

## QUALITY CONTROL REVIEW SCHEDULE

Public reporting burden for this collection of information is estimated to average 1.056 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.** Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Services, Office of Policy Support, Room 1014, Alexandria, VA 22032 ATTN: PRA (0584-0299). Do not return the completed form to this address. **PRIVACY ACT NOTICE:** This report is required under provisions of 7 CFR 275.24 (SNAP). This information is needed for the review of State performance in determining recipient eligibility.. The information is used to determine State compliance, and failure to report may result in a finding of non-compliance.

### Section 1 - Review Summary

1. QC Review Number <input style="width: 100%; height: 20px;" type="text"/>	2. Case Number <input style="width: 100%; height: 20px;" type="text"/>	3. State <input style="width: 100%; height: 20px;" type="text"/>	4. Local Agency <input style="width: 100%; height: 20px;" type="text"/>	5. Sample Month and Year <input style="width: 100%; height: 20px;" type="text"/>	6. Stratum <input style="width: 100%; height: 20px;" type="text"/>
7. Disposition <input style="width: 100%; height: 20px;" type="text"/>	8. Findings <input style="width: 100%; height: 20px;" type="text"/>	9. SNAP Allotment Under Review <input style="width: 100%; height: 20px;" type="text"/>	10. Error Amount <input style="width: 100%; height: 20px;" type="text"/>	11. Case Classification <input style="width: 100%; height: 20px;" type="text"/>	

### Section 2 - Detailed Error Findings

12. Element	13. Nature	14. Cause	15. Error Finding	16. Error Amount	17. Discovery	18. Verified	19. Occurrence a. Date	b. Time Period
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## Section 3 - Household Characteristics

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

21. Type of Action

22. Length of Cert. Period  
#of months

23. Allotment Adjustment

24. Amount of  
Allotment Adjustment

25. Number of  
Household Members

26. Receipt of  
Expedited Service

27. Authorized Representative  
Used at Application

28. Categorical Eligibility

29. Reporting Requirement

### Resources:

30. Liquid

31. Property  
(excluding home)

32a. Vehicle

32b. Status  
2nd Vehicle

33. Countable  
Vehicle Assets

34. Other Non-liquid

### Income:

35. Gross

36. Net

### Deductions:

37. Earned Income

38. Medical

39. Dependent Care

40. Child Support

41. Shelter

42. Homeless

Additional  
Information on  
Shelter Costs:

43. Rent/Mortgage

44. Use of SUA  
a. Usage      b. Proration



45. Utilities (SUA or Actual)

### Section 4 - Information on Each Household Member

46. Person Number	47. SNAP Participation	48. Relation to Head of HH	49. Age	50. Sex	51. Race	52. Citizen Status	53. Edu. Level	54. Employment Status	54. Employment Hours	55. SNAP Work Reg.	56. SNAP E & T	57. ABAWD Status	58. Dependent Care Cost
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You may record information on up to 16 individuals using additional pages.



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

## GENERAL INFORMATION

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

The schedule consists of seven sections:

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

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

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

1	0	0	3	2	0	0	3
---	---	---	---	---	---	---	---

The October sample month would be coded:

1	0	2	0	0	3
---	---	---	---	---	---

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

0	1	6	5
---	---	---	---

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

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

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

9	9	9	9
---	---	---	---

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

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

**Local Agency Code** - This code is used to group data by county or county equivalent or smaller areas. The system requires a three-digit code.

The State may use Federal Information Processing Standards (FIPS) codes or use an alternative method to designate local agency. Once a State has selected a method, submit to the FNS regional office a listing of the local agencies and corresponding codes.

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

## QUALITY CONTROL REVIEW SCHEDULE

### SECTION 1 - REVIEW SUMMARY

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

- 1. QC Review Number** - Enter the number assigned to the Quality Control review.
- 2. Case Number** - Enter the number assigned by the local agency to the household that was certified and has been reviewed.
- 3. State code** - Enter the two digit State code from the following list of codes of National Institute of Standards and Technology.

## State Codes - National Institute of Standards and Technology

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

4. **Local Agency Code** - Enter the three-digit code designating the local agency for this case.
5. **Sample Month and Year** - Enter the month and year for which the case eligibility and benefit level were reviewed.
6. **Stratum** - Enter the two-digit stratum codes if sampling is stratified. If not stratified enter a State optional code or leave blank.

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

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

If codes 2, 3, or 4 are used, no further entries are required on the remainder of the review schedule **except** item 68, reserved code for Timeliness of Application Processing (Expedited and 30 Day Requirement).

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

- 1 - Amount correct
- 2 - Overissuance
- 3 - Underissuance
- 4 - Ineligible

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

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

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

- For overissuance or underissuance errors, enter the actual error amount whether or not it exceeds \$50.00.
- For ineligible errors, enter the full amount of the error.

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

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

## SECTION 2 - DETAILED ERROR FINDINGS

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

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

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

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

These nature codes may be used in any element:

Nature code (97) - Not required to be reported or acted upon based on timeframes and reporting requirements for allotment differences below the \$50 threshold.

Nature code (98) - Transcription or computation errors.

Nature code (99) - Other. Use this nature code in the following situations:

- a) If no specific nature code is listed under an element,
- b) If the nature of the error is clearly understood by looking at the agency/client code recorded for the error, or
- c) If none of the listed nature codes under an element apply to the error being recorded.

## BASIC PROGRAM REQUIREMENTS - (100)

### ➤ **Element 111 - Student Status**

Nature codes:

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

### ➤ **Element 130 - Citizenship and Non-Citizen Status**

Nature codes:

#### Citizens

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

#### Non-Citizens

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

### ➤ **Element 140 - Residency**

Nature codes:

- 99 - Other

### ➤ **Element 150 - Household Composition**

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

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

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

Nature codes:

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

➤ **Element 151 - Recipient Disqualification**

Nature codes:

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

➤ **Element 160 - Employment & Training Programs**

Nature codes:

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

➤ **Element 161 - Time-limited Participation**

Nature codes:

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

➤ **Element 162 - Work Registration Requirements**

Nature codes:

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

➤ **Element 163 - Voluntary Quit/Reduced Work Effort**

Nature codes:

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

➤ **Element 164 - Workfare and Comparable Workfare**

Nature codes:

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

➤ **Element 165 - Employment Status/Job Availability**

Nature codes:

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

➤ **Element 166 - Acceptance of Employment**

Nature codes:

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

➤ **Element 170 - Social Security Number**

Nature codes:

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

### **Liquid Resources**

#### ➤ **Element 211 - Bank Accounts or Cash on Hand**

Nature codes:

24 - Resource should have been excluded

30 - Resource should have been included

#### ➤ **Element 212 - Nonrecurring Lump-sum Payment**

Nature codes:

24 - Resource should have been excluded

30 - Resource should have been included

#### ➤ **Element 213 - Other Liquid Assets**

Nature codes:

24 - Resource should have been excluded

30 - Resource should have been included

### **Non-Liquid Resources**

#### ➤ **Element 221 - Real Property**

Nature codes:

24 - Resource should have been excluded

30 - Resource should have been included

➤ **Element 222 - Vehicles**

Nature codes:

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

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

Nature codes:

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

➤ **Element 225 - Combined Resources**

Nature codes:

- 20 - Incorrect resource limit applied
- 29 - Exceeds prescribed limit

**INCOME (300)**

**Earned Income**

➤ **Element 311 - Wages and Salaries**

Nature codes:

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

## ➤ **Element 312 - Self-Employment**

Nature codes:

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

## ➤ **Element 314 - Other Earned Income**

Nature codes:

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

## **Deductions**

### ➤ **Element 321 - Earned Income Deductions**

Nature codes:

- 52 - Deduction that should have been included was not
- 53 - Deduction included that should not have been

## ➤ **Element 323 - Dependent Care Deduction**

Nature codes:

- 52 - Deduction that should have been included was not
- 53 - Deduction included that should not have been

## Unearned Income

### ➤ **Element 331 - RSDI Benefits**

Nature codes:

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

### ➤ **Element 332 - Veterans Benefits**

Nature codes:

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

### ➤ **Element 333 - SSI and/or State SSI Supplement**

Nature codes:

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

## ➤ **Element 334 - Unemployment Compensation**

Nature codes:

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

## ➤ **Element 335 - Worker's Compensation**

Nature codes:

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

## ➤ **Element 336 - Other Government Benefits**

Nature codes:

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

## ➤ **Element 342 - Contributions**

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

Nature codes:

- 35 - Unreported source of income
- 37 - All income from source was known but not included
- 38 - More income received from this source than budgeted

- 44 - Less income received from this source than budgeted
- 124 - Variance resulting from use of automatic Federal information exchange system

➤ **Element 343 - Deemed Income**

Nature codes:

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

➤ **Element 344 - TANF, PA, or GA**

Nature codes:

- 35 - Unreported source of income
- 37 - All income from source was known but not included
- 38 - More income received from this source than budgeted
- 44 - Less income received from this source than budgeted
- 120 - Variance/errors resulting from noncompliance with this means-tested public assistance program
- 124 - Variance resulting from use of automatic Federal information exchange system

➤ **Element 345 - Educational Grants/Scholarships/Loans**

Nature codes:

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

➤ **Element 346 - Other Unearned Income**

Nature codes:

- 35 - Unreported source of income
- 37 - All income from source was known but not included
- 38 - More income received from this source than budgeted
- 44 - Less income received from this source than budgeted
- 120 - Variance/errors resulting from noncompliance with this means-tested public assistance program
- 124 - Variance resulting from use of automatic Federal information exchange system

➤ **Element 350 - Child Support Payments Received from Absent Parent**

Nature codes:

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

➤ **Element 361 - Standard Deduction**

Nature codes:

- 52 - Deduction that should have been included was not
- 53 - Deduction included that should not have been
- 65 - Incorrect standard used resulting from a change in household size

### ➤ **Element 363 - Shelter Deduction**

Nature codes:

- 52 - Deduction that should have been included was not
- 53 - Deduction included that should not have been
- 64 - Incorrect amount used resulting from a change in residence
- 123 - Incorrectly prorated

### ➤ **Element 364 - Standard Utility Allowance**

Nature codes:

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

### ➤ **Element 365 - Medical Deductions**

Nature codes:

- 52 - Deduction that should have been included was not
- 53 - Deduction included that should not have been

### ➤ **Element 366 - Child Support Payment Deduction**

Nature codes:

- 52 - Deduction that should have been included was not
- 53 - Deduction included that should not have been

### ➤ **Element 371 - Combined Gross Income**

Nature codes:

- 28 - Incorrect income limit applied
- 29 - Exceeds prescribed limit

➤ **Element 372 - Combined Net Income**

Nature codes:

- 28 - Incorrect income limit applied
- 29 - Exceeds prescribed limit

**OTHER - (500 and 800)**

➤ **Element 520 - Arithmetic Computation**

Nature codes:

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

➤ **Element 530 - Transitional Benefits**

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

➤ **Element 560 - Reporting Systems**

**Note:** This element should be used to record errors resulting from the household being certified under an incorrect reporting system given the household's characteristics and the State agency's chosen options. Possible Reporting Systems include: Monthly Reporting, Quarterly Reporting, Semi-Annual Limited Reporting, Change Reporting, Status Reporting, 5 Hour Reporting and no reporting (transitional benefits).

Nature codes:

- 301 - Household improperly participating under retrospective budgeting
- 302 - Household improperly participating under prospective budgeting
- 303 - Household improperly participating under monthly reporting
- 304 - Household improperly participating under quarterly reporting
- 305 - Household improperly participating under semi-annual reporting
- 306 - Household improperly participating under change reporting

- 307 - Household improperly participating under status reporting
- 308 - Household improperly participating under 5 hour reporting
- 309 - Household improperly participating in transitional benefits

➤ **Element 810 - SNAP Simplification Project**

Nature codes:

- 98 - Transcription or computation errors
- 99 - Other

➤ **Element 820 - Demonstration Projects**

Nature codes:

- 98 - Transcription or computation errors
- 99 - Other

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

- 1 - Information not reported. (Client failed to report information or changes that are required to be reported. Use this code only if the State could not know this information from another source or could not have anticipated the change.)
- 2 - Incomplete or incorrect information provided. (Client provided information that is incorrect or incomplete and the agency was not required to verify.)
- 3 - Information withheld by client. (Case being referred for IPV investigation.)
- 4 - Incorrect information provided by client. (Case being referred for IPV investigation.)
- 7 - Information reported by a collateral contact inaccurate. (The agency acted upon information provided by a collateral contact, which was verified by QC to be inaccurate, i.e. the client's employer reported incorrect salary information.)
- 8 - Acted on incorrect Federal computer match information that was not required to be verified. (This variance is excluded from the error determination but must be recorded.)
- 10 - Policy incorrectly applied. (The agency used the wrong policy/incorrectly applied policy when determining eligibility or processing change information.)
- 12 - Reported information disregarded or not applied. (The agency failed to take action on information reported by the client or information that became known through some other source, such as non-federal match information.)
- 14 - Agency failed to follow up on inconsistent or incomplete information. (Information provided by the household or collateral source was inconsistent with other information in the case record or incomplete but the agency failed to request verification.)
- 15 - Agency failed to follow up on impending changes. (The agency failed to take follow up action on a change that was anticipated, i.e. unemployment ending within the certification period, pregnancy, etc.)

- 16 - Agency failed to verify required information. (The agency failed to use third party information or documentation to establish the accuracy of statements on the application or change report form which are required to be verified. If the agency is not required to verify reported information use code 2.)
- 17 - Computer programming error. (The agency eligibility system caused the error due to a programming related problem, i.e. an incorrect amount for standard deduction was programmed into the system, the agency authorized the use of workarounds to the computer system that resulted in an error, etc.)
- 18 - Data entry and/or coding error. (The agency made a data entry error when keying into the State/local agency eligibility system, includes selection of incorrect codes.)
- 19 - Mass Change. (The error was due to a problem with a computer generated mass change, i.e. mass change was run late or incorrectly updated the case.)
- 20 - Arithmetic computation. (The agency made an error in computation or transcription, which was not related to computer programming or data entry.)
- 21 - Computer user error. (The EW failed to use computer system properly or used an unauthorized process to work around the system.)
- 99 - Other. (Variance caused by the agency, which does not fall under any of the specific causes listed above.)

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

- 2 - Overissuance
- 3 - Underissuance
- 4 - Ineligible

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

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

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

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

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

**19. Occurrence** - Complete the following for each variance:

- a. Date** - Enter the date (month and year) the variance occurred.
- b. Time Period** - Enter the appropriate code to indicate the time period during which the variance occurred.
  - 1 - Before most recent action by agency (The most recent action would be either a certification or a recertification.)
  - 2 - At time of most recent action by agency
  - 3 - After the most recent action by agency
  - 9 - Time of occurrence cannot be determined

### SECTION 3 - HOUSEHOLD CHARACTERISTICS

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

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

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

- 20. Most Recent Certification Action** - Enter the effective date (month, day and year) of the most recent certification or recertification action prior to or concurrent with the review date. This date cannot be prior to the start of the most recent certification period and should be in the case record.
- 21. Type of Action** - Based on information in the case record, indicate the type of action by entering one of the following codes:

- 1 - Certification
- 2 - Recertification

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

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

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

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

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

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

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

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

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

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

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

- 1 - Yes
- 2 - No

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

- 1 - Yes
- 2 - No

**29. Reporting Requirement** - Select the code that describes the reporting system used to certify the household. If the household was certified under six month reporting enter code "6", simplified reporting (also called six month reporting or semiannual reporting), even if QC determined that the appropriate reporting system should have been something else.

- 1 - Change Reporting with \$100 change in earned income
- 2 - Change Reporting with change of wage rate, salary, or change in employment status
- 3 - 5-Hour change in hours worked and expected to continue over a month
- 4 - Simplified Reporting (exceeding 130% of income poverty guidelines)
- 5 - Quarterly Reporting
- 6 - Simplified Monthly Reporting
- 7 - Transitional benefits (no reporting requirement)

8 - Transitional benefits (reporting requirements)

9 - Other

10 - Reserved

## **Resources:**

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

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

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

1 - No vehicles

2 - Vehicle exempt because used for producing income, as a home, to transport a physically disabled member, for long distance travel (other than commuting), or to carry fuel or water.

3 - Vehicle exempt because inaccessible resource (equity value is \$1,500 or less)

4 - Vehicle exempt due to categorical eligibility

5 - Vehicle excluded under State TANF standard (vehicle of non-categorically eligible household members only)

6 - Vehicle is registered and is attributable to an adult household member or is used by a person under 18 for employment or education (subject to fair market value only)

7 - Vehicle not registered (equity test only)

8 - Vehicle is not excluded and is not included in code 6 (subject to fair market value or equity test, whichever is greater)

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

- 33. Countable Vehicle Assets** - Record that portion of a vehicle's value counted toward the household's resource limit using information from the final QC determination.
- 34. Other Non-liquid Assets** - Enter the dollar value of non-liquid assets such as boats and trailers using information from the final QC determination. For amounts greater than \$99,998 enter the code 99998. When there is an indication that a resource type was present but that amount is unknown, enter the code 99999. If an approximate amount is known, enter that amount.

**Income:**

- 35. Gross Countable Income** - Enter the countable gross monthly income of the SNAP household before applying any deductions to the income from the final QC determination. Enter all countable income. Include prorated amounts from ineligible household members.
- 36. Net Countable Income** - Enter the countable net monthly income from the final QC determination used to compute the amount of the SNAP allotment for the sample month after application of all appropriate deductions.

**Deductions:**

- 37. Earned Income** - Enter the amount of the earned income deduction that the household was eligible to receive based on the final QC determination.
- 38. Medical** - Enter the amount of the allowable medical expenses for elderly and disabled household members based on the final QC determination.

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

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

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

- 40. Child Support** - Enter the dollar value of the child support payment deduction from the final QC determination.
- 41. Shelter** - Enter the dollar value of the shelter deduction from the final QC determination.
- 42. Homeless** - Select the code that applies to this household based on the final QC determination.
- 1 - Not homeless
  - 2 - Homeless, not receiving homeless shelter allowance
  - 3 - Homeless, receiving homeless shelter allowance

***Additional Information on Shelter Costs:***

- 43. Rent/Mortgage** - Enter the amount the household was billed for rent/mortgage from the final QC determination. Include taxes, insurance, condo fees and homeowner association fees.
- 44. Use of SUA** - This entry has two boxes that are used to collect different information about the SUA. Do not complete 44(b) if 44(a) is coded 1.
- a. Usage** - Enter the code which describes usage and entitlement to the SUA based on the final QC determination:
- 1 - No utilities and no LIHEAA
  - 2 - Uses actual expenses
  - 3 - Uses higher standard based on LIHEAA
  - 4 - Uses higher standard and does not receive LIHEAA
  - 5 - Uses lower standard
  - 6 - Uses phone only standard
  - 7 - Uses individual standards
  - 9 - Other

**LIHEAA** is the Low Income Home Energy Assistance Act, your State program may have another name such as Home Energy Assistance Program (HEAP)

**Higher Standard** is an SUA based upon receipt of heating or cooling and includes all utilities

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

**b. Proration** - Select the code that identifies whether the SUA amount was prorated (e.g. prorated among non-household members of the residence).

1 - Not prorated

2 - Prorated

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

## SECTION 4 - INFORMATION ON EACH HOUSEHOLD MEMBER

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

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

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

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

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

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

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

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

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

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

- 1 - Male
- 2 - Female

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

This is to collect racial and ethnic data as required by the changes brought about by the May 18, 2006 regulation SNAP: Civil Rights Data Collection and to identify how to collect the information until the entire caseload has been converted to the new requirement. The change to the new format may be done voluntarily at this time but is required for all new applications and recertifications effective April 1, 2007. Under this scenario QC reviewers will be recording the racial/ethnic data in the new format as soon as available and will be collecting the old format from now through April 2009.

**New format:** Use codes 1 through 22 to record information if it has been collected in the new format.

**Old format:** Use codes 30 through 34 and 99 if the data is in the old format.

We expect the information will continue to be in the old format for most cases

until there are new applications and recertification after April 1, 2007. Due to the way that recertifications are scheduled, cases will continue to have the old format until their certification periods expire in the year following for most cases and 2 years for those elderly cases with 24 month certification periods. This will mean that all cases will be in the new format on April 1, 2009.

Under the rules for the new format, applicants are asked to voluntarily fill out ethnicity and race on their applications. Eligibility workers identify information for the applicant when they have not voluntarily filled out the information. QC reviewers are to collect only the information that has been recorded on the application.

## **New Format**

### **Information Not Available**

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

### **Not Hispanic or Latino**

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

### **Multiple races reported**

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

## Hispanic or Latino

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

### Multiple races reported

- 18 - (Hispanic or Latino) and (American Indian or Alaska Native) and White
- 19 - (Hispanic or Latino) and Asian and White
- 20 - (Hispanic or Latino) and (Black or African American) and White
- 21 - (Hispanic or Latino) and (American Indian or Alaska Native) and (Black or African American)
- 22 - (Hispanic or Latino) and Respondent reported more than one race and does not fit into the above categories (code 18 through 21)

## Old Format

These codes are for the recording of race based upon the older data collection requirements for those cases where the new format has not yet been collected. Remember racial and ethnic data must be collected in the new format for all new applications and recertifications above beginning April 1, 2007. Under the old data collection reviewers identify the racial/ethnic category of the members of the household as they can by either asking the person being interviewed or through personal observation.

### Racial/Ethnic Data Not Collected in the New Format

- 30 - White, not of Hispanic origin
- 31 - Black, not of Hispanic origin
- 32 - Hispanic
- 33 - Asian or Pacific Islander (Oriental)
- 34 - American Indian or Alaskan Native
- 99 - Unknown

## 52. Citizenship Status - Enter the appropriate code.

- 1 - U.S. born citizen
- 2 - Naturalized Citizen

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

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

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

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

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

## **First box: Status**

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

## **Second box: Hours Worked**

- 1 - Not employed
- 2 - 1-19 hours per week
- 3 - 20-29 hours per week
- 4 - 30-39 hours per week
- 5 - 40+ hours per week

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

- 1 - Work Registrant
- 2 - Federal exemption, physically or mentally unfit for employment
- 3 - Federal exemption, care of a child under 6 or an incapacitated person
- 4 - Federal exemption, working and/or earning the equivalent of 30 hours per week
- 5 - Federal exemption, other

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

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

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

**57. ABAWD Status** - An able-bodied adult without dependents (ABAWD) is a non-disabled adult aged 18 through 49 who does not meet an exemption at 7 CFR 273.24(c). An ABAWD who does not meet the work requirement at 273.24(a)(1) is only eligible for 3 months in a 36-month period-unless the ABAWD resides in an area where the time limit is temporarily waived, receives a discretionary (12 percent) exemption from the State, receives 3 additional consecutive months of eligibility under 7 CFR 273.24(e), or becomes exempt. For individuals who have been deemed an ineligible ABAWD, the reviewer must first document the individual's status under item 47 by selecting Code 10, then by selecting Code 2 under item 57. To document the ABAWD status of an individual, enter one of the following codes from the final QC determination:

- 1 - Not an ABAWD (meets an exemption at 7 CFR 273.24(c))
- 2 - Ineligible household member
- 3 - ABAWD meeting work requirement at 7 CFR 273.24(a)(1)
- 4 - ABAWD meeting work requirement (in 3 months of eligibility)
- 5 - ABAWD in waived area
- 6 - Exempt based on discretionary exemption

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

## SECTION 5 - INCOME IDENTIFIED BY HOUSEHOLD MEMBER

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

**59. Person Number** - Enter the person number from Section 4 for each SNAP household member with income based on information from the final QC determination. (This number is assigned in Section 4, item 46).

### Source 1

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

**Earned Income (Not Subsidized)**

- 11 - Wages and salaries
- 12 - Self-employment
- 14 - Other earned income

**Subsidized Earned Income**

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

**Unearned Income**

- 15 - Energy Assistance income
- 31 - RSDI benefits
- 32 - Veterans benefits
- 33 - SSI
- 34 - Unemployment Compensation
- 35 - Workmen's Compensation
- 36 - Other government benefits
- 37 - Foster care income
- 42 - Contribution
- 43 - Deemed income
- 44 - State general assistance or other State-funded welfare (don't include TANF here)
- 45 - Educational grants/scholarships/loans
- 46 - Other
- 47 - TANF
- 48 - State only diversion payment
- 49 - Interest income
- 50 - Court ordered child support payments received from absent parent or responsible person
- 99 - Unknown

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

**Source 2**

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

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

### **Source 3**

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

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

### **Source 4**

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

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

## **SECTION 6 - RESERVED CODING**

### **68. Timeliness of Application Processing (Expedited and 30 Day Requirement)**

- A determination of timeliness of application processing is to be made only for cases when a new application was filed in the current Federal Fiscal Year. If there is more than one application in the current Fiscal Year, measure timeliness for the most recent application for or prior to the sample month.

**NOTE:** Quality control only collects data for timeliness of application processing measure. Refer to policy guidance on the timeliness measure for additional information in determining whether a case was processed timely, not timely, or other as stated below.

Timeliness of application processing according to Federal processing standards. A household entitled to expedited service must be provided the opportunity to participate within 7 days. Households not entitled to expedited service must be provided the opportunity to participate by the 30<sup>th</sup> day following the date of application. A case that meets the applicable Federal processing standard is coded 1 - timely. A case that fails to meet the applicable Federal processing standard is coded 2 - not timely.

The following cases should be coded 3- Other: cases where no new application was filed in the review year, cases with only recertification applications filed (including those filed within 30 days after the certification period expired), and cases in which the new application was properly pended for incomplete verification. Cases in which a new application was improperly pended will be coded 2 - not timely

If after a thorough review of case circumstances and records there is no documentation, application or other information to determine timeliness, the case should be coded 3. For cases with this problem, every effort should be made to determine the timeliness of the case before deciding to use the "Other" code.

Please indicate the appropriate code:

- 1 - Timely
- 2 - Not timely
- 3 - Other

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

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

**70. Timeliness of Recertification Processing** - Use this process to review an active case in which the most recent application was a recertification. If there is more than one recertification application, measure for the most recent recertification application which is for or prior to the sample month.

**NOTE:** Quality control only collects data for timeliness of recertification processing. Refer to policy guidance on the timeliness measure for additional information in determining whether a case was processed timely or not timely as stated below.

Measure the timeliness of recertification application processing according to Federal processing standards. (The regulations include an application for recertification as an application taken within 30 days after the certification period expired; these application should

included for this measure and **not** the Application Processing Timeliness Measure.) If there was no recertification processed within the last 12 months prior to the sample month, the case will not be used in the timelessness of recertification rate.

For re-certifications to be considered timely they must either have been 1) properly determined expedited and allowed to participate within 7 days, or 2) appropriately determined as not expedited and allowed to participate within 30 days of submitting recertification application. For all cases coded Agency Caused or Client Cause Not Timely, indicate the **cause** for the delay. If multiple causes are identified, indicate the cause that comes first in the list. For example, if the agency sent out the NOE late and the interview was scheduled late, the reviewer should use code 11.

Indicate the appropriate code for 70:

01 - Timely

*Not Timely - Agency Caused*

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

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

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

*Not Timely - Client Caused*

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

25 - Client missed the first scheduled interview.

26 - Client did not return the required verification timely.

27 - Other client caused delay.

30 - Benefits issued outside the certification period.

40 - Not yet due for recertification.

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

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

1 - Comparison I recorded, Comparison II was not needed

2 - Did Comparison II, recorded Comparison I

3 - Did Comparison II, recorded Comparison II

4 - Comparison I equaled Comparison II

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

## SECTION 7 - OPTIONAL FOR STATE USE

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