

WISCONSIN DEPARTMENT OF HEALTH SERVICES
Division of Medicaid Services
1 W. Wilson St.
Madison WI 53703

To: FoodShare Users

From: Jori Mundy, Bureau Director
Bureau of Eligibility and Enrollment Policy

Re: **FoodShare Release 22-01**

Release Date: 04/04/2022

Effective Date: 04/04/2022

EFFECTIVE DATE	The following policy additions or changes are effective 04/04/2022 unless otherwise noted. Underlined text denotes new text. Text with a strike through it denotes deleted text.
POLICY UPDATES	
1.2.1.1 General Verification Rules	Updating verification rule language to align with BC+.
1.2.2.2 Collateral Contacts	Added information after the IMM decommission.
1.2.4.4 Asset Verification	Updated annual COLA amount.
1.2.5 Questionable Items	Added clarification to items that may need further verification.
2.1.3.4 Signature	Updated applicant and guardian information.
3.2.1.5.3 Drug and Alcohol Treatment Centers	Clarified FNS Guidance.
3.14.1 Intentional Program Violation (IPV) Disqualification	Updated policy on documentation evidence and hearsay evidence.
4.2.1.6 Elderly, Blind, or Disabled Food Unit Case Processing	Removed section for clarification.
4.3.4.3 Disregarded Unearned Income	Added information about the new LIFE program.
4.4.1 Assets	Updated annual COLA amount.
7.1.1 Allotments	Added more information on FoodShare allotments and an example.
7.3.1.9 Overpayment Due to Client and Non-Client Error	Updated with a policy change on establishing claims.
7.3.2.1 Client and Non-Client Error	Updated policy.
7.3.2.2 Collecting Client and Non-Client Error Claims Against Participating Food Units	
7.3.2.3 Collecting Claims for Client & Non-Client Errors Against Non-Participating Food Units	

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1.2.1 Verification Introduction

1.2.1.1 General Verification Rules

7 CFR 271.2

The general verification rules are as follows:

1. Only verify those items required to determine eligibility and benefits for the programs for which you are testing eligibility.
2. ~~Do not~~ Don't verify an item that is not required to be verified and is not documented in case comments as questionable.
3. Avoid over-verification (requiring excessive pieces of evidence for any one item). ~~If you have all of the~~ or requesting verification you need, do that is not ~~continue~~ needed to determine eligibility. Don't require additional verification once the accuracy of a written or verbal statement has been established.
4. ~~Do not~~ Don't verify information already verified unless you believe the information is fraudulent or differs from more recent information. If you suspect fraud exists, determine if you should make a referral for fraud or for front-end verification. ~~See the Income Maintenance Manual Chapter 12 Fraud Prevention/Front End Verification.~~ (see Process Help 31.3.4 FEV/Fraud Referral vs. Claim Referral).
5. ~~Do not~~ Don't exclusively require one particular type of verification when various types are adequate and available.
6. Verification need not be presented in person. Verification may be submitted by mail, fax, ~~or another electronic device, or through an authorized representative~~ electronically or in person.
7. Verification need not be submitted by the primary person.
8. IM worker must not ask for verification based on race, religion, ethnic background, or national origin. Verification requests cannot target groups such as migrant farm workers or American Indians for more intensive verification.

When verification is requested and not returned by the due date, each item that the applicant or member failed to verify must be updated to indicate it was not verified. This will ensure the notice of decision lists each item that was not verified. This is required for the notice to meet the federal definition of an adequate notice.

1.2.2 Sources for Verification

1.2.2.2 Collateral Contacts

7 CFR 273.2(f)(4)(ii)

Collateral contacts consist of oral confirmations of circumstances by persons other than food unit members. A collateral contact may be made either in person or over the telephone.

Note: Authorized representatives completing an application or renewal cannot serve as collateral contacts.

~~The~~ Generally, the local agency, ~~generally,~~ must rely on the applicant/member to provide the name of any collateral contact. The applicant/member may request assistance in designating a collateral contact. The local agency is not required to use the collateral contact designated by the applicant/member if the collateral contact cannot be expected to provide accurate third-party verification.

When the collateral contact designated by the applicant/member is unacceptable, the local agency must designate another collateral contact, ask the applicant/member to designate another collateral contact, provide an alternative form of verification, or substitute a home visit. The local agency is responsible for obtaining verification from designated collateral contacts.

When talking with collateral contacts, local agency staff should disclose only the information that is absolutely necessary to get the sought-after information. IM workers should avoid ~~disclosing that an individual has applied for FoodShare, disclosing any information supplied by the applicant/member, or suggesting that the applicant/member is suspected of any wrongdoing.~~

~~Clearly document the collateral contact information.~~

- ~~• Disclosing that an individual has applied for or is receiving FoodShare~~
- ~~• Disclosing any information supplied by the applicant/member~~
- ~~• Suggesting that the applicant/member is suspected of any wrongdoing~~

Clearly document the collateral contact information. Include the following details:

- Name of collateral contact
- Title of Individual
- Organization the individual is affiliated with
- Address
- Phone number
- Significance to household
- Date(s) of contact(s) and when pertinent information was obtained
- The information obtained and used for verification

1.2.2.2.1 Third-Party Cooperation

Wisconsin Stats. §49.22(2m) authorizes DHS, DCF, county, and tribal agencies to request third-party cooperation from any person in Wisconsin in the verification of data. Cooperation from the third party is required within seven days of the request. No compensation to the third party is required, and the lack of compensation is not a valid reason for the third party to refuse to cooperate.

1.2.4 Financial Verification

1.2.4.4 Asset Verification

7 CFR 273.2(f)(2) and 7 CFR 273.2(f)(3)

Assets are not considered in the FoodShare eligibility determination for broad-based categorically eligible FoodShare applicants and members since they are authorized to receive a TANF -funded service. Although the amount of available liquid assets must be reported at the point of initial application to determine eligibility for priority service and expedited issuance (2.1.4 Expedited Service at Application), the reported assets are not required to be verified.

EBD food units that have gross income that exceeds 200% of the FPL are therefore not categorically eligible and are subject to the \$3,~~500~~750 asset limit. These food units must verify assets (4.4.1 ASSETS).

1.2.5 Questionable Items

7 CFR 273.2(f)(2) and
USDASNAP Policy Guidance, November 13, 2008

IM agencies may request verification of other factors if information provided at application, renewal, or reported change is questionable, unclear, or incomplete and would have an effect on FoodShare eligibility or benefit level.

Some examples of circumstances that may require further verification are:

- Household composition,
- Claim of separate food unit,
- School enrollment,
- Household expenses exceed income,
- Pay stub name differs from employed applicant/member's name,
- ~~1. Medical expenses that are unusually high or exceed monthly income, or~~
- Proof the medical expense is for an allowable service or purchase
- Resolving any identified EPPs ~~(~~[\(see Process Help 70.1\)](#)~~)~~.

If an IM agency receives conflicting information, verification must be requested to clarify the circumstances. For example, if food unit expenses exceed income, obtain a written statement from the applicant/member on how they are paying expenses, or verify with the landlord how rent is being paid.

There may be instances where the applicant/member has reported earnings as required by program rules and produced a pay stub to verify those earnings. Although the name on the pay stub differs from the applicant/member's name, the purpose of the documentation is not to verify identity. The applicant/member can attest to the accuracy of those earnings and provide a reasonable explanation for the discrepancy with the name contained on the pay stub. IM workers should document this explanation in case comments. The local agency could reasonably consider such documentary evidence to verify the reported income. See [1.2.1.3 RESPONSIBILITY FOR VERIFICATION](#).

[View History](#)

2.1.3 Interviews

2.1.3.4 Signature

7 CFR 273.2 (b)(1)(iii)

A signature is required to indicate that all the information provided is true and complete and that the food unit understands their rights and responsibilities. Only one signature is needed for a FoodShare application or request. The applicant, authorized representative, or an adult member of the food unit can provide a signature in written, verbal, or electronic format via:

- An electronic signature* ,
- On the completed CWW generated Application Summary,
- On the FoodShare Wisconsin Application ([F-16019A](#) or [F-16019B](#)), or
- A telephonic signature.

*An electronic signature can be accepted from any electronic signature software or other electronic source. Examples include DocuSign, eSign, ACCESS, etc.

~~In order for~~For a signature to be valid from an individual under age 18, the youth must be the primary person, emancipated or homeless, and not under the care and control of another adult.

A signature is required when a six-month report form is submitted.

It is not necessary for an applicant's signature to be witnessed by an agency representative for a FoodShare application or renewal to be considered complete. However, the signature of a witness is required when the application is signed with a mark. The witness may be another adult or an IM worker. A copy of the FoodShare applicant or member's case summary showing that a telephonic signature was collected will be stored in the electronic case file.

Any adult food unit member or a food unit's authorized representative may sign the FoodShare application, renewal, or six-month report form.

Example 1	Eve applies and sets the filing date for FoodShare. Jule, Eve's roommate, who is also an adult, completes the intake interview and signs the case summary signature page. The FoodShare application is valid because Jule is a responsible FoodShare assistance group member.
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Exception

An individual declared incompetent by a local, state, or federal court can't sign an application. Their representative or guardian will need to complete and sign the application. An applicant who has a designated guardian (guardian of the estate, guardian of the person and the estate, or guardian in general) can't complete and sign

the application. Only the guardian can complete and sign the application or appoint another representative.

3.2.1 Residence

3.2.1.5 Group Living Arrangement

3.2.1.5.3 Drug and Alcohol Treatment Centers

7 CFR 271.2

7 CFR 273.11(e) and (f)(6)

DHS 75.03 General requirements

Residential alcohol and drug treatment facilities are defined as: private facilities, nonprofit organizations or institutions, community-based residential facilities, hospitals, or publicly operated community mental health facilities. These facilities are not institutions.

The Department of Health Services certifies these facilities according to DHS 75.03 General requirements. State certification of these facilities should not be confused with state licensing of drug and alcohol treatment facilities. Such licensing is not required for FoodShare eligibility.

For an individual of a residential treatment facility to be certified to receive and use their FoodShare benefits to purchase meals, the facility must either be:

1. Tax exempt and certified by the State as either receiving or, eligible to receive, or operating to further the purposes of Part B of Title XIX (Medicaid). This may include faith-based treatment, facilities; or
2. Authorized as a retailer by FNS.

Title XIX [list of facilities for substance abuse](#) and for *mental health*.

An individual residing in a treatment facility may **voluntarily** apply for FoodShare. If an individual will be using FoodShare to purchase meals, the facility or an employee of the facility must be designated as an authorized representative with the F-10126B (scroll through the forms and select F-10126B) Appoint, Change, or Remove an Authorized Representative: Organization form. The authorized representative must apply on the individual's behalf (see [2.1.3.3 USE OF AN AUTHORIZED REPRESENTATIVE](#)).

If the individual is the primary person on an existing case, the facility or employee will need to be added as an authorized representative. All other household members will need to re-apply on their own to continue to receive benefits. Individuals residing in the facility must receive or have access to their notices, access to their case information and be allowed to file a fair hearing.

The resident is the QUEST cardholder and the primary person on the case. The QUEST cardholder or the authorized representative, if granted permission by the resident, may purchase meals prepared and served by the facility, food purchased from another

authorized retailer, or both.

Reminder: The authorized representative cannot also be the authorized buyer.

Determine the eligibility of an individual residing in a treatment facility as a one-person FoodShare food unit, unless the resident is a parent whose child(ren) resides with them at the facility. Include any child(ren) residing with their parent(s) at the facility, whether or not the facility provides the majority of the child(ren)'s meals, when determining eligibility.

Note: Faith-based treatment and rehabilitation facilities are not required (by law or FNS regulation) to allow residents to opt-out of religious programming or activities in order to participate in the FoodShare program.

When a household is discharged from the treatment facility, the facility must perform the following:

1. Notify the agency. If possible, the facility must also provide the member with a change report form to report the member's new address and other circumstances after leaving the facility. The facility must advise the member to return the form to the agency within 10 days. Members can also report changes through ACCESS or by phone.

After the member leaves the treatment facility, the facility can no longer act as the member's authorized representative for certification purposes or for obtaining or using benefits and must be removed from the member's case.

2. Return the member's QUEST card if it was in the possession of the treatment facility.

If a member from an existing FoodShare case is residing in a drug or alcohol treatment facility and is not using FoodShare benefits to purchase food and meals, the member is considered temporarily absent from the home.

Outpatient treatment centers offering communal meals must meet both of the following criteria to be eligible to accept FoodShare benefits:

1. The facility is an authorized SNAP retailer.
2. The facility is tax-exempt and certified by the State as either receiving, eligible to receive, or operating to further the purposes of Part B of Title XIX (Medicaid). This may include faith-based treatment facilities. If the facility is no longer certified under Part B of Title XIX, approval to participate in and redeem FoodShare benefits would be automatically withdrawn.

3.14.1 Intentional Program Violation (IPV) Disqualification

7 CFR 273.16

An applicant or member commits an Intentional Program Violation (IPV) when he or she intentionally:

- Makes a false or misleading statement or misrepresents, conceals, or withholds facts, including but not limited to their identity, who he or she is living with, or which state they live in, to become eligible or to remain eligible for benefits; or
- Commits any act that constitutes a violation of the Food and Nutrition Act of 2008, the Supplemental Nutrition Assistance Program Regulations, or any Wisconsin statute for the purpose of using, presenting, transferring, acquiring, receiving, possessing, or trafficking of FoodShare benefits or QUEST cards.

Trafficking includes the following:

- Using FoodShare benefits to purchase food for the sole purpose of returning the food for a cash refund,
- Reselling food purchased with FoodShare benefits for cash or other consideration,
- Purchasing, for cash or other consideration, food that was previously purchased from a supplier using FoodShare benefits,
- Directly or indirectly buying, selling, or stealing EBT cards, card numbers, or personal identification numbers (PINs) for cash or other consideration,
- The exchanging of firearms, ammunition, explosives, or controlled substances, as defined in section 802 of Title 21 of the United States Code, for SNAP benefits, or
- Unauthorized person(s) knowingly obtaining, possessing, transferring, or using FoodShare program benefits.

An IPV may be determined by the following means:

- Federal, state, or local court order,
- Administrative Disqualification Hearing (ADH) decision,
- Pre-charge or pretrial diversion agreement initiated by a local district attorney and signed by the FoodShare member in accordance with federal requirements,
- A signed and completed “Waiver of Administrative Disqualification Hearing” form ([F-16039](#)):
 - The only acceptable ADH waiver is a completed DHS forms library version ([F-16039](#)). No other actions taken by or on behalf of the household should be interpreted as the individual waiving their ADH.
 - The “Waiver of Administrative Disqualification Hearing” form should always be mailed to the individual, if an IPV is being pursued. When the form is sent, it should be documented in the case comments.

When requesting an administrative disqualification hearing, there must be clear and convincing evidence demonstrating that the individual committed, and/or intended to commit, an Intentional Program Violation (IPV). The burden of proof is on DHS or the local agency to prove the actions were intentional and provide verification that the member's reporting requirements were understood.

eDRS: If a worker receives a notification on the FoodShare IPV Sanction Page in the Individual Information – eDRS Details section that an IPV was received in another state, he or she must verify this information as either true or false with the other state or the member.

Documentation may be in any form deemed appropriate and legally sufficient. Such documentation may include, but shall not be limited to, electronic or hard copies of court decisions, administrative disqualification hearing determinations, signed disqualification consent agreements or administrative disqualification hearing waivers.

You may accept a verbal or written statement from another State agency attesting to the existence of the documentation listed above.

You may accept a verbal or written statement from the household affirming the accuracy of the disqualification information if such a statement is properly documented and included in the case record. If the statement from the household contradicts the disqualification data, additional documentation will be required to verify that the individual should not be disqualified.

IM workers should document any collateral contacts or other information regarding the IPV disqualification in Case Comments.

4.2.1 Categorical Eligibility

4.2.1.6 ~~Elderly, Blind, or Disabled Food Unit Case Processing~~

~~If the food unit passes both the asset and the net income tests, the income must be adjusted in the CARES system for the FoodShare calculation to allow the food unit to pass the 200% gross test and issue the correct benefit to the FoodShare assistance group. Use the FoodShare Worksheet (F-16033) to determine the adjusted income amount. Scan the worksheet into the ECF and document in case comments the food unit's actual income. Suppress the CARES generated notices and send a manual positive notice along with a copy of the worksheet. See Process Help 17.1 for CWW entries.~~

4.3.4 Unearned Income

4.3.4.3 Disregarded Unearned Income

Disregard means do not count. When you are calculating the total amount of unearned income a person has received, you should exempt or exclude any of the following kinds of unearned income:

Housing and related income:

1. Disregard rent paid by the Department of Housing and Urban Development (HUD) and Farmer's Home Administration (FMHA) directly to a landlord as income. Do not include these payments as a deduction. Only include as a rent expense what the food unit owes to the landlord after the HUD or FMHA payments.
2. Disregard rent paid by HUD to residents in the experimental housing program in Green Bay.
3. Disregard HUD or FMHA utility reimbursement payments made directly to a food unit or utility provider as income.
4. Disregard HUD utility reimbursement payments diverted by a Native American housing authority directly to the utility provider without permission, consent, or agreement of the food unit.
5. Under the Family Investment Centers program, HUD provides grant money to public housing agencies and Indian housing authorities. In turn, they provide access to education and job opportunities to public housing residents. Disregard as income services provided to these residents. Services include:
 - a. Child care
 - b. Employment and training counseling
 - c. Literacy training
 - d. Computer skills training
 - e. Assistance in attaining certificates of high school equivalency
 - f. Other similar services
6. Disregard free rent, no income is counted and no rent deduction is allowed.
7. A tenant may be billed utility expenses for common electrical devices, for the benefit of any number of tenants, but wired through his or her meter. A notice from the landlord identifies that cost and the tenant's reimbursement. Disregard the reimbursement.
8. Income received as a result of participation in the Fresh Start Program.

Employment Training and Education:

1. Educational aid for students is not counted as income.
2. Disregard educational expense reimbursements.
3. Disregard income produced by an educational trust.

4. Disregard W-2 TSP (stipends for non-custodial parents) received for W-2 education and training activities.

Loans:

Disregard as income any loan to the food unit. This includes loans from private individuals and commercial institutions. A legally executed document is not required to verify that income is a loan. A statement signed by both parties is enough to verify the income is a loan, if it contains: the amount of the loan, that the payment is a loan, and that repayment is required.

Medical and Dependent Care:

1. Disregard reimbursements for medical or dependent care. Some examples of medical or dependent care reimbursements that should be disregarded are:
 - a. Reimbursements from the Medical Assistance (MA), also known as Medicaid or Title 19 Community Integration Program (CIP).
 - b. Reimbursements from the Alzheimer's Family Caregiver Support Program (AFCSP) and National Family Caregiver Support Program (NFCSP).
2. Disregard dependent care payments as income for a food unit member's care when a county agency:
 - a. Pays a dependent care provider directly,
 - b. Reimburses the food unit after the food unit has incurred or paid a dependent care expense.
2. Disregard payments from the Wisconsin Family Support Program, which assists families by covering medical, dependent and other allowable expenses for in-home support for children with severe disabilities. Payments may be issued in several ways, including by voucher or direct payment to the vendor, or direct payment to the family as a reimbursement for allowable expenses. Do not confuse this program with "family support", a court-ordered obligation that combines child support and maintenance.

SSA programs:

1. Disregard reimbursements for services provided by the [Social Services Block Grant Program](#).
2. Disregard retroactive SSI payments which are paid in installments.
 - a. Retroactive SSI benefits which total 12 months or more of the Federal Benefit Rate (monthly SSI amount) will be paid in three or fewer installments at six month intervals. Each installment payment should be counted as an asset. Retroactive SSI benefits which equal or exceed 12 months of benefits, but which are owed to the following categories of recipients, will continue to be received in one lump sum:
 - i. A person who has a medical impairment which is expected to cause death within 12 months.

- ii. A person who is ineligible for benefits and is likely to remain ineligible for the next 12 months.
3. Disregard income of an SSI recipient necessary to fulfill a Plan to Achieve Self-Support (PASS) regardless of the source. This income may be spent in accordance with an approved PASS or deposited into a PASS account. The SSA must approve the individual's PASS in writing, identifying the amount of income that must be set aside each month to fulfill the PASS. It is the member's responsibility to report and verify that such income is necessary to fulfill its PASS in order for the income to be disregarded.
4. A qualified organization may collect a fee for acting as the representative payee for an SSI or OASDI recipient. Disregard the amount withheld from the SSI or OASDI payment as income to the recipient. Reduce the SSI or OASDI amount by the amount withheld instead.

SSI-E

Disregard SSI-E income for FoodShare. It is not necessary to determine if a SSI-E payment is being used for its intended purpose in order to disregard the income.

Energy Assistance Program

Disregard all payments provided by the Low Income Home Energy Assistance Program (LIHEAP) or Wisconsin Home Energy Assistance Program (WHEAP).

Community Options Program

Disregard Community Options Program (COP) reimbursement for long-term care services. If a food unit member is receiving COP payments for providing services, count the money as earned income.

Tribal / Native American Payments

Disregard payments to individual tribal members of the following tribes and/or from the following federal settlements:

1. Seminole Indians of Florida (PL 84-736).
2. Pueblos of Zia and Jemez of New Mexico (PL 84-926).
3. Red Lake Band of Chippewa Indians (PL 85-794).
4. Alaska Native Claims Settlement Act (PL 92-203).
5. Stockbridge Munsee Indian Community of Wisconsin (PL 92-480).
6. Burns Indian Community of Oregon (PL 92-488).
7. Pueblo of Santa Ana (PL 95-498).
8. Pueblo of Zia of New Mexico (PL 95-499).
9. Bois Forte Band of the Chippewa Tribe or the Grand Portage Band of Lake Superior Chippewa Indians under 25 USC 1407 (PL 93-134, 97-458, 106-568, 113-290).
10. Navajo and Hopi Tribe relocation payments (PL 93-531).
11. Cherokee Nation of Oklahoma (PL 94-114).

12. Cheyenne River Sioux, Crow Creek Sioux, Lower Brule Sioux, Oglala Sioux, and Rosebud Sioux Tribes of South Dakota (PL 94-114).
13. Devils Lake Sioux and Standing Rock Sioux Tribes of North Dakota (PL 94-114).
14. Shoshone-Bannock Tribes of Idaho (PL 94-114).
15. Sac and Fox Indian claims agreement (PL 94-189).
16. Grand River Band of Ottawa Indians (PL 94-540).
17. Confederated Tribes and Bands of the Yakima Indian Nation or the Apache Tribe of the Mescalero Reservation (PL 95-433).
18. Indian Child Welfare Act of 1978 (PL 95-608).
19. Delaware Tribe of Indians and the Delaware Tribe of Western Oklahoma (PL 96-318).
20. Passamaquoddy Tribe, Penobscot Nation, and Houlton Band of Maliseet Indians under the Maine Indian Claims Settlement Act of 1980 (PL 96-420).
21. Wyandot Tribe of Indians of Oklahoma (97-371).
22. Absentee Shawnee Tribe of Oklahoma, Eastern Shawnee Tribe of Oklahoma, and Cherokee Band of Shawnee descendants (PL 97-372).
23. Miami Tribe of Oklahoma and Miami Indians of Indiana (PL 97-376).
24. Clallam Tribe of Indians, including Port Gamble Indian Community, Lower Elwha Tribal Community, and Jamestown Band of Clallam Indians, of Washington (PL 97-402).
25. Turtle Mountain Band of Chippewas of Arizona (PL 97-403).
26. Blackfeet, Gros Ventre Tribes, and Assiniboine Tribes of Montana (PL 97-408).
27. Papago Tribe of Arizona (PL 97-408).
28. Red Lake Band of Chippewas (PL 98-123).
29. Assiniboine Tribes of Fort Belknap Indian Community and Fort Peck Indian Reservation of Montana (PL 98-124).
30. Chippewas of Lake Superior including the Bad River Band, Lac du Flambeau Reservation, Lac Courte Oreilles Band, Sokaogon Chippewa Community, Red Cliff Reservation, and St. Croix Reservation of Wisconsin; disregard any per capita payment issued under this judgement in its entirety (PL 99-146).
31. Keweenaw Bay Indian Community of Michigan (PL 99-146).
32. Fond du Lac, Grand Portage, Nett Lake, and White Earth Reservations of Minnesota (PL 99-146).
33. White Earth Band of Chippewas in Minnesota (PL 99-264).
34. Saginaw Chippewa Indian Tribe of Michigan (PL 99-346).
35. Chippewas of the Mississippi including Mille Lac, White Earth, and Leech Lake of Minnesota (PL 99-377).
36. Band of Potawatomi, including Hannahville Indian Community and Forest County Potawatomi, of Wisconsin; if issued as a per capita payment, disregard the first \$2,000 of each payment made from this judgement (PL 100-581).
37. Puyallup Tribes under the Puyallup Tribe of Indians Settlement Act of 1989 (PL 101-41).
38. Seneca Nation of New York under the Seneca Nation Settlement Act of 1990 (PL 101-503).
39. Catawba Indian Tribe of South Carolina (PL 103-116).
40. Confederated Tribes of the Colville Reservation (PL 103-436).

Exclude as income any lump sum or periodic payments received under the Cobell v. Salazar Class Action Trust Case during the one-year period beginning on the date of receipt (PL 111-291).

Disregard up to \$2,000 per calendar year held by an individual Native American which is derived from restricted land or land held in trust by the Department of Interior, Bureau of Indian Affairs (PL 103-66, 92-203, and 100-241).

Disregard the first \$2,000 of individual shares for the following:

1. Confederated Tribes of the Warm Springs Reservation (PL 97-436).
2. Old Age Assistance Claims Settlement Act (PL 98-500).
3. Seminole Nation of Oklahoma (PL 101-277).
4. Seminole Tribe, Miccosukee Tribe of Indians, and the independent Seminole Indians of Florida (PL 101-277).
5. Rincon Band of Mission Indians (Docket 80-A).
6. Walker Paiute Tribe (Docket 87-A).
7. Ak-Chin, Salt River Pima-Maricopa, and Gila River Pima-Maricopa Indian Communities (Docket 228).
8. Maricopa Ak-Chin Indian Community (Docket 235).
9. Peoria Tribe of Oklahoma (Dockets 313, 314-A, and 314-B).
10. Yankton Sioux Tribe (Dockets 342-70 and 343-70).
11. Wichita and Affiliated Tribe (Keechi, Waco & Tawakonie) of Oklahoma (Dockets 371 and 372).

Child Nutrition Act of 1966 and the National School Lunch Act

Disregard the value of assistance received from programs under the Child Nutrition Act of 1966 and the National School Lunch Act. These are:

1. Special Milk Program.
2. School Breakfast Program.
3. Special Supplemental Food Program for Women, Infants and Children (WIC).
4. School Lunch Program.
5. Summer Food Service Program for Children.
6. Commodity Supplemental Food Program.
7. Child and Adult Care Food Program.

Disaster and Emergency Assistance Payments

1. Disregard major disaster and emergency assistance payments made by federal, state, county, and local agencies, and other disaster assistance organizations, including National Flood Insurance Program (NFIP).
2. Disregard Emergency Assistance or emergency General Assistance when either is given to a migrant or seasonal farm worker food unit if:
 - a. The payment is provided to a third party (vendored) on behalf of the migrant or seasonal farm worker; and,

- b. The food unit was in the job stream when (for example, working) it was provided.
3. Disregard disaster unemployment benefits to any individual who is unemployed as a result of a major disaster. Individuals cannot be eligible for any other unemployment compensation and also receive disaster unemployment benefits. Payments are limited to 26 weeks.

COVID-19 Pandemic Assistance: Refer to [Process Help COVID-19 Main Page](#) for specific policies and process related to COVID-19 pandemic income.

Veterans Benefits

Exclude VA aid and attendance and homebound allowances if:

- 1. The payment is for a past or future expense.
- 2. The payment is not in excess of the actual expense.
- 3. The payment is not for a normal household living expense.
- 4. The payment is used for the intended purpose.

Disregard aid and attendance and housebound allowances received by veterans, spouses of disabled veterans, and surviving spouses.

GI Bill

All military personnel fund the GI Bill through mandatory payroll deductions in their first year of service. Disregard these deductions when counting income.

Example 2	During Joe’s first year of military service, his gross pay is \$1,000 per month. One hundred dollars is deducted from his paycheck each month for the GI Bill. The IM worker disregards the \$100 deduction and budgets his pay as \$900 per month.
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Combat Pay

IM workers are required to determine if a military allotment made available to a food unit by an absent member deployed to a combat zone should be excluded when determining eligibility. Disregard any amount of combat zone pay that goes to the food unit that is in excess of the military person's pre-deployment pay. The exclusion lasts while the military person is deployed to the combat area.

If the amount of military pay from the deployed absent family member is equal to or less than the amount the food unit was receiving prior to deployment, all of the allotment would be counted as income to the food unit. Any portion of the military pay that exceeds the amount the food unit was receiving prior to deployment to a designated combat zone should be excluded when determining the food unit's income for FoodShare purposes.

Follow these steps in determining how to budget combat zone pay:

1. Ask if the service member is deployed to a combat zone.
2. If the answer is no, verify military pay using a bank record or Leave and Earnings Statements (LES) and clearly document in case comments how income to the food unit was determined and verified.
3. If the answer is yes, verify the service member's pay before deployment to a combat zone and the amount they receive due to being assigned to a combat zone. Leave and Earnings Statements (LES) or bank records can be used to verify this amount.
4. Any portion that is more than the amount the food unit was receiving immediately before deployment to a combat zone is exempt as combat pay.
5. Clearly document in case comments the combat pay source of verification and method used to determine amount to be disregarded and budgeted.

Deployment to a combat zone can be established through a variety of methods including:

1. The dployed person's military pay record, the Leave and Earnings statement (LES).
2. Order issued to the military person in which the place of deployment is public record.
3. Contcting the Call Center which has a listing of designated combat zones, as well as a listing of pay items which may or may not be the result of deployment to a designated combat zone

<p>Example 3</p>	<p>John, his wife Bonnie and their daughter have an open FoodShare case. John is in the military stationed overseas, his monthly income is \$1,000. John sends his wife \$1,000 every month.</p> <p>When John is deployed to a combat zone his pay is increased to \$1,300 a month, which is deposited into a joint account. Because the \$300 is combat pay, it is exempt income and not counted in the determination. The pre-combat pay of \$1,000 is budgeted as unearned income for FoodShare.</p>
<p>Example 4</p>	<p>Dori is in the military and receives \$1,000 per month in wages. Dori's husband Louie and their son Joe have an open FoodShare case. Dori has her military pay directly deposited into a bank account in her name only; Louie has no access to the funds or to the account. Do not count any of Dori's income in the eligibility determination for Louie and Joe.</p>
<p>Example 5</p>	<p>Ben is in the military. His paycheck is \$1,000 a month. He has \$500 directly deposited into his account and \$500 directly deposited into a joint account with his wife, Andrea. The \$500 directly</p>

	deposited into the joint account is budgeted as unearned income in Andrea's FoodShare determination. Since Andrea does not have access to Ben's account, only the amount deposited in their joint account is counted.
Example 6	Tim is in the military making \$1,200 a month. An allotment check of \$1,000 is paid directly to his wife Karla, and \$200 to himself. \$1,000 is budgeted as Karla's unearned income for her FoodShare determination.

Dottie Moore

Disregard as income any penalty payment paid as a result of the Dottie Moore lawsuit by DHS (formerly DHSS) to any Aid to Families with Dependent Children (AFDC) applicant or member. These \$50 to \$200 penalty payments have been ordered by the U.S. District Court for the Eastern District of Wisconsin in Civil Action No. 80-C-118.

Income Tax Refunds, Credits, and Rebates

Disregard income tax refunds, credits, and rebates as income.

Victims of Nazi Persecution

Disregard as income payments under PL 103-286 to victims of Nazi persecution.

Payments to Crime Victims

Disregard any payments received from a state established fund to aid victims of a crime.

Agent Orange Settlement Fund

Disregard payments received from the Agent Orange Settlement Fund or any other fund established in settling "In Re Agent Orange Product Liability Settlement Fund litigation M.D.L. No. 381 (E.D.N.Y.)." Continue to disregard the payments for as long as they are identified separately. Apply this disregard retroactively to 1-1-89.

Wartime Relocation of Civilians

Disregard payments under PL 100-383 to U.S. citizens of Japanese ancestry and permanent resident Japanese immigrants or their survivors and Aleut residents of the Pribilof Islands and the Aleutian Islands West of Unimak Island.

Radiation Exposure Act

Disregard payments from any program under the Radiation Exposure Compensation Act (PL 101-426) paid to compensate injury or death resulting from exposure to radiation from nuclear testing (\$50,000) and uranium mining (\$100,000). Apply this

disregard retroactively to 10-15-1990. When the affected person is deceased, payments are made to the surviving spouse, children, parents, or grandparents of the deceased. The federal DOJ makes the payments. Continue to disregard the payments for as long as they are identified separately. Apply this disregard retroactively to 10-15-90.

Children of Vietnam Veterans Who Are Born With Spina Bifida

Disregard payments received under the provision of the Benefits for Children of Vietnam Veterans Who Are Born With Spina Bifida (PL 104-204). These payments are made to any child of a Vietnam veteran for any disability he or she experiences resulting from the spina bifida. Apply this disregard retroactively to 9-26-96. Continue this disregard as long as payments are identified separately.

Uniform Relocation Assistance and Real Property Acquisition Policy Act of 1970

Disregard reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policy Act of 1970 (PL 91-646, Section 216).

Capital Gains

Disregard capital gains from the sale of a personal asset as income. Profits gained from the sale of an asset continue to be counted as an asset. (See 4.3.3.3 for policy related to self-employment).

Reverse Mortgage

Disregard reverse mortgage payments made to homeowners. Reverse mortgage payments are loans against the borrower's home and are considered an asset these payments are not considered income.

Payments to Filipino World War II Veterans

Disregard payments from the Filipino Veterans Equity Compensation Fund. The American Recovery and Reinvestment Act (ARRA) of 2009 created the fund 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. The compensation fund offers one time payments that may be up to \$15,000 to eligible persons.

~~Unemployment Insurance (Unemployment Compensation, or UC) Stimulus Payment~~

~~Effective 11-06-09~~

~~The \$25 supplemental weekly Unemployment Compensation (UC) payment (stimulus payment) authorized by the American Recovery and Reinvestment Act of 2009 (ARRA) for FoodShare.~~

Living Independently through Financial Empowerment (LIFE)

The LIFE program provides short-term, monthly cash payments to families, including tribal members, experiencing crises resulting from a domestic violence situation. LIFE payments are designed to meet urgent financial needs such as but not limited to housing, utility payments, and groceries. The LIFE program is only available for a limited time until August 31, 2022. Approved applicants receive \$3,500 over three consecutive months: \$1,500 in month one, \$1,000 in month two, and \$1,000 in month three.

4.4.1 Assets

Non-EBD Households

Assets are not included as part of the FoodShare eligibility determination and are not required to be verified since all FoodShare applicants and members are authorized to receive a TANF-funded service. Most FoodShare applicants and members are broad-based categorically eligible for FoodShare and are not subject to an asset test ([4.2.1](#)). The amount of available liquid assets must be reported at the point of initial application to determine eligibility for priority service and expedited issuance.

EBD Households

Elderly, Blind, or Disabled (EBD) Food Units (food units with at least one member who is elderly, blind, or disabled) with total gross income over 200% of the FPL must be tested for FoodShare using the regular Supplemental Nutrition Assistance Program (SNAP) rules. Under the regular SNAP rules, these food units have no gross income limit, but must have net income that does not exceed 100% FPL and countable assets that do not exceed the asset limit of \$3,500750.

7.1.1 Allotments

Determine FoodShare benefit allotment amounts using the information provided in Chapters 1-6.

FoodShare allotments belong to the assistance group to which they were issued. Benefits cannot be transferred to other cases or EBT accounts. As long as there is one adult food unit member (or emancipated minor) in the assistance group, the adult retains control of the EBT card. In instances where the household splits and some of the individuals for which benefits were issued move into another household, the assistance group retains control of the EBT card.

Example 1	<u>John and Beth are married with two children; Will and Kelly. They receive FoodShare as a family until John dies. Kelly is John's child from a previous relationship and after John's death Kelly goes to live full time with her biological mother who then applies for FoodShare. She knows Kelly was issued benefits from previous months and through conversations with Beth, she also knows there are still benefits in Beth's EBT account from those past months. She asks the agency to give her access to those remaining benefits since some of them were issued for Kelly. The agency denies this request since it is up to Beth to decide if any more food will be purchased for Kelly. Since the benefits were issued to Beth and John, the benefits are only available to be used by Beth.</u>
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7.3.1 Benefit Overpayment

7.3.1.9 Overpayment Due to Client and Non-Client Error

Federal regulations require that corrective action must be taken to establish a claim for any error discovered through a Quality Control (QC) review, regardless of the size of the error. Failure to take timely corrective action may result in liquidated damages against the agency in the amount of \$250 or more.

A client error occurs when the food unit unintentionally:

- Failed to provide correct or complete information,
- Failed to report a change that was required to be reported, or
- Received FoodShare for which it was not entitled pending a fair hearing decision.

A non-client error occurs when the state or local agency:

- Takes an incorrect action on a FoodShare case,
- Does not take prompt action on a change the food unit reported,
- Fails to correct an action,
- Incorrectly enters information or fails to include information that results in expedited eligibility,
- Misapplies policy, or
- System programming error, such as failure to include W-2 or SSI benefit increase.

Do not establish a claim if:

- An overpayment occurs because the agency did not ensure that a food unit signed the application form.
- Appropriate notice of a renewal or SMRF requirement was not sent due to an incorrect certification period in CARES.
- Expedited issuance resulting from a non-client error: Expedited issuance is based on best available information at the time of the eligibility determination and the FoodShare would only pend for identity.
- Benefits are issued solely because the 10-day negative notice requirement cannot be or has not been met.
- The claim is a client or agency error, and the total overpayment claim is less than \$500. A claim that is less than \$500 should only be established in the following circumstances:
 - FoodShare overpayments discovered through a State Quality Control (QC) review, regardless of the total over-payment amount
 - FoodShare overpayments related to a member receiving duplicate benefits
 - FoodShare IPV claims

Example 4	Mary's W-2 payment ended and she became eligible for TFS. CARES incorrectly set a 12 month certification period instead of a five month certification period. Because Mary did not receive a timely notice that her TFS benefits were ending after the fifth month, she would not be responsible for paying back any benefits that were issued incorrectly after the fifth month.
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Do not establish a claim if Social Security, SSI, or Wisconsin Unemployment updates from data exchange are incorrect. These updates cannot be recovered or found in error because the information comes from a trusted third party source.

Expedited Issuance

In general, expedited FoodShare is issued on the best information available and not recoverable. There are certain situations where expedited benefits can be recovered. In instances where an individual would not be eligible for expedited issuance and the agency either incorrectly entered information or failed to include known information (data exchange information, for example), resulting in expedited eligibility, the agency can recover. If the agency establishes an intentional program violation (IPV), the agency can recover benefits. For client errors, do not pursue recovery of expedited benefits since the issuance is based on best available information and the application can only pend for identity prior to the expedited determination.

7.3.2 Calculating Overpayment Claim Amounts

7.3.2.1 Client and Non-Client Error

When calculating the overpayment, consider the food unit's reporting requirements. Do not use income or expenses, or changes in income and expenses that were not reported and were not required to be reported. Calculating an overpayment claim means determining the correct amount of benefits for each month in which a household received an overpayment. The correct amount of benefits is the amount the household would have received had the information used in the eligibility determination been accurate at the time of the determination.

Use converted prospective income to determine ongoing benefit eligibility for the overpayment calculation. Do not use actual income to calculate the claim, even if all information is received for the entire overpayment claim period. Only use the income and expenses reported or required to be reported for each month of the overpayment period. In claim calculations, disregard income that was not previously reported and was not required to be reported.

When a food unit member should have been ineligible, their income and expenses should be deemed following the appropriate deeming standard. The ineligible individual should not be counted as part of the assistance group in calculating the overpayment claim. See 4.7.5 Prorated Deeming and 4.7.6 Gross Deeming.

The "Date of Discovery"

The date of discovery is the date you become aware of the potential IM worker establishes the overpayment claim. This is the date that a claim is created, and a notice is triggered to be sent to the liable individuals. This date is used to establish the look back period.

Look-back Period

The look-back period is the period of time during which the overpayment occurred.

Overpayment Period

The overpayment period begins with the date of discovery and extends back up to one year (12 months) for non-client errors and ~~up to six years (72 months) for~~ client errors. ~~This look-back period is the period of time during which~~ For duplicate participation, trafficking, and IPV claims, the overpayment may have occurred period begins with the date of discovery and extends back up to six years (72 months).

~~From this point forward the term "Date of Discovery" will be synonymous with the "Date of Awareness." "Date of Discovery" will be used on all future correspondence. The intent of the policy is that both terms are part of a process to define the overpayment~~

~~period. The overpayment period consists of the number of months during which there were overpayments within the look back period. The overpayment period begins with the first month had the change been reported timely and acted on timely. It would have been effective up to the month prior to when the case was corrected.~~

Example	<u>During their March renewal for FoodShare ending March 31, wage matches are found that were not reported when required when they started their job in January of the previous year. Since January of the previous year is more than 12 months prior and the failure to report is a client error, the look back period is limited to 12 months. The earliest recoverable overpayment month is March of the previous year.</u>
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The date the claim is mailed or otherwise delivered to the food unit is considered the date of establishment of the claim for tracking purposes, including establishing delinquency for the purposes of tax intercept. If the claim or claim amount was not established at a fair hearing, a notice of adverse action must be provided. The notice of adverse action can be included with the claim notice or mailed separately. Overpayment claim notices must be sent to the last-known address. If a fair hearing official determines that a claim does exist against the food unit, the food unit must be re-notified of the claim.

Current verification requirements still apply. When all attempts to obtain the verification are unsuccessful the worker must use the best available information to determine the monthly income amount for purposes of the overpayment calculation. The food unit has primary responsibility for providing documentary evidence to support statements in the case record and to resolve any questionable information. The worker must assist the household in obtaining this verification provided the food unit is cooperating with the agency. When the food unit fails or refuses to provide income information needed to calculate the claim and no other information is available, the claim should be calculated as if the food unit ~~was~~ were completely ineligible. This process is consistent with eligibility determinations at application, six month report and renewal, where if the applicant member fails to provide mandatory verifications, the food unit is ineligible to receive FoodShare benefits (See 1.2.6.1 Required Verification to Determine Eligibility). The overpayment is to be established using certification rules. If the relevant information is later provided by the food unit, the claim should be recalculated with the new information factored into calculating the monthly eligibility and benefit amount that should have been received.

The food unit must be given a reasonable opportunity to provide verification of income, and the agency may contact the employer directly for verification. It is not necessary to contact the food unit prior to contacting the employer; both contacts can be completed at the same time. Members should be provided 30 days to provide verification, unless it is determined that additional time is necessary in order to collect and submit the verification requested. If more than 30 days are allowed for provision of verification by the member, document the number of days allowed and the reason. Employers should be provided 10 days to provide verification. When no other form of verification is available, then SWICA information is considered the best available information and should be used to calculate an overpayment.

Document clearly in case comments the unsuccessful requests for verification from the household and the employer, and the reason for using a SWICA match as the best available verification of monthly income. Also clearly document how the income amount was calculated from the SWICA match.

If while calculating an overpayment claim, it is found that there was an underissuance that was a result of agency error and the underissuance is within the last 12 months, the amount of the underissuance must be offset against the total claim amount (if a claim is established) or a supplemental issuance should occur if there is no overpayment claim established.

7 CFR 273.18(d)(1)

~~In order to~~ To meet the established timeliness requirements, overpayment claims must be completed ~~before the last day~~ within 120 days of the ~~quarter following the quarter in which the IM discovered an overpayment. This holds true for both client and non-client errors. Overpayment claims must be established and recovered even if they are not calculated within this timeframe. Overpayment claims must be established and recovered even if they are calculated late; failing to complete a claim within the given timeframe does not void the overpayment~~ date of discovery.

Client Error

A client error occurs when the food unit unintentionally does one of the following:

- ~~Failed~~ Fails to provide correct or complete information;
- ~~Failed~~ Fails to report a change that was required to be reported; ~~or~~
- ~~Received~~ Receives FoodShare for which it was not entitled pending a fair hearing decision;

The look back period for client errors begins with the date of discovery ~~(the day the IM worker discovered the potential that an overpayment may exist)~~ and extends backward to the most recent of either of the following:

- ~~1. Six years, or~~
- To the Twelve months or 72 months for duplicate participation, trafficking, and IPV claims
- The month the change would have been effective had the food unit timely reported it, whichever is most recent.

The overpayment period begins with the first month eligibility would have been impacted or changed had the change been reported timely, and would have been effective up to the month prior to when the case ~~was~~ and benefits were corrected.

~~It is essential that the date of discovery be documented in case comments. This date locks in the look back and overpayment period. This date will not change even if the overpayment is calculated untimely.~~

The month the change would have been effective cannot be more than two months after the change in circumstance actually occurred.

When determining if an overpayment occurred due to an unreported increase in total gross monthly income, compare the total actual unconverted income amount to the income reporting limit for the FoodShare assistance group size to determine if the income should have been reported.

In overpayment calculations, do not apply the 20% earned income disregard to earned income that was required to be reported but was not reported timely. Disregard income that was not previously reported and was not required to be reported due to reduced reporting requirements. If expenses were reported correctly at the time of the overpayment, use those same expenses when calculating the overpayment. If expenses were incorrectly reported, and subsequently verified (examples: the expense was considered questionable and the IM worker requested and received verifications, or the expense was verified through a QC review or a WHEAP data exchange, etc.) use the verified amount in the overpayment calculation. If the IM worker knows the expense is incorrect and verification was requested but was not received, do not allow the expense in the overpayment calculation.

~~Earned~~All income needs to be verified when determining income to be used in an overpayment calculation.

For Earned Income, verification may include:

- Dated check stubs of income that should have been reported that caused the overpayment.
- Earnings reports, a statement from the employer, or ~~ECF~~EVE forms, signed by the employer, with all needed information

Note:

~~IEVS~~Income Eligibility Verification System (IEVS) may indicate that income was earned from an employer sometime during three months of the work quarter. Do not use IEVS in calculations and overpayments. unless no other information is received verifying the earned income and best information available must be used.

Non-Client Error

A non-client error occurs when the state or local agency does any of the following:

- Takes an incorrect action on a FoodShare case;
- Does not take prompt action on a change the food unit reported,
- Fails to correct an action;
- Incorrectly enters information or fails to include information that results in expedited eligibility;
- Misapplies policy; ~~or~~
- System programming error, such as failure to include W-2 or SSI benefit increase.

The look back period for non-client errors begins with the date of discovery ~~(the day the IM discovered the potential that an overpayment may exist)~~ and extends backward to the most recent of either:

- Twelve months, ~~or~~
- To the month the error was effective had the change been acted on timely; ~~whichever is most recent.~~

~~The overpayment period begins with the first month the change would have been effective up to the month prior to when the case was corrected.~~

~~It is essential that the date of discovery be documented in case comments. This date locks in the look back and overpayment period. This date will not change even if calculated untimely.~~

<p>Example 1</p>	<p>At Jeff's renewal on June 5, 2019, he reported <u>verified</u> income of \$800 per month. His IM worker miscalculated Jeff's income and budgeted \$400 per month instead of the \$800 per month that Jeff reported <u>verified</u>. When Jeff submits his SMRF on December 5, 2019, the IM worker discovers her error and corrects the case effective January 1, 2020. <u>The IM worker determined an overpayment of more than \$500 exists and process the overpayment that same day.</u></p> <p>To calculate the overpayment, the IM worker budgets the correct income amount of \$800 from the job Jeff reported <u>verified</u>.</p> <ul style="list-style-type: none"> • The date of discovery is December 5th, 2019. • The look back period is June 2019 through December 2019 (non-client error). • Had the June 2019 change been acted on accurately the change would have been effective July 1, 2019, therefore the overpayment period is July 1, 2019 through December 31, 2019.
<p>Example 2</p>	<p>Matt submitted a complete SMRF on August 4, 2019. On August 8, 2019, Matt's IM worker discovers that Matt started a job on April 5, 2019 and Matt received income in April that exceeded 130% of the FPL threshold. <u>(the income is over 200% FPL).</u> The new income should have been reported by the 10th of May. The IM worker corrects the case and closes it effective August 31, 2019.</p> <ul style="list-style-type: none"> • The date of discovery is August 8, 2019. • Had the April 2019 income change been reported timely, the case would have closed as of May 31, 2019. Therefore, the overpayment period is June 1, 2019 through August 31, 2019. Section 6.1.1 Change Reporting for All Food Units (Simplified) applies, and the change must be reported by the 10th of the month following the month in which the total income exceeded 130% of the FPL.

7.3.2.2 Collecting Client and Non-Client Error Claims Against Participating Food Units

Establish collection of overpayment claims against participating food units unless one of the following is true:

- The claim is collected through an offset, ~~or~~
- Claims are protected by the Federal Bankruptcy Code

Do not charge any interest on the claim.

If the member wishes to pay the whole claim at once, ~~he or she~~they may do so.

A participating food unit is one that is still open and receiving FoodShare benefits.

7.3.2.3 Reserved

~~7.3.2.3 Collecting Claims for Client & Non-Client Errors Against Non-Participating Food Units~~

~~7 CFR 273.18(e)~~

~~Establish overpayment claims for non-participating food units only if the amount of the claim is \$125 or more.~~

~~A non-participating food unit is one that is closed and not receiving FoodShare benefits.~~