).

D. There must be a clear separation of duties between the worker who takes and processes the DSNAP application and the staff member who hands the EBT card directly to the individual.

Volume 2 - Supplemental Nutrition Assistance Program (SNAP)
MS 9040 – R. 9/1/26 – OMTL – 708
Disaster Supplemental Nutrition Assistance Program (DSNAP) Electronic Benefit Transfer (EBT) Card Security

[Security and control of EBT cards are very important. Division of Family Support (DFS) staff must ensure the security of the cards by doing the following:

A. Utilizing DFS administrative staff and local law enforcement in the disaster area to securely transport the EBT cards to the distribution sites, as well as oversee storage and distribution;**]**

B. Authorizing administrative staff at the disaster issuance site who will be responsible for issuing each DSNAP card;

C. Ensuring there is a clear separation of duties for the certification of the DSNAP application and the issuance of the EBT card;

D. Not allowing any unauthorized person access to the EBT cards;

E. Ensuring minimal exposure of the EBT cards;

F. Monitoring issuance operations;

G. Ensuring EBT cards are maintained under lock and key;

H. Ensuring hardcopy applications and worksheets are maintained in a secure area; and

I. Immediately report any unusual circumstances to the Division of Family Support (DFS).

The following EBT logs must be kept for tracking and monitoring:

A. Disaster EBT Card Accountability Log;

B. Disaster EBT Card Local Office Tracking Report; and

C. Disaster Center EBT Card Issuance Log.