

# TABLE OF CONTENTS

<a href="#"><u>1800</u></a>	<b>Case Disposition</b>
<a href="#"><u>1810</u></a>	<b>Case Remains in Pending Status</b>
<a href="#"><u>1820</u></a>	<b>Case Approval – Eligibility Dates and Benefit Amounts</b>
<a href="#"><u>1821</u></a>	Eligibility Effective Dates
<a href="#"><u>1822</u></a>	Proration of Initial Benefits
	<a href="#"><u>1822.1</u></a> Calculating the Prorated Amount
	<a href="#"><u>1822.1.1</u></a> Benefits Prorated by the System
<a href="#"><u>1823</u></a>	Redetermination/Recertification Periods
	<a href="#"><u>1823.1</u></a> 3 Months or Less Certification
	<a href="#"><u>1823.2</u></a> 6-Month Certification
	<a href="#"><u>1823.3</u></a> 12-Month Certification
<a href="#"><u>1830</u></a>	<b>Adverse Actions – Denials and Terminations</b>
<a href="#"><u>1831</u></a>	Denial of a Pending Application
<a href="#"><u>1832</u></a>	Reductions/Terminations After Approval
	<a href="#"><u>1832.1</u></a> Time Frames
	<a href="#"><u>1832.2</u></a> Adverse Action Charts
	<a href="#"><u>1832.2.1</u></a> Adverse Actions Not Requiring Advance Notice
	<a href="#"><u>1832.2.1.1</u></a> Notice of Decision Not Required
	<a href="#"><u>1832.2.1.2</u></a> Notice of Decision Required
<a href="#"><u>1833</u></a>	Termination at Redetermination or Recertification
<a href="#"><u>1834</u></a>	Delay or Corrected Notices
<a href="#"><u>1840</u></a>	<b>Rights of Applicants</b>
<a href="#"><u>1841</u></a>	Right to Appeal
<a href="#"><u>1842</u></a>	Availability of Free Legal Representation
<a href="#"><u>1843</u></a>	Continued Benefits
<a href="#"><u>1844</u></a>	Hearing Decisions

# Case Disposition

## 1800 CASE DISPOSITION

At the end of the interview the case manager must evaluate all factors of eligibility and determine if the case remains pending, approved or denied depending on the individual case circumstances.

## 1810 CASE REMAINS IN PENDING STATUS

If all verification/information cannot be obtained during the interview the case will remain in pending status until the needed verification/information is received to approve benefits or the case is denied either due to non-cooperation or some other reason for ineligibility. If the case remains in pending status, the household will receive Form 2429.

This form advises the household of the following:

- the reason a decision is pending;
- the information needed or action which must be taken;
- the date the information must be provided or action taken; and
- the date of denial if the household fails to cooperate.

## 1820 CASE APPROVAL – ELIGIBILITY DATES AND BENEFIT AMOUNTS

When all factors of eligibility are met, and all verification/documentation has been obtained the case manager will approve the case.

When benefits are approved the household will receive a Notice of Decision advising them of the following items:

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>• the date benefits begin;</li> <li>• amount and type of benefits;</li> <li>• who is eligible</li> <li>• the ineligibility of any household members;</li> <li>• the right to appeal; and</li> <li>• where free legal assistance is available.</li> </ul> | <ul style="list-style-type: none"> <li>• the date benefits begin;</li> <li>• the amount of benefits;</li> <li>• the length of certification;</li> <li>• the ineligibility of any household members;</li> <li>• the right to appeal;</li> <li>• where free legal assistance is available</li> <li>• that benefits may change if a pending TANF application is approved</li> </ul> |
|---|--|

Case managers have the ability to add free form text to any Notice of Decision to include additional information not generated by the system to clarify action(s) taken.

**1821 ELIGIBILITY EFFECTIVE DATE**

A household's eligibility begins the first day of the application month if all eligibility requirements are met.

Cash benefits are effective on the date of approval or the 30<sup>th</sup> day from the date of application, whichever is earlier. If the prorated amount is less than \$10, no payment is made.

The following examples show possible beginning dates for eligibility:

**Example No. 1:** The household applies on April 10<sup>th</sup> and benefits are approved April 21<sup>st</sup>. Prorate the payment from April 21<sup>st</sup>; however, financial eligibility begins April 1<sup>st</sup>.

**Example No. 2:** A household applies April 2<sup>nd</sup>. The approval date is May 2<sup>nd</sup>, benefits are paid from the 30<sup>th</sup> day, May 1<sup>st</sup>; however, financial eligibility begins April 1<sup>st</sup>.

**Example No. 3:** TANF benefits for a household were terminated effectively at the end of March. On April 9<sup>th</sup>, the household reapplies. The approval date is April 19<sup>th</sup>. Benefits are prorated from April 19<sup>th</sup>.

**Example No. 4:** The household applies on April 30<sup>th</sup>. The approval date is May 29<sup>th</sup>, and because of proration, benefits for May are calculated to be less than \$10 and are not paid. A full benefit is issued for June

The initial SNAP benefit month is the first month for which a benefit is issued to:

- a household not previously certified, or
- to a household which does not reapply within the timely recertification period. **Example:** Household waits until 10 days following the end of its certification period to reapply. Because the household failed to apply prior to the last day of the certification, the application is processed like an initial intake application as a break in benefits has occurred.

Eligibility begins the initial month effective the date of application if otherwise eligible. Benefits are prorated the initial month of application based on the application received date. Prorated benefits are issued from the date of application even if the prorated amount is less than the minimum benefit amount.

Households may be ineligible for the first benefit month, but approved for ongoing benefits, or eligible for the first benefit month and ineligible for subsequent benefits. **Do not deny** ongoing benefits unless the entire household is ineligible.

**Exception:** When a TANF case is closed for not cooperating with NEON, an application received prior to the month benefits end must be denied. The household may reapply effective the month after the month benefits end or when their mandatory sit-out period is completed.

If a TANF application is received during the sit-out period and is denied, review the application for SNAP requests or changes reported.

**1822 PRORATION OF INITIAL BENEFITS**

Using the TANF Grant 30th Day Time Limit Table in E&P MS C-120, calculate prorated benefits for the first month of eligibility from the earlier of the

- approval date, or
- 30th day in cases taking 30 or more days to approve.

SNAP benefits for the initial month of certification are prorated from the date of application. The initial month's prorated and the next month's benefit are approved as separate issuances at the same time when a household applies after the 15th of the month.

**Example of application on or before the 15th:** The household applies on April 8<sup>th</sup>. Benefits are prorated and approved from the period of April 8<sup>th</sup> through April 30<sup>th</sup>. The ongoing benefit is from the first through the last day of each month. A person applying on the 31<sup>st</sup> day of the month is considered to have applied on the 30<sup>th</sup> and would have benefits prorated using 30 days.

**Example of application after the 15th:** The household applies on April 24<sup>th</sup>. Benefits are prorated from April 24<sup>th</sup> through April 30<sup>th</sup>. The second or following month's benefit for May 1<sup>st</sup> through 31<sup>st</sup> is also approved and issued at the same time.

If the household meets expedited status and postponed verification (PV) is requested but not provided by the specified date, the household is ineligible to receive the third month's issuance.

**Exception:** Migrant or seasonal farm workers (in or out of the work stream), who were certified for SNAP in Nevada or another state the month prior to the application month, are eligible to receive a full benefit (1<sup>st</sup> through the last day) regardless of the application date. The application date must be entered as the first day of the month. If this CANNOT be done, contact the Help Desk for assistance in correcting the APPL date

**1822.1 Calculating the Prorated Amount**

1. Determine the household's monthly benefit based on the household size and net income, and
2. Determine the **prorated** benefit by applying the instructions in E&P MS C-120 for prorated benefits using the monthly benefit and whichever of the following dates is earlier:
  - approval date, or
  - 30<sup>th</sup> day from the application date. The date of the application is the first day of the 30-day period.

Nevada uses a standard 30-day calendar formula ( $\text{full month's benefit} \times 31\text{-date of application} \div 30 = \text{allotment}$ ) to determine monthly benefits. This means a person applying in February or on the 31<sup>st</sup> of the month is the same as applying on the 30<sup>th</sup>. Always subtract the application date from 31 days, regardless of the number of days in the month.

Benefits for the initial month are prorated using the 30-day formula as follows:

1. Subtract the date of the application from 31 to arrive at the number of days to be prorated.
2. Divide the benefit for the household size (after all allowable deductions and expenses are applied) by 30 days. The sum is the daily SNAP benefit amount. Round to cents.
3. Multiply the number of days in #1 by the sum in #2. Drop the cents.
4. The results in #3 is the prorated benefit amount.

Example: A household with a monthly benefit computed to be \$395.00 applies on July 17<sup>th</sup>. The household's prorated allotment for July is \$184.00 ( $31-17 = 14$  days.  $\$395.00 / 30 \text{ days} = \$13.166 = \$13.17$ .  $\$13.17 \times 14 \text{ days} = \$184.38 = \$184.00$ )

The system will automatically compute and prorate the initial month's benefit based on information determined by the case manager. When completing manual budgets, use the same formula to determine the prorated benefit amount.

**1822.1.1 Benefits Prorated by the System.**

The system will automatically compute prorated benefits for:

TANF based on the date of approval or the 30<sup>th</sup> day from application, whichever comes first. Benefits prorated to be less than \$10 are not issued.

SNAP based on the date of application.

INITIAL and ONGOING eligibility and payment

amounts are calculated based on information determined by the case manager.

All benefits for new approvals are issued the day after approval, except for future months. Benefits are issued once a month for ongoing cases and are subject to the cut-off and adverse action dates listed in E&P MS C-100.

**Note:** In some situations, a household may be ineligible for the application month and following month but eligible in the third month ongoing. Due to existing programming, AMPS will not allow a case to be processed past the first two months of ineligibility and denies the case ongoing. In these situations, the case manager must reinstate the case for the third month and approve benefits forward without prorating the benefits for the eligible month.

### 1823 REDETERMINATION/RECERTIFICATION PERIODS

Except for the Temporary Program, TANF households do not have certification periods. They remain eligible until determined ineligible. However, a redetermination is required every 12 months.

**Note:** When upgrading from an ERP to a non-ERP TANF benefit, the RDMN screen will be displayed and will default the RD Due Date to 6 months. In this instance, the FSS will need to adjust the RD Due Date to ensure their 12-month certification period is not exceeded.

To prevent an overdue redetermination, process it by monthly cut-off of the month in which the redetermination is due.

Refer to E&P MS B-120 for the redetermination process.

The following are guidelines for certification periods. Households are certified based upon their circumstances. The first month of eligibility is the first month of the certification period.

Once approved, certification periods cannot be shortened. A certification period can only be adjusted due to a system problem or input discrepancy (such as transposed numbers). Do not shorten the certification period due to an incorrect policy decision.

**1823.1 3 Months or Less Certification**

Certify households for a **full** 3-month period, not including a prorated application month, when:

- The only household member is an ABAWD, not exempt from the three-month limitation as defined in E&P MS B-400.

Certify households for less than three months when the household requests a shorter certification of if they indicate they will no longer qualify for benefits (e.g., moving to another state). The case manager must document in the case record the reason for a certification period less than three months.

**1823.2 6-Month Certification**

Households in which all members are not elderly or disabled will be approved for a 6-month certification which includes the prorated application month. These households are designated as Simplified Reporting households with limited reporting requirements and must have all of the household's eligibility factors evaluated every six months.

If a Simplified Reporting household is approved for more than 6 months in error, the case must have an ALERT/TASK created to send out a Review of Eligibility form (ROE) in the sixth month. If the ROE is not returned the case must be terminated. The ROE will be considered the interim report which is required for a Simplified Reporting household approved for more than 6 months.

**1823.3 12-Month Certification**

Households in which all members are either elderly (age 60 or older) or disabled (see E&P MS B-400) are approved for a 12-month certification which includes the prorated application month. These households are designated as Status Change reporters and are required to report the changes listed in E&P MS B-600 within 10 days of the change.

If there are other required members in the household who are not eligible to receive SNAP benefits due to a disqualification or citizenship requirement, the ineligible required member(s) must also be elderly or disabled for the household to be certified under this category.

**1830 ADVERSE ACTIONS – DENIALS AND TERMINATIONS****1831 DENIAL OF A PENDING APPLICATION**

Adverse action is not required when denying a pending application. Denial of pending application is:

effective immediately.

Office managers must carefully consider "good cause" for TANF applications who provide requested verifications untimely and request reinstatement of their application. If "good cause" is not granted, applicant must submit a new application to have TANF eligibility determined.

effective immediately if the household is ineligible or withdraws its request for assistance. Otherwise, the application is held until the 30th day following the date of application before a denial action is taken. The day after the date of the application is the first day of the 30-day period.

The system contains a 30-day edit to prevent the premature denial of initial applications for non-cooperation, missed interview appointments and questionable residency.

When benefits are denied the household will receive a Notice of Decision advising them of the following items:

- the reason the application was denied;
- the effective date of denial;
- the right to appeal; and
- the availability of free legal representation.

Case managers have the ability to add free form text to any Notice of Decision to include additional text not generated by the system to clarify actions taken.

## **1832 REDUCTIONS/TERMINATIONS AFTER APPROVAL**

### **1832.1 Time Frames**

Federal regulations require timely notification to ongoing households before the effective date of a benefit reduction, termination or loss of eligibility unless the 13-day adverse action period is not required.

TANF and SNAP terminations waiving adverse can continue to be posted after the cut-off dates if the benefits have not been issued based on the BMNT screen.

When multiple actions are taken, the 13-day advance notice period begins from the date of each action on the notice. Households have the right to file a hearing request on each action.

### **1832.2 Adverse Action Charts**

#### **1832.2.1 Adverse Actions Not Requiring Advance Notice**

##### **1832.2.1.1 Notice of Decision Not Required**

In the following situations, adverse action is waived, and a Notice of Decision is not required:

<b>TANF – REASON FOR REDUCTION OR TERMINATION</b>	<b>SNAP – REASON FOR REDUCTION OR TERMINATION</b>
1. Death of the entire TANF assistance unit.	1. Death of the entire SNAP household.
2. Continued benefits cease as a result of a fair hearing decision upholding the agency's proposed action.	2. The household was previously notified: a. When increased allotment to restore lost benefits terminates and restoration is complete. b. Of fluctuating benefits within its certification period.
	3. Continued benefits cease as a result of a fair hearing decision upholding the agency's proposed action.



**1832.2.1.2 Notice of Decision Required**

In the following situations, adverse action is waived; however, a Notice of Decision is required and must be sent to the household.

<b>TANF – REASON FOR REDUCTION OR TERMINATION</b>	<b>SNAP – REASON FOR REDUCTION OR TERMINATION</b>
1. The household requests reduction or termination of TANF benefits in writing.	1. The household voluntarily requests, in writing or in the presence of a case manager (in person or by telephone) SNAP to be terminated.
2. The household supplies written information which requires termination or reduction and a signed written statement they understand the consequences of supplying such information is obtained. When a verbal request for termination is received, the recipient is given a 13-day advance notice of the closure.	2. The household submits written information, such a change report form, signed by the household, which clearly necessitates reduction to a specific amount or termination, without the need for any additional verification or follow up.
3. A household or individual in the household has applied or been approved for assistance in another state or the household reports a move to another state.	3. The household reports they have moved or are moving from the state or another state agency has reported the household, or individual has applied for benefits in another state.
4. Loss of Contact (LOC) – a household's address is unknown, and mail is returned by the post office, or information verifies the household is no longer at the Nevada address provided and a new address is not known.	4. Postponed Verification (PV) is not returned, and if the customer was notified in writing that benefits would end the last day of the first month benefit, unless the application is filed on or after the 16 <sup>th</sup> day of the month. Eligible applicants filing on these dates on these receive two issuances (prorated amount and the second month's benefit) upon approval. In these cases, PV will impact the third benefit month.
5. Intentional Program Violation (IPV) disqualification and resulting reduction or termination of benefits to the remaining household.	5. Intentional Program Violation (IPV) disqualification and resulting reduction or termination of benefits to remaining households.
6. The individual is an inmate of a public or mental institution.	6. Federal Mass Change
7. The individual has been placed in skilled nursing care, intermediate care, or long-term hospitalization.	7. The treatment center is no longer approved by the state or certified by FNS.
8. The head of household or a payee is deceased, and no temporary payee is available.	8. The household was previously notified of a benefit change resulting from TANF or SSI approval from a joint application.

9. A child is legally removed from the home or is placed in foster care by his/her legal guardian.	9. Change from cash repayment to benefit reduction due to failure to make repayment of established claims.
10. Information indicates assistance should be reduced or terminated because of <u>probable fraud</u> and this is verified by collateral sources.	

**Note:** A 30-day notice for failure to comply with PRP requirements includes the 13-day adverse action.

**Reminder: Do Not** take a separate negative action on a case that has already been issued a Notice of Expiration (NOE), because the benefits are already ending.

If the 13-day adverse action period does not expire until after the last day of the current issuance month, the customer is eligible for benefits the following month unless the certification period has ended.

### 1833 Termination at Redetermination or Recertification

Adverse action is required when a household is determined ineligible at redetermination due to excess income, resources, household composition or non-cooperation.

**Timely Recertification** – SNAP households who file a timely recertification application prior to or on the 15<sup>th</sup> of the last month of their certification, and fail to cooperate, are not denied until the first of the following month. The system is programed to automatically post these denials.

**Untimely Recertification** – SNAP households which apply after the 15<sup>th</sup> of the last month of certification, and fail to cooperate, are denied using the same policy as initial applications.

### 1834 Delayed or Corrected Notices

If notice of adverse action is required and the Division fails to meet this deadline or mail the legal notice in time to allow adverse action for the intended benefit requiring change, the benefits or eligibility status cannot be changed until the following month.

When a corrected notice is sent, the 13-day advance notice period begins from the date of the correct notice. Action to deny, reduce or terminate benefits based on the original notice no longer applies. Manually changing the notice date will also change the notice time frame.

Once a case is approved, same day negative corrections cannot be made on benefits already authorized. If a case approval decision is posted, changes to the case circumstances can only be acted on following adverse action rules. If an incorrect approval is posted, overpayment referrals must be processed for those incorrectly authorized benefits.

Same day corrections increasing benefits can be posted when administratively possible. When same day corrections are done or posting discrepancies occur, the correction will normally generate a notice and notice text for each posting action. Multiple actions are hard to track and confuse the household. A narration with clear documentation as to what occurred is required.

**For example:** If a case was incorrectly denied due to incomplete inclusion of information, such as allowable expenses or other household members, and then approved on the same day, narrate the events and add free form text to the notice explaining what has happened and which action is correct. This is done so other individuals reviewing the case or a hearing representative can understand which action is the latest action.

## **1840 RIGHTS OF APPLICANTS**

### **1841 Right to Appeal**

Households have the right to appeal decisions about their cases. Notice of the right to appeal is included on legal notices or other printed forms.

A TANF household must request a hearing in writing.

A SNAP household may request a hearing verbally or in writing. If a request for a hearing also includes a timely request for continued benefits, the benefits must be continued within two (2) workdays of the date of the request or three (3) days, whichever comes first. Other programs require a written request for a hearing.

### **1842 Availability of Free Legal Representation**

Legal notices and other printed forms contain the name, address and phone number of free legal services that are available in the area.

### **1843 Continued Benefits**

If a household's request for a hearing is received PRIOR to the effective date of the proposed action or WITHIN 13 DAYS from the date of the Notice of Decision (the day after the date on the notice is the first day of the 13-day period), whichever is later, the household shall be provided continued benefits until:

the hearing decision is made, unless a written request not to continue benefits is provided; or the hearing officer makes a preliminary finding the sole issue is one of state or federal law requiring automatic benefit adjustments.

**Note:** if the action is to assign a protective payee because of mismanagement and the caretaker appeals the action, issue the TANF benefit to a protective payee until the hearing decision is rendered.

- The certification period ends; or
- The household waives their right to continued benefits verbally or in writing; or
- the household voluntarily withdraws their request for a hearing or for continued benefits; or
- the hearing officer renders a decision in the agency's favor.

If a hearing request is not received timely, good cause must be shown. Good cause may include (not all inclusive) hospitalization of the customer or other family emergencies, postal service delays, division oversights, misrouting of the hearing request, transportation problems and telephone service access. If guidance or clarification is needed for a good cause determination, contact the program specialist responsible for the program for which the hearing is filed.

#### **1844                      Hearing Decisions**

After the hearing decision is rendered

- take action to reduce or terminate benefits, if the Division's action is upheld; or
- continue benefits, making any necessary payment adjustments, if the decision is in the household's favor.

Households may submit an application while pending a hearing with continued benefits. This is allowed because the household cannot be denied the opportunity to reapply or access benefits in the event the hearing is lost or abandoned, which usually creates an automatic overpayment. If circumstances have changed, the household may be eligible with the new application and the customer would not have an overpayment for the continued benefits or the amount may be reduced based on the date of application. If the hearing is found in favor of the customer, continue benefits and deny the new application.

See E&P MS B-1000 for hearing procedures for continued benefits.