



Date: ~~October 13~~ November 9, 2017

DMS Operations Memo 17-47
Amended November 9, 2017

To: Income Maintenance Supervisors
Income Maintenance Lead Workers
Income Maintenance Staff

Affected Programs:	
<input type="checkbox"/> BadgerCare Plus	<input type="checkbox"/> Caretaker Supplement
<input checked="" type="checkbox"/> FoodShare	<input type="checkbox"/> FoodShare Employment and Training
<input type="checkbox"/> Medicaid	
<input type="checkbox"/> SeniorCare	

From: Rebecca McAtee, Bureau Director
Bureau of Enrollment Policy and Systems
Division of Medicaid Services

Temporary FoodShare Policy for Puerto Rico Evacuees

CROSS REFERENCE

- Operations Memos [17-17](#), [17-19](#), [17-42](#), and [17-43](#)
- FoodShare Handbook, [Section 5.3.1 Disaster Supplemental Nutrition Assistance Program \(DSNAP\) for Victims of Natural Disasters](#) and [Section 7.1.1.5 Replacement Issuance for Destroyed Food](#)

EFFECTIVE DATE

~~October 13~~ November 9, 2017

PURPOSE

This Operations Memo announces a temporary policy for issuing FoodShare to Puerto Rico evacuees and instructs income maintenance (IM) workers on how to process Disaster Supplemental Nutrition Assistance Program (DSNAP) applications for Puerto Rico evacuees in CARES Worker Web (CWW).

BACKGROUND

The Food and Nutrition Service (FNS) has provided policy guidance to enable state agencies to better serve people who have evacuated from Puerto Rico as a result of Hurricanes Irma and Maria and are applying for disaster FoodShare. The unprecedented damage from these hurricanes has made it necessary for some people to leave Puerto Rico.

Evacuees include individuals and families evacuated by governmental and nongovernmental organizations and those who have left a disaster area on their own.

The first application period was October 1-31; this is a second application and deadline period of November 1-30 for Puerto Rico evacuees.

POLICY

Effective ~~October 1-31~~ **November 1-30**, 2017, evacuees from Puerto Rico who apply for DSNAP benefits may be found eligible for ~~October~~ **November** and ~~November~~ **December** 2017 benefits at the maximum allotment for the household.

After ~~October 31~~ **November 30**, 2017, Puerto Rico evacuee DSNAP applications will not be accepted or required to be processed.

Note: **November DSNAP applicants who want to apply for regular FoodShare should do so for January 2018. October DSNAP applicants who want to apply for regular FoodShare should do so for December 2017.**

ACCESS AND INFORMATION

IM agencies must ensure that evacuees have easy access to the DSNAP application and processing staff to submit FoodShare DSNAP applications. In addition to the usual procedures, in some circumstances this can be accomplished by sending staff on-site to the evacuation, reception, or shelter sites; conducting home visits; etc. Whether or not an IM agency provides on-site service, information regarding the program must be made available to the evacuation sites, including:

- [FoodShare Makes Wisconsin Healthier fact sheet, P-16062](#)
- [Disaster FoodShare Application – Puerto Rico Evacuee, F-16060C](#)

APPLICATION PROCESSING

FoodShare applicants who identify themselves as evacuees from Puerto Rico must be given priority status by local IM agencies. Evacuee DSNAP applications must be submitted in person to the IM agency. Agencies must provide same-day application interviews and determine disaster benefit eligibility in CARES. Agencies must provide the approved benefits as soon as possible, and no later than seven days after receiving the signed DSNAP application.

VERIFICATION

Workers are only required to verify the applicant's identity. Typical verification procedures for identity apply. If the applicant does not have identity documentation, a collateral contact may be used as verification.

If possible, the worker should verify that the applicant was residing in Puerto Rico in September 2017. The worker should accept any documents the applicant has with their Puerto Rico address or, if documentation is unavailable, allow a collateral contact as verification. If the evacuee is unable to verify residence, accept his or her stated address and determine eligibility accordingly. Do not delay or deny eligibility while waiting for the applicant to obtain verification.

Verification of all other mandatory and questionable items should not be pursued for Puerto Rico evacuees. Self-declaration of all information will be accepted. (Use the "AF" verification code.)

Exception: Alien/immigration status should be verified through the SAVE process. When this cannot be done because the applicant has no documents, the applicant should be referred to the U.S. Bureau of Citizenship and Immigration Services office in Chicago to obtain new copies of his or her alien registration cards. In the meantime, accept the applicant's declaration of immigration status and

determine eligibility accordingly. Do not delay or deny eligibility while waiting for the applicant to obtain verification.

[U.S. Bureau of Citizenship and Immigration Services](#)

USCIS National Customer Service Center
1-800-375-5283
<https://www.uscis.gov/>

STATE RESIDENCE

Evacuees need only be physically present in Wisconsin to be considered residents for FoodShare DSNAP eligibility purposes. They do not have to intend to reside in Wisconsin.

Applicants who do intend to reside in Wisconsin for the foreseeable future must apply for regular FoodShare rather than DSNAP. Regular FoodShare rules apply to these applications.

HOUSEHOLD COMPOSITION

The applicant must list all members wishing to receive DSNAP benefits and provide their Social Security numbers, if available. The evacuee household is any group of persons evacuated from the disaster who take shelter together. The current household configuration might not reflect its pre-disaster household composition.

The worker will accept the household's statement about its current evacuee household size to determine the benefit allotment.

PURCHASING AND PREPARING

The applicant and his or her family may be certified as a household separately from anyone else they are living with and purchasing and preparing food with. If the household has split up, the separate parts of the original household may be certified as separate households. The state will treat the evacuee household as a separate household from any non-evacuee persons sheltering them, even if the evacuee household purchases and prepares meals with others.

INCOME AND ASSETS

The IM agency will use the [Disaster Standard Expense Deduction Option \(DSED\) – FY 2018](#) to process income, expenses, and limits for eligibility. Only households with actual, unreimbursed disaster-related expenses equal to or greater than \$100 may qualify for DSED. DSED cannot be applied to cases in which food loss is the only qualifying expense.

The household must attest, under penalty of perjury, that:

- Its available income and liquid assets, after taking into account disaster-related expenses, do not exceed the disaster income guidelines for its household size.
- It is not currently receiving benefits from SNAP, D-SNAP, or benefits under this evacuee policy. (**Note:** Households that receive Puerto Rico's Nutrition Assistance Program (NAP) may still receive DSNAP, but the benefits must be closed as soon as possible—see [Evacuees Who Receive Puerto Rico NAP](#).)

SECTION III – HOUSEHOLD MEMBERS

Provide the information below for yourself and any members of your household who are evacuees and are living with you. List each household member's SSN (if available), date of birth, source/type of income, and net income. Net income is what you make after taxes. List any other income your household members have received or expect to receive during the disaster period of **11/01/2017 through 11/31/2017**.

Note: If you are temporarily staying with another household because of the disaster, do not list members of that household.

Name (Last, First, MI)	Social Security Number	Date of Birth	Source/Type of Income	Income
				\$
				\$
				\$
				\$
				\$
				\$

SECTION IV – MONEY YOU HAD ACCESS TO

List all money your household had access to during the disaster. Include cash and money you had in checking and savings accounts.

Total Amount Available \$

SECTION V – DISASTER-RELATED COSTS

For each item below, list the amount your household has paid or expects to pay due to the disaster.

Note: Do not include any costs that did not occur during the disaster period. Do not include any costs that are not due to the disaster or that were paid or will be paid by someone outside of your household.

Type of Cost	Amount	Type of Cost	Amount
Food destroyed or lost	\$	Property protection	\$
Dependent care	\$	Temporary shelter	\$
Funeral/medical	\$	Repair or replace items for home or self-employment property	\$
Moving and storage	\$	Other disaster-related costs	\$

SECTION VI – ELIGIBILITY CALCULATION

FOR OFFICE USE ONLY

1. Anticipated income	\$ _____	6. Net disaster expenses (Line 4 minus Line 5)	\$ _____
2. Accessible cash	\$ _____	7. Net income (Line 3 minus Line 6)	\$ _____
3. Total income/cash (Line 1 plus Line 2)	\$ _____	8. Maximum income limit	\$ _____
4. Total out-of-pocket disaster expenses	\$ _____	9. Eligible ("Yes" if Line 7 [net income] is less than or equal to Line 8 [maximum income limit]; "No" if Line 7 is greater than Line 8)	\$ _____
5. Reimbursed disaster-related expenses	\$ _____		

Figure 1 DSNAP Application Form

The worker will use lines 1 through 3 and line 8 of the “For Office Use Only” section of the Disaster FoodShare Application – Puerto Rico Evacuee, F-16060C, to determine if the household meets the eligibility criteria.

1. Enter the sum of lines 1 and 2 on line 3 and line 7.
2. On line 8, enter the “total disaster gross income limit” from the DSED FY 2018 guidelines.

Per line 9 instructions, the household is eligible if **both** of the following criteria are met:

- Their total unreimbursed disaster expenses, other than food, are greater than \$100.
- Their gross income (line 3 or 7) is less than the total disaster gross income limit (line 8).

If these criteria are met, the worker should issue the maximum benefits for the evacuee household according to the instructions in the [Processing an Evacuee DSNAP Application](#) section.

If the household's gross income is at or above the total disaster gross income limit, enter "No" on line 9 and follow the instructions in the [Processing an Application Denial](#) section.

WORK REQUIREMENT EXEMPTION

Individuals are exempt from the work requirement and ABAWD policy during the two months of disaster benefits.

EVACUEES WHO RECEIVE PUERTO RICO NAP

If the applicant is currently certified in Puerto Rico and receiving NAP, the worker should take the following actions:

- Inform the member that NAP benefits cannot be used outside of Puerto Rico.
- Have the member complete the [Affidavit for Supplemental Nutrition Assistance Program – Puerto Rico, F-02217](#), stating that they understand that no member of the household may receive benefits from both NAP and FoodShare (SNAP) simultaneously, and that the applicant will close his or her NAP case as soon as possible. Once the affidavit is completed, the IM worker should process the application and make an eligibility determination. All affidavits must be scanned into the ECF.
Note: If the applicant household does not receive NAP there is no requirement to complete an affidavit. Due to damage in Puerto Rico, there is no way to check if an applicant is receiving NAP. Accept the applicant's statement and process the application accordingly.
- Explain how much the household will receive.
- Explain how FoodShare benefits work and how to activate and use the EBT card.

If the member intends to reside in the local area for the foreseeable future, assist him or her in applying for regular FoodShare rather than DSNAP. Regular FoodShare rules apply to this new application.

DUPLICATE PARTICIPATION

An evacuee may not receive duplicate benefits, including the following benefit types:

- Regular SNAP
- DSNAP
- Benefits issued under this temporary evacuee policy

Households that receive Puerto Rico NAP may still receive DSNAP, but the benefits must be closed as soon as possible (see [Evacuees Who Receive Puerto Rico NAP](#)).

EBT CARDS

An EBT QUEST card will be mailed to the evacuee's Wisconsin mailing address.

CARES

This section provides guidance on how to process an evacuee DSNAP application in CWW and how to process a denial. It also provides additional information related to DSNAP processing in CARES.

The Puerto Rico DSNAP system functionality will be available in CWW beginning ~~Monday, October 16~~ **Thursday, November 9**.

PROCESSING AN EVACUEE DSNAP APPLICATION

1. Start the Client Registration driver flow to create an RFA for the DSNAP application.
If the applicant is already known to CARES, use the existing information but note that the household address must be the Puerto Rico address shown in step 5 below to enable the DSNAP functionality.
2. On the Additional Data page, in the “RFA Information” section, select the county or tribe that corresponds to the agency where the evacuee is applying for benefits.
3. Enter **10/01/2017** as the contact date.
4. Select **Walk-In** as the contact method.
5. In the “Household Address” section, enter the following address to enable the DSNAP functionality:

273 Ave Ponce de Leon, San Juan, Wisconsin*, 00917

*Puerto Rico is not available from the State drop-down list, so choose **Wisconsin** instead. When the Address Verification page is displayed during the intake driver flow, the worker should **override** the post office suggested address and keep Wisconsin as the state.

6. In the “Alternate Address” section, check the **Household has an alternate mailing address** box and enter the evacuee's Wisconsin mailing address. Evacuees must have a Wisconsin mailing address to receive notices and the EBT card.

Additional Data Cancel Reset

RFA Information

*RFA Type: ES - ECONOMIC SUPPORT (ES)

*Contact Date: 11 / 01 / 2017

*Contact Method: W - Walk-in

*Language: E - ENGLISH

*County / Tribe: 40 - MILWAUKEE COUNTY

*Eligibility Office: 5605

Assigned worker ID: XCTD4N

Assigned Worker Name:

*Application Source: LA - Local Agency Office

Race

American Indian / Alaskan: Asian: Black / African American:

Hawaiian / Other Pacific Islander: White:

Populate unknown responses as No

Ethnicity

Hispanic:

Household Address

County of Residence: 40 - MILWAUKEE COUNTY

Homeless Populate with office address (for homeless Primary Persons)

Number	Unit	Direction	*St / Rural Rt / Box Number	Suffix	Quadrant	Apt
273			Ave Ponce de Leon			

Additional Address Info:

*City: San Juan

*State: WI - WISCONSIN

*ZIP: 00917

Phone:

Census Tract:

Region Number:

Contact Information

Work Phone: x

Message Phone: x

Cell Phone:

Email Address:

Preferred Contact Method:

Preferred Contact Time:

Preferred Contact Method if Deaf or Hard of Hearing:

Alternate Address

Household has an alternate mailing address:

Number	Unit	Direction	St / Rural Rt / Box Number	Suffix	Quadrant	Apt
1		W - WEST	Wilson			

Additional Address Info:

City: Madison

State: WI - WISCONSIN

ZIP: 53703

Phone:

Figure 2 Additional Data page

7. When the Additional Data page is complete, click **Next** to continue.
8. On the Program Requests page, select **Yes** for both FoodShare and DSNAP, and click **Next**.
Note: The DSNAP option will only be available if the worker entered the Puerto Rico Zip code given in step 5 above.

Programs	
* Health Care (Including Medicare Savings Programs):	No
* Family Planning Waiver:	No
* Caretaker Supplement:	No
* FoodShare:	Yes
DSNAP:	Yes
* Child Care:	No
* W-2:	No

Figure 3 Program Requests page

9. On the Priority Service Determination page, it does not matter what the worker enters because the page is not relevant for DSNAP applications. The worker can use 10/11/2017 as the priority service determination date.
10. On the Complete Request for Assistance page, enter a filing date of 10/11/2017 for both FoodShare and DSNAP, and then click **Next**.

RFA Dates	
Contact Date:	11 / 01 / 2017
Registration Filing Date:	11 / 01 / 2017

Program Filing Dates	
<input type="checkbox"/> Make all blank Program Filing dates the same as Registration filing date	
Health Care (Including Medicare Savings Programs):	Not Requested
Family Planning Waiver:	Not Requested
Caretaker Supplement:	Not Requested
* FoodShare:	11 / 01 / 2017
DSNAP:	11 / 01 / 2017
Child Care:	Not Requested
W-2:	Not Requested

Extension	
Extension Date:	MM / DD / YYYY
Extension Reason:	

Withdraw	
Withdraw RFA?	No
Withdraw Reason:	

Figure 4 Complete Request for Assistance

11. On the RFA Summary page, choose **Begin Intake Interview** and click **Next**. (Tip: Enter 10/11/2017 as the begin month for new data at the bottom of the page.)

12. Proceed through the Intake driver flow. The following table provides guidance on what to enter in various pages to ensure the application is processed correctly:

CWW Page	Guidance
Household Members	Enter data for each household member, based on answers from the evacuee application and interview.
General Case Information	FoodShare Signature: Yes
Address Verification	For the household address, choose Override Post Office Suggested Address – Keep address listed in “Original Address” section.
Permanent Demographics	See the Verification section of this Memo for information on U.S. citizenship.
Current Demographics	Resides in Wisconsin: Yes
FoodShare Gatepost	Is anyone in your household requesting DSNAP benefits: Yes
DSNAP	<p>Answer the questions on the DSNAP page based on answers from the evacuee application and interview.</p> <ul style="list-style-type: none"> • “How many DSNAP-eligible individuals are in your household?”: Enter the number of individuals, based on the evacuee application and interview. Note: It is very important to enter the correct number here because the system will check whether the requested allotment matches the maximum allotment for a household of this size. The benefit will be held if the requested allotment is not the correct amount for the household size entered here. • “Is anyone in your household a County/State/Contracted employee working with IM/CC/W2 agency?”: No • Disaster Type: PUERTO RICO <p>Note: If an evacuee DSNAP applicant is not eligible for disaster benefits, see Processing an Application Denial for information on how to fill out the DSNAP page.</p>

Figure 5 DSNAP Page

13. Run eligibility when the Intake driver flow is complete.

CWW will process the eligibility as a failure (for a generic disaster reason), but the system will suppress the denial notice. Workers will use the FoodShare Supplement Management page to provide the benefits.

Health Care / CTS Program Results							
Run	Assistance Group	Sequence	Benefit Begin Date	Benefit End Date	AG Status	Eligibility Status	Reasons
1	CTSZ - CARETAKER SUPPLEMENT - DID NOT APPLY	1	12/01/2017		DENIED	FAIL	054
			11/01/2017	11/30/2017	DENIED	FAIL	054
1	MA Z - MEDICAL ASSISTANCE - DID NOT APPLY	1	12/01/2017		DENIED	FAIL	054
			11/01/2017	11/30/2017	DENIED	FAIL	054

Other Program Results							
Run	Assistance Group	Sequence	Benefit Begin Date	Benefit End Date	AG Status	Eligibility Status	Reasons
1	FS - FOODSHARE	1	12/01/2017		DENIED	FAIL	741
			11/01/2017	11/30/2017	DENIED	FAIL	741
1	CC Z - CHILD CARE-DID NOT APPLY	1	12/01/2017		DENIED	FAIL	054
			11/01/2017	11/30/2017	DENIED	FAIL	054
1	WW Z - W-2 DID NOT APPLY	1	12/01/2017		DENIED	FAIL	054
			11/01/2017	11/30/2017	DENIED	FAIL	054

Figure 6 Eligibility Run Results showing FoodShare AG failure for reason 741

14. Confirm the FoodShare Results on the Confirm Eligibility page and click Next.

15. On the left navigation menu, under FS Benefit Issuance, choose **Supplement Issuance** to navigate to the FoodShare Supplement Management page.
16. Enter the amount of the maximum allotment available to that household size for the month of ~~October~~ **November** 2017.
Important: If the benefit amount entered does not match the 2018 maximum benefit amount for the number of individuals in the household, the supplement will be held and the ~~November~~ **December** 2017 supplement will not be created. A report will be generated daily and sent to the Cares Call Center listing all benefit issuance amounts that have the status of “HOLD.” The worker will have to correct the supplement promptly to ensure that the correct supplement is issued for both months.
17. For the supplement reason, use the code **960** for a new DSNAP applicant.

Reason Code	Description	When to Use	Text that Displays on the FoodShare Supplement Letter
960	DSNAP New App – Issued	A DSNAP applicant is not currently receiving FoodShare and qualifies for DSNAP benefits.	Your request for Disaster FoodShare benefits was approved. This is a one-time benefit.

Note: There is no requirement for this supplement type to be approved by a supervisor. DSNAP supplements with reason code 960 that are entered by workers who have security level 25 or greater will be automatically approved for issuance in the nightly processing.

18. Click **Add**, and then **Save**.

Figure 7 FoodShare Supplement Management page

See Operations Memo [17-17](#) for more details on issuing supplements in CWW.

During special nightly processing, the system will automatically create the second month of disaster benefits for the month of ~~November~~ **December** 2017. The positive disaster supplemental notice of decision will be automatically updated with this information, and benefit issuance history screens will be updated to reflect the total issued to the household for disaster benefits.

The system will create a case comment during this process to indicate the second month was added and what the two-month total issued was.

The screenshot shows a web interface titled "Case Comments". At the top right are "Cancel" and "Reset" buttons. Below is a section for "Add/Edit Comments" with fields for "Date Entered" (11/07/2017), "Entered By" (XCTD4N), "Comment Type" (G - General), and "Flag as Important?" (checkbox). A large text area for the comment is shown with "Current Size = 0 characters (1000 characters max.)" and an "Add" button. Below this is a "Review Comments (Past 90 Days)" table with columns for Flag, Date Entered, Entered Time, Entered By, Type, and Comments. Two rows of system-generated comments are visible. At the bottom, there are date pickers for "From Date" and "To Date", an "Add Expected Change(s)" button, and "Previous" and "Next" navigation buttons.

Flag	Date Entered	Entered Time	Entered By	Type	Comments
	11/07/2017	10:41 AM	CARES	General	PUERTO RICO - 11/2017 - \$ 384.00
	11/07/2017	10:45 AM	CARES	Supplement	FS SUPPLEMENT/REPLACEMENT APPROVED BY XCTD4N,CARE FOR THE MONTH(S) OF 11/2017,12/2017.

Figure 8 Case Comments page showing system-generated comments

PROCESSING AN APPLICATION DENIAL

If an evacuee DSNAP applicant is not eligible for the disaster benefits, the worker will need to enter the applicant's information on the DSNAP page.

1. Process the application as described in the last section in steps 1-11.
2. In step 12 on the DSNAP page, for the question "Was this DSNAP application approved?" select **No**.
3. Run eligibility.
4. Check the box to indicate the disaster application was denied.
5. In the "Explanation" section, clearly explain why the application was denied. Include the income and expenses used to determine/calculate the application's failure to meet DSNAP limits. Additional reasons for denying an evacuee disaster application include:
 - The applicant did not reside in disaster area at the time of the disaster.
 - The applicant is already receiving a SNAP, DSNAP, or evacuee benefit. (Document the state in which they received the benefit for ~~October~~ **November** and ~~November~~ **December** 2017.)
 - The declared income and expenses did not qualify the household for this benefit.
6. Because CARES will suppress the denial notice for all DSNAP failure reasons, the worker must send the [Disaster FoodShare Notice of Decision, F-16105](#), manually.

ADDITIONAL PROCESSING INFORMATION

This section provides additional information related to DSNAP processing in CARES.

ELECTRONIC CASE FILE (ECF)

All evacuee disaster applications, affidavits, and any negative notices must be scanned into the ECF.

WORKLOAD DASHBOARD AND FOODSHARE ON-DEMAND TOOL

If a new DSNAP request occurs on the RFA level, the FoodShare work item will not be created on the Workload Dashboard and/or FoodShare On-Demand Tool. The Workload Dashboard does not create separate work item types for DSNAP.

INFORMATIONAL MESSAGES

The following DSNAP-related messages may be displayed on the Confirm Eligibility page:

Message type	Message text	Explanation
Informational Message	AG will continue to fail because passing month is the same as Disaster Issuance.	Displayed when a worker runs eligibility with passing dates for a month that has already failed for DSNAP reasons and the passing month is the disaster issuance month.
Informational Message	XE136: Please navigate to the FoodShare Supplement Management page in CWW and issue DSNAP benefits.	Prompts workers to issue a DSNAP supplement.
Action item and alert	“Proceed to the FS Supp Mgt Page” (alert code 529 in CARES Mainframe).	Appears when a DSNAP supplement has been requested.

CONTACTS

BEPS CARES Information and Problem Resolution Center

ATTACHMENTS

- [Disaster Standard Expense Deduction Option \(DSED\) – FY 2018](#)

DHS/DMS/BEPS/JT