# Income Verification & Collection Report SY 2016-17

New York State Education Department Child Nutrition Program Administration

## Professional Standards for State and Local Nutrition Program Personnel Final Rule

- Effective July 1, 2015
- This webinar will contribute 1 Training Hour towards the training requirements under the Professional Standard Requirements
- Required to track the number of training hours earned each year and maintain documentation of the trainings attended
- SED prototype tracking excel document for School Nutrition Directors
- Upcoming SED webinar for more information

## Regulatory Authority

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•7 CFR

•Part 210 – National School Lunch Program

•Part 215 – Special Milk Program

•Part 220 – School Breakfast Program

•Part 235 – State Administrative Expense

•Part 245 – Free and Reduced Price Eligibility

•Part 3016 - Procurement for Public & Charter Schools

•Part 3019 - Procurement for Non-Public Schools

•Part 3052 - Audit Requirements
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- Public Law 111-296 (Healthy, Hunger-Free Kids Act of 2010)
- •2 CFR Chapter I, and Chapter II, Parts 200, 215, 220, 225, and 230- Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards; Final Rule
  - <sup>a</sup>Supersedes and streamlines requirements from OMB CIRCULARS A-87; A-122
- •All USDA, SED guidance, memos, and instructions
- •USDA Eligibility Manual for School Meals (updated July 2015)

### Income Verification

- The confirmation of eligibility for free and reduced price meals under the NSLP and SBP
- Verification is an annual requirement!
- Confirmation of information provided on a free/reduced application:
  - Income eligibility
  - Child or household member is receiving assistance under SNAP, FDPIR, TANF
    - Not required through the Direct Certification Matching Process (DCMP)
- Verification must be completed by November 15<sup>th</sup>
  - Includes changes in eligibility
- We suggest using the SED prototype forms
  - Check your POS generated letters
- Keep all supporting documentation on file
  - Number of applications on file as of October 1<sup>st</sup>
  - Number to verify
  - Documentation of confirmation review
  - Summary of the process and results

## Income Verification

#### Income Verification is <u>not</u> required for:

- SFAs claiming PAID reimbursement only
- Special Milk Program only schools
- RCCI's with no day students
- Non base year Provision 2
- Community Eligibility Provision (CEP)



## \*However information must still be reported and submitted annually

## Step 1: <u>Establish Verification Sample Pool</u>

Sample Pool: Total number of newly approved applications on file as of October 1

#### <u>Determine your Verification Sample Pool: (Start October 1)</u>

- Count # free and reduced applications, district-wide (pieces of paper)
- Include income applications,
- Applications listing a case number,
- Applications with the foster child box checked but a letter or documentation from social service/placement agency was not submitted.

#### Do NOT include:

- Direct Certification Match
- Eligibility letters, homeless, migrant, runaways, or Head Start children
- Foster children who are deemed eligible based on a letter from the State or local placement agency
- Carry-over applications from the previous year who have not yet submitted a new application
- Denied Applications

#### Step 2:

# Determining the Sampling Method

Your Response Rate from 2015-16 determines how you conduct income verification for 2016-17!

- Error Prone Method
  - MUST be used if you had a less than 80% response rate to verification in 2015-16
    - We generate the list of LEA's that had a greater than 80% response rate, if your LEA is not listed, you must use this method
  - MUST be used if you are coming off Provision 2
  - MUST be used if you are in first year of operation

#### Alternate Options-

- If 80% or more households responded to income verification in 2015-16 (LEA is indicated on our generated list), you can use the error prone method OR 1 of 2 alternate options:
  - Random Method
  - Focused Method

## **Error Prone Method**

#### Error Prone Method:

verify the lesser of 3% or 3,000 of applications that fall within \$24/week, \$100/month or \$1200/year of the eligibility limit

- ALWAYS Round up
- Do not verify more applications then required
- When initially approving applications, it may be helpful to flag error prone applications to help facilitate the process.

#### Example

- 210 application forms are on file
- Take 3% = 6.3
  - Round up to 7
- Choose 7 error-prone applications to be verified
  - Suppose you only have 3 errorprone applications – what would you need to do?
    - Choose the remaining 4 using random method

## Random Method (Alternate 1)

- Verify the lesser of 3% or 3,000 of the total number of approved applications on file as of October 1<sup>st</sup> selected at random
- Random sample must include both:
  - Income applications
  - Categorical applications
    - (those applications that families indicated a SNAP/TANF/FDPIR case number or checked the foster box on the application but whose names do not appear on the direct certification matching list or did not provide an eligibility letter)

## Focused Method (Alternate 2)

Verify the lesser of 1% or 1,000 of the total number of approved applications (income and SNAP/TANF/FDPIR or Foster applications)
 PLUS the lesser of .5% or 500 approved applications which reported a SNAP/TANF/FDPIR case number.

#### Example:

900 total approved applications 600 approved w/ just a SNAP/TANF/FDPIR case number, 300 income applications

$$.01(1\%) \times 900 = 9$$

Separate applications into two piles: income group and case number group Select 9 error prone *income* applications to verify

.005 (.5%) x 600= 3 Select 3 applications with case numbers to verify

12 total verified applications

#### Step 3:

## Select Applications to Verify

- Select applications in accordance with the type of verification conducted
  - Error Prone
  - Random (Alternate 1)
  - Focused (Alternate 2)
- Always round up!
  - 6.1= 7 applications
- Do not verify any more or any less than required sample size
- Check computerized systems for accuracy
- Refer to the Income Verification Booklet for guidance

#### Step 4:

## **Confirmation Review**

- Take the applications that have been selected for verification & have them reviewed by a second reviewing official to ensure the application was initially approved correctly
- Second reviewing official cannot be:
  - FSMC employee
  - Original reviewing official
  - Original verification official
- Confirmation Review is not required if computer software was used to approve applications

## **Confirmation Review Outcomes**

- 1.No change in status(application was approved correctly)
  - SFA verifies application
- 3. Changed from Reduced to Free
  - Immediately change benefits
  - Notify household of change
  - Verify application

- 2. Changed from Free to Reduced
  - Do not change status
  - Verify application
- 4. Changed from Free or Reduced to Paid
  - Immediately notify household of change in benefits
  - Do **not** verify application
  - Select another free or reduced application to verify
  - Conduct 2<sup>nd</sup> review of newly selected application

#### Step 5:

## Notify Household of Selection



- Must notify households of selection
  - Recommended to use SED prototype letters
- Must inform households:
  - The type of acceptable verification documentation to confirm current income
  - That the household may provide proof that the child or any household member is receiving benefits under the Assistance Programs (SNAP/TANF/FDPIR) instead of providing income information
  - The date the information must be provided by and that failure to respond by the deadline will result in termination of benefits
  - Name of an SFA official who can answer questions and provide assistance
  - A toll free number for parents to obtain assistance. This can be a local number within the district. It cannot be a long distance call

# Step 6: Verification of Eligibility

- SFAs must verify all sources of income during verification
- Confirm income at the time of application beginning the month before they applied through the time the application is verified
- Acceptable Documentation:
  - Pay stub (s)
  - W-2's for self-employed only
  - TANF or SNAP recertification letter with eligibility dates listed
    - EBT card may not be accepted as documentation
  - Collateral Contact (for ex. employer, pastor, etc.)
  - Letter/documentation from Foster agency
  - Direct Verification
- SFAs must make at least 1 follow up attempt to contact families who do not respond to initial verification efforts
  - May have third party assist with follow-up

#### Step 7:

## Results of Verification

- Notify Families of the outcome of verification
  - Use NYSED prototype letter



- Increase in benefits
  - Must be made within 3 operating days (e.g. reduced to free)
- Decrease in benefits
  - Families must be given 10 calendar days written notice (e.g. free to paid)
  - Notice must include required information on denial letter
- Change Benefits must be made for ALL family members
- NOTE:
  - No response = benefits must be terminated



## Households who do not respond:

- SFAs must take the following written action:
  - Benefits must be terminated
    - 10-calendar day advance notice (the 1st day is the day the notification is sent)
    - This should be built into the verification timeline to be completed by November 15
- The written notice must include:
  - Change in benefits
  - Reason(s) for change
  - Right to appeal
  - Appeal process
  - Non-discrimination statement
  - Reapplication process



 Must continue to receive benefits until decision is made by hearing official



## Fragile Households

Fragile household: is one that may be having major hospitalization and/or health issues

 SFAs may decline up to 5% of their verification sample and replace them with other approved applications when a fragile household is chosen

#### The SFA may:

- Skip over the "fragile" household's application
- Document why the SFA passed over the "fragile" application
   (ONLY in rare and necessary circumstances should this be used)
- Select another application and begin the verification process



## **Direct Verification**



• Direct Verification is the confirmation of eligibility by using Office of Temporary and Disability Assistance (OTDA) records

Purpose– Help reduce termination of eligible families who fail to return information when chosen for verification

Intent-To validate a family's eligibility

- SFAs will:
  - Access Child Nutrition Management System (CNMS) and click on Direct Verification
    - SFAs will use last name search tool and case number search tool to verify students eligibility
      - Add the % (percentage sign) to the beginning and/or end of the name/case number to broaden the search
    - Must match 3 unique identifiers (i.e. DOB, address, name)
    - Keep a record of directly verified students on file for review
    - Report data on Income Verification Collection Report (Attachment G)
  - See The Child Nutrition Knowledge Center for Instructions

### Verification for Cause

- SFAs are obligated to verify all questionable applications
- Applications verified for cause are in *addition* to the annually required verification process
  - Restriction on sample size (over-verifying) does not pertain to verification for cause applications
- Follow Income Verification procedures
- Report those applications verified for cause and the results on the Income Verification Collection Report (Attachment G)

OMB APPROVED NO. 0584-0026
Expiration Date: 04/30/2016

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			_		od and Nutrition erification Co	Service Ilection Repo	rt				
	State agencies must report the information on this form ANNUALLY for each SFA with schools operating the National School Lunch Program (NSLP) and/or the School Breakfast Program (SBP).  All SFAs, including SFAs with all schools exempt from verification requirements, must complete applicable sections.										
	According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. The valid OMB number for this collection is 0584-0026. The time required to complete this information collection is 45 minutes per response, including the time to review instructions, search existing data resources, gather the data needed and complete and review the information collection.										
Sta	State Agency Name: SFA ID#: Type of SFA: School										
SE	Public         Nonprofit/Private         From:           SFA Name:         SFA City:         SFA Zity										
					,		code:				
	Total	Total **All SFAs must report Section 1**				A. Number of Sch OR Institution	B. Number of Students				
n 1	Schools, Residential	1-1: Total schools (Do not include RCCIs):				OK Moderations					
Section	Child Care Institutions	1-2: Total RCCIs (Do not inc	clude schools cou	unted in 1-1	):						
Sec	(RCCIs) and Enrolled	1-2a: RCCIs with day stu	tudents (Report ON	LY <u>day</u> stud	lents in 1-2aB):						
	Students	1-2b: RCCIs with NO day	ay students:								
		WOMEN SEA a with alta			4 Castian 244	A. Number of Sch	nools	B. Number			
						AND Institution	ns	of Students			
		2-1: Operating Provision 2/3									
n 2	SFAs with schools	2-2: Operating Provision 2/3 in a NON BASE year for NSLP and SBP:									
Section	operating alternate provisions	2-2a: Provision 2/3 students reported as FREE in a NON BASE year:									
Sec		2-2b: Provision 2/3 students reported as REDUCED PRICE in a NON BASE year:									
		2-3: Operating the Commun									
		2-4: Operating other alternatives for NSLP and SBP:  2-5: Operating an alternate provision(s) for only SBP or only NSLP:									
		2-5: Operating an alternate	provision(s) for o	nly SBP or	only NSLP:						
		3-1: Check the box or	only if all schools an	nd/or RCCIs	check box 3-1 if app in the SFA were not year Provision 2/3 fo	t required to perform d	s)				
3	Students approved as	3-2: Students directly certifi include students certified with				Program (SNAP): Do	not .				
Section	FREE eligible NOT subject to verification	3-3: Students directly certified through other programs: Include those directly certified through Temporary Assistance for Needy Families (TANF), Food Distribution Program on Indian Reservations (FDPIR), or Medicaid (if applicable); those documented as homeless, migrant, runaway, foster, Head Start, Pre-K Even Start, or non-applicant but approved by local officials. DO NOT include SNAP students already reported in 3-2.									
		3-4: Students certified categorically FREE eligible through SNAP letter method: Include students certified for free meals through the family providing a letter from the SNAP agency.									
	Students approved as	**ALL SFAs collectin	ng applications m	ust report S	Section 4**	A. Number of Applications		B. Number of Students			
on 4	FREE or REDUCED	4-1: Approved as categorically FREE Eligible: Based on those providing documentation (e.g. a case number for SNAP, TANF, FDPIR on an application)									
Section	PRICE eligible through a	4-2: Approved as FREE eligi information	Approved as FREE eligible: Based on household size and income								
0)	household application	4-3: Approved as REDUCED income information	D PRICE eligible: E	Based on ho	usehold size and						
T-1	: Total FREE Elig	gible Students Reported:		T-2: Tota	REDUCED PRICE	Eligible Students Re	ported:				



#### Income Verification Collection Report (Attachment G)

- Must report data on verification using the Income Verification Collection Report
- Start Verification Process by October 1<sup>st</sup>
- Complete Verification Process by November 15
- Submit Income Verification Report on CNMS by December 15.
- Even those exempt from verification requirements must still complete the report.
  - CEP and Provision 2 schools only need to complete section 2, 3-1 and 5-1 (if all schools in the SFA are under the Provision)

#### Section 1 and 2

#### Number of Schools or Institutions and Number of Students Alternate Provisions

	Total Schools,	**All SFAs must report Section 1**	A. Number of Schools OR Institutions	B. Number of Students
r Z	Residential Child Care Institutions (RCCIs) and Enrolled Students	1-1: Total schools (Do not include RCCIs):		
ctio		1-2: Total RCCIs (Do not include schools counted in 1-1):		
Se		1-2a: RCCIs with day students (Report ONLY <u>day</u> students in 1-2aB):		
		1-2b: RCCIs with NO day students:		

Section 1 will prefill once the October claim is submitted using the last operating day in October

		**ONLY SFAs with alternate provisions must report Section 2**	A. Number of Schools AND Institutions	B. Number of Students
		2-1: Operating Provision 2/3 in a BASE year for NSLP and SBP:		
8	SFAs with schools operating alternate provisions	2-2: Operating Provision 2/3 in a NON BASE year for NSLP and SBP:		
ion		2-2a: Provision 2/3 students reported as FREE in a NON BASE year:		
ect		2-2b: Provision 2/3 students reported as REDUCED PRICE in a NON BAS		
S	providend	2-3: Operating the Community Eligibility Option:		
		2-4: Operating other alternatives for NSLP and SBP:		
		2-5: Operating an alternate provision(s) for only SBP or only NSLP:		

Section 2 is only for SFAs or RCCIs who operate alternative provisions, this include Provision 2 and Community Eligibility Provision (CEP).

#### Section 3

#### Free eligibles not subject to verification

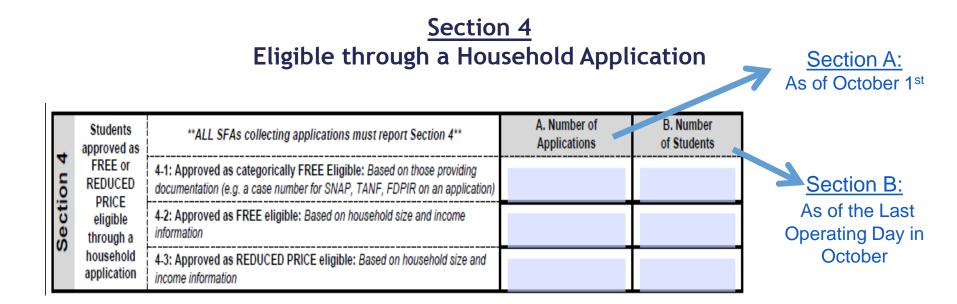
**3-1** SFAs that are not required to perform direct certification check box 3-1

n 3	Students approved as	**ALL SFAs must report Section 3 or check box 3-1 if applicable**  3-1: Check the box only if all schools and/or RCCIs in the SFA were not required to perform direct certification with SNAP (i.e. NON BASE year Provision 2/3 for all schools)  3-2: Students directly certified through Supplemental Nutrition Assistance Program (SNAP): Do not include students certified with SNAP through the letter method.	B. Number of FREE Students
Section	FREE eligible NOT subject to verification	3-3: Students directly certified through other programs: Include those directly certified through Temporary Assistance for Needy Families (TANF), Food Distribution Program on Indian Reservations (FDPIR), or Medicaid (if applicable); those documented as homeless, migrant, runaway, foster, Head Start, Pre-K Even Start, or non-applicant but approved by local officials. DO NOT include SNAP students already reported in 3-2.	
		3-4: Students certified categorically FREE eligible through SNAP letter method: Include students certified for free meals through the family providing a letter from the SNAP agency.	

**3-2** Students directly certified through SNAP ONLY or extension of eligibility

(most SFAs will have largest number here)

- **3-3** Students directly certified through TANF, Medicaid, FDPIR or extension of eligibility for these programs. Also homeless, migrant, runaway, documented foster children, Head Start
- **3-4** Include <u>ONLY</u> students certified as Free based on a letter submitted by family from SNAP agency or extension of this eligibility
- Students are to be reported only once
- Use the last operating day in October when reporting data in section 3



- A. Number of applications refers to the number of household applications submitted
  - A. 4-1: Free eligible based on a case number written on an application or a foster child application where the household did not submit documentation verifying the foster child's status
  - B. 4-2: Free eligible based on income information on an application
  - C. 4-3: Reduced eligible based on income information on an application
- B. Number of students are the total number of students on all applications submitted (there may be more than one student per household application)

	**ALL SFAs must report Section 5 or check box 5-1 if applicable**  5-1: Check the box if ALL schools and/or RCCIs are exempt from verification (see instructions for list of exemptions).  If 5-1 is checked, no further reporting in Section 5 is required.									
	5-2: Was verification Yes, completed Yes, completed No, verification was not comple	by November of after November was NOT perfo	15th r 15th	1. <u> </u>	Alternate one (Lesser of 3% or 3,000 selected randomly)					
	If 1 or 3 is checked report 5-4. If 2 is checked in 5- "N/A" in 5-4.	3, enter		R PRONE applicatio ications as of October considered error pr	1st	5	-5: Number of applic selec verification s	ted for		
	**ALL SFAs must report 5-7 or check box 5-6 if applicable**  5-6: Check the box if direct verification was not conducted in the SFA, (i.e. not one of the schools and/or RCCIs in the SFA performed direct verification). If 5-6 is checked, skip 5-7.  A. Number of Applications of Students									
Section 5	Report if FREE and/or REDUCED PRICE eligibility is confirmed through direct verification with SNAP/TANF/FDPIR/MEDICAID as of November 15th  5-7: Confirmed through direct verification:									
Sec	5-8: Results of Verification by Original Benefit Type  For each original benefit type (A, B, & C), report the number of applications and students as of November 15th for each result category (1, 2, 3, & 4).  Do NOT include students and applications already reported in 5-7A or 5-7B.									
						•				
	A. FREE-Cat Certified as FREE ba documentation (e.g.		ible ANF/FDPIR	Certified	REE-Income as FREE based ( sehold size applic		Certified as REL	ED PRICE-Inco DUCED PRICE ehold size appli	based on	
	Certified as FREE ba	ased on SNAP/T	ible ANF/FDPIR	Certified	as FREE based		Certified as REL	DUCED PRICE	based on	
	Certified as FREE ba documentation (e.g. Result	ased on SNAP/Tr case number) or a.	ible ANF/FDPIR application b.	Certified income/hous Result	as FREE based sehold size applic a. Applications	b.	Certified as REL income/hous Result	OUCED PRICE ehold size appli a.	based on cation b.	
	Certified as FREE ba documentation (e.g. Result Category 1. Responded,	ased on SNAP/Tr case number) or a.	ible ANF/FDPIR application b.	Certified income/house Result Category  1. Responded	as FREE based sehold size applications	b.	Certified as REL income/hous Result Category 1. Responded,	OUCED PRICE ehold size appli a.	based on cation b.	
	Certified as FREE ba documentation (e.g. Case)  Result Category  1. Responded, NO CHANGE:  2. Responded, Changed to	ased on SNAP/Tr case number) or a.	ible ANF/FDPIR application b.	Result Category  1. Responded NO CHANGE  2. Responded Changed to	as FREE based sehold size applica. Applications	b.	Certified as REL income/hous  Result Category  1. Responded, NO CHANGE:  2. Responded, Changed to	OUCED PRICE ehold size appli a.	based on cation b.	
	Certified as FREE be documentation (e.g. Result Category  1. Responded, NO CHANGE:  2. Responded, Changed to REDUCED PRICE:  3. Responded, Changed to	ased on SNAP/Tr case number) or a.	ible ANF/FDPIR application b.	Result Category  1. Responded NO CHANGE  2. Responded Changed to REDUCED PRICE  3. Responded Changed to	as FREE based of the property	b.	Certified as REL income/hous  Result Category  1. Responded, NO CHANGE: 2. Responded, Changed to FREE: 3. Responded, Changed to	OUCED PRICE ehold size appli a.	based on cation b.	

Report the number of applications as of November 15th verified for cause in addition to the verification requirement.

#### Child Nutrition Program Administration 89 Washington Avenue, Room 375 EBA Albany, NY 12234

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