Disaster Supplemental Nutrition Assistance Program

Guidance & Tools for State Agencies

Food and Nutrition Service
August 9, 2012
Agenda

- Introduction & Welcome
- Improving the D-SNAP Guidance
- Planning
- Requests
  - D-SNAP Waiver
  - EBT & Retailer Waivers
- Operations
- Reporting
- Questions & Answers
Improving the D-SNAP Guidance

- Guidance was last updated in 2008
- Incredibly busy 2011 disaster season
  - 24 D-SNAPs in 17 States
  - FNS approved 106 disaster waivers in FY2011
- Formed workgroup to gather existing documents and discuss best practices
- Goals:
  - Improve accessibility
  - Clarify & expand upon existing policy
  - Provide standardized templates
D-SNAP is the Supplemental Nutrition Assistance Program with temporary eligibility standards to serve disaster survivors.

Through D-SNAP, FNS & our State partners are able to quickly offer short-term food assistance to families suffering in the wake of a disaster.

Eligible households receive one month of benefits issued via an EBT card, which can be used to purchase food at most grocery stores.
Planning: Disaster Plans

- Good planning is crucial to successful D-SNAP operations.
- Plans must be updated annually and submitted to FNS Regional Offices.
  - Plan revision is especially important this year as the new Guidance requirements are incorporated.
- All plans must include roles and responsibilities, disaster preparations, and D-SNAP implementation procedures.
Planning: Disaster Plans

1. Roles & Responsibilities

Describe approach to D-SNAP planning and implementation, including cross-agency coordination and lines of authority. Use the Contacts & Responsibilities worksheets to outline roles and responsibilities by agency/organization as well as primary and secondary contacts for each.

2. Readiness Plan

Staffing & Resources

Identify staffing and related resources available for D-SNAP operations. Consider how they will be mobilized to the affected area, impact on existing SNAP caseload and local offices, funding for staff travel and overtime pay, and contingencies (e.g., central office is in the affected area).

County Plans

If state is county-administered, include plans/agreements for sharing information, resources, and staff among the counties throughout the state.

Application System Development

Describe the systems to be used for D-SNAP client application and management. Explain any potential workarounds or adaptations to your regular SNAP system, while accounting for running D-SNAP and SNAP concurrently.

Issuance System Development

Describe D-SNAP benefit issuance systems that will deliver benefits within the three-day (or 7 days, if questionable) time limit. Refer to the EBT Planning section of the Toolkit.

EBT Card Stock

Evaluate and quantify your available EBT card stock. Describe what type of cards will be used in D-SNAP. Include procurement timeline of additional cards, if needed. Consider any special procedures or resources that might be needed to meet ongoing D-SNAP and SNAP issuance timeframes.

Application Sites

Describe D-SNAP application and issuance site selection procedures. Consider options for site location and size as appropriate for differences in disaster size and scope. Include any agreements in place with potential sites. If planned D-SNAP site is also a local SNAP office, include plan for running D-SNAP and SNAP simultaneously.

Data

Identify county or regional demographic data that may affect your State’s response to a disaster. Identify resources for disaster impact data, such as preliminary data assessments, flood maps, or electrical outage data.

3. Implementation Plan

Public Information and Outreach

Create a public information strategy to ensure that accurate, clear information reaches disaster affected populations quickly. Outline roles, expectations, and responsibilities of any regular SNAP outreach partners included in the State Outreach Plan that will also assist with D-SNAP. Include a plan for community volunteers to participate in outreach.

Retailer Communication

Describe procedures to notify retailers of D-SNAP implementation and special D-SNAP waivers such as the allowance of hot food purchases.

Procedures to Reduce Applicant Hardship

Outline steps your State will take to reduce hardship for D-SNAP clients and existing caseload. Specifically include provisions for security, human needs, and language services.

Certification Process

Describe the specifics of the certification process including potential application sites, staffing, separation of eligibility and issuance, and how application sites will manage large crowds. If online applications are to be used by workers or clients, describe that process and backup systems in place if technical issues are encountered.

Client Materials

Include all D-SNAP application forms and notices (English and Spanish).

Issuance Process

Create a detailed plan for how D-SNAP benefits will be made available within 72 hours of application (or 7 days from the date of application, in questionable cases) without compromising service to ongoing SNAP caseload. Indicate how your State will monitor EBT card stock. Describe EBT card issuance security procedures.

Security and Fraud Prevention Plan

Create a detailed fraud prevention plan that includes special procedures for handling applications submitted by State employees, questionable applications, and a screening process to check all households for duplicate participation.

Disaster Reporting and Post-Disaster Review Report

Describe procedures to ensure daily reporting to USDA and the completion of a Post Disaster Review Report.
Planning: Disaster Plans

- **ROLES & RESPONSIBILITIES**
  - Agencies & Responsibilities
  - Points of Contact
  - Community Partners & Roles

- **READINESS PLAN**
  - Staffing & Resources
    - County Plans
  - Application System Development
  - Issuance System Development
  - EBT Card Stock
  - Application Sites
  - Data
Planning: Disaster Plans

IMPLEMENTATION PLAN
- Public Information and Outreach
- Retailer Communication
- Procedures to Reduce Applicant Hardship
- Certification Process
- Client Materials
- Issuance Process
- Security and Fraud Prevention Plan
- Disaster Reporting and Post-Disaster Review Report
Planning: EBT

Each State needs to:

- Implement a disaster EBT system that can deliver D-SNAP benefits during an emergency, while interacting with the State’s eligibility system and the EBT contractor’s system.

- Maintain a disaster Issuance Plan and share it with FNS.

- Include Disaster EBT Systems in their Request for Proposals.
Planning: EBT

Why include Disaster EBT Planning in a Request for Proposals?

- States will know upfront what the costs of the EBT disaster response system will be.
- The requirements for the disaster response system will be in place when the EBT contract is signed.
- States can take advantage of competitive pricing.
- Permits flexibility to negotiate disaster design features after the contract is awarded.
Planning: EBT

Issuance of EBT Cards and PINs

➢ States need to ensure they have adequate EBT cardstock available.

➢ States need to determine how PIN assignment will occur.

➢ Decisions regarding EBT card production are critical in terms of developing the solution for disaster responses.
Requests: Is D-SNAP Best?

- FNS approves D-SNAP operations in an affected area under the authority of the Robert T. Stafford Disaster Relief and Emergency Assistance Act when the area has received a Presidential disaster declaration of Individual Assistance.

- State agencies request FNS approval to operate a D-SNAP within the disaster area.

- FNS approves program operations for a limited period of time (typically 7 days).
Requests: D-SNAP Approval & Implementation Process

1. Disaster strikes
2. Disaster Declaration with Individual Assistance
3. State requests to operate D-SNAP
4. FNS approves D-SNAP
5. State begins D-SNAP Operations
# Requests: D-SNAP

<table>
<thead>
<tr>
<th>Type of request:</th>
<th>Initial, Extension, Expansion, or Modification</th>
</tr>
</thead>
<tbody>
<tr>
<td>State:</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Region:</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Regulatory Citations:</td>
<td>7CFR 273.1(a), 273.2(f), 273.7, 273.8(e), 273.9(a), 273.10(d), and 273.10(f)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disaster Information:</th>
<th>Identify type of disaster. Date the disaster struck or date of mandatory evacuation order. Counties or other areas included in the Presidential disaster declaration for individual assistance. Explain which counties or areas are included under this request and why.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Disaster Impact:</th>
<th>Include number of households/businesses impacted. Use joint FEMA, state and local Preliminary Damage Assessments (PDAs); power outage information; and/or flood/mandatory evacuation maps. Are commercial channels of food distribution up and running?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Benefit Period:</th>
<th>List the start and end dates for the 30-day benefit period beginning date disaster struck/date of mandatory evacuation order.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Application Period:</th>
<th>List the start and end date for the application period (typically 7 days). Describe locations, dates and hours of operation for application sites (note if sites are opened on weekends/holidays).</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Eligibility Criteria:</th>
<th>Will eligibility extended to households who lived or who lived/worked in the disaster area? Is food loss alone a qualifying factor? Is the State using the DSEED?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Ongoing Households:</th>
<th>Will the State issue supplements? If so, automatic or by affidavit? If automatic, who is eligible? If by affidavit what is the process for requesting?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Anticipated Issuance:</th>
<th>Include estimated number of new D-SNAP applicants. Estimated number of ongoing clients that will request/receive supplements. If automatic supplements, include total estimated value of benefit issuance. How was estimate derived?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>EBT:</th>
<th>Describe issuance procedures: number of disaster EBT cards on hand? plans for requesting, receiving, and distributing additional cards as needed. State whether the cards on hand have been tested and are viable. Include name of card vendor.</th>
</tr>
</thead>
</table>

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<tr>
<th>Duplicate Participation:</th>
<th>Describe how/when checks will be conducted.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Program Integrity:</th>
<th>Describe fraud prevention strategies and security measures in place.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Logistics:</th>
<th>Describe application sites, plans for publicity, and security/crowd control.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Staffing:</th>
<th>Describe plans for utilizing staff from other areas, as appropriate. Indicate number of staff/supervisors available and how they will be distributed among application sites.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Employee Applications:</th>
<th>Describe procedure for handling applications from State agency employees.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Attachments:</th>
<th>Required supporting documentation including: draft press releases, D-SNAP application, PDAs, FEMA declaration, map of disaster area. Any other optional supporting information (such as client notices).</th>
</tr>
</thead>
</table>
Requests: D-SNAP

Required Components:

- Disaster Information
- Disaster Impact
- Benefit Period
- Application Period
- Eligibility Criteria
- Ongoing Households
- Anticipated Issuance

- EBT
- Duplicate Participation
- Program Integrity
- Logistics
- Staffing
- Employee Applications
- Attachments
Requests: EBT & Retailer Waivers

- The National Office SNAP, Benefit Redemption Division approves 7 EBT/Retailer related disaster waivers.
- Two of these waivers require a Presidential declaration for individual assistance.
- States need to work with their FNS Regional Office SNAP staff when preparing the waivers.
- The FNS Regional Office SNAP staff will forward the waiver request to BRD for review.
Requests: EBT & Retailer Waivers

The following 3 waivers are the most commonly requested:

- **Hot Foods** – requires a Presidential declaration for individual assistance. Waives the mandate in the Food and Nutrition Act of 2008 that hot foods cannot be purchased with SNAP benefits. Can be granted on a statewide or county by county basis.
Requests: EBT & Retailer Waivers

- **Mass Replacement** – allows a State agency to replace a portion/percentage of currently certified households’ monthly SNAP allotment without the requirement that the household request a replacement, individually, and go to a local office to sign an affidavit of loss.

The replacement amount is not fixed and generally depends on the time of month the disaster took place, the State’s issuance schedule, and the type of disaster.
Requests: EBT & Retailer Waivers

- **Timely Reporting** – Allows a State agency to extend the amount of time households have to report the loss of food purchased with SNAP benefits, beyond the 10 days required in Regulations.

Household misfortunes such as mass power outages and floods would qualify under this waiver.

State agencies need to provide estimates for the number of SNAP households that may request replacement benefits and the total expected dollar amount of those replacements at the time of the waiver request.
Requests: EBT & Retailer Waivers

Other Waivers

- **Expungement of Disaster Benefits** – Requires a Presidential declaration for individual assistance. Allows disaster benefits to be expunged from a household’s account after a period of less than one year, usually after each benefit has reached the age of 90 days.

- **Card Not Present During Key-Entered Transactions** – Relaxes the requirement that an EBT card be present during a key-entered SNAP transaction.
Requests: EBT & Retailer Waivers

➢ **Early Issuance** – Allows a State agency to issue monthly benefits early, on a county or state basis.

➢ **Stand-in Process** – Allows FNS to accept liability, up to a certain floor limit, per transaction, per retailer, per day, per client. If the client has insufficient funds to cover their transaction, FNS will reimburse the store up to the designated dollar amount once the store obtains authorization. This is an extremely rare waiver and will only be approved in cases of extreme devastation when power and telephones are non-operational for a significant amount of time.
Requests: EBT & Retailer Waivers

EBT & Retailer Waiver Templates and sample State RFP’s can be found on the PartnerWeb at:

https://www.partnerweb.usda.gov
Operations: Policy Changes

- Disaster Standard Expense Deduction
  - $100 threshold
- 7-day delayed issuance for questionable cases
- Procedures for allowing supplement requests by phone and online
- Client notices provided in writing
- Requesting non-required verification
## D-SNAP DAILY REPORT

**Note:** If additional counties are added, the formulas in Location & Program Totals will need to be adjusted.

<table>
<thead>
<tr>
<th>Program TOTAL:</th>
<th>Date</th>
<th>New Apps Taken</th>
<th>New Approved</th>
<th>Avg Benefit per New HH</th>
<th>Total Benefits</th>
<th>Supplements Approved</th>
<th>Avg Benefit per Ongoing HH</th>
<th>Total New + Ongoing Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
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<td>0</td>
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<td>0</td>
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<td>0</td>
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</tbody>
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<table>
<thead>
<tr>
<th>DISASTER LOCATION:</th>
<th>Date</th>
<th>New Apps Taken</th>
<th>New Approved</th>
<th>Avg Benefit per New HH</th>
<th>Total Benefits</th>
<th>Supplements Approved</th>
<th>Avg Benefit per Ongoing HH</th>
<th>Total New + Ongoing Benefits</th>
</tr>
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<tbody>
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<table>
<thead>
<tr>
<th>Location TOTAL:</th>
<th>0</th>
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</table>
**REPORT OF DISASTER SUPPLEMENTAL NUTRITION ASSISTANCE BENEFIT ISSUANCE**

According to the Populism Reduction Act of 1993, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0037. The time required to complete this information collection is estimated to average 4 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.

Served completed report to: Regional Administrator, Food and Nutrition Service, USDA, no later than 45 days after completion of the emergency relief operations.

**Disaster Supplemental Nutrition Assistance Benefit Issuance** Complete items 1 through 13. If the authorization to issue supplemental nutrition assistance benefits under disaster procedures is extended, a separate report should be submitted for each authorization period.

### 1. Applicant Information
- **State Name**
- **Agency Name**
- **Agency Code**

### 2. Disaster Date

### 3. Brief Description of Area Affected

### 4. Presidential Declaration
- **Yes**
- **No**

### 5. Type of Disaster
- **Flood**
- **Hurricane**
- **Tornado**
- **Winter Storm**
- **Wildfire**
- **Other**

### 6. Application Period
- **From**
- **Through**

### 7. Benefit Period of Issuance
- **From**
- **Through**

### 8. Allotment Issued to Each Household
- **New Households**
- **1 Month Maximum Allotment**
- **Other**

### 9. Ongoing Incomes
- **Supplemental Up to the Max. Allotment**
- **Other**

### 10. Give Total Breakdown of Disaster Supplemental Nutrition Assistance Benefit Issuance for Each Project Area Affected

<table>
<thead>
<tr>
<th>Name of Project Area</th>
<th>Number of Households Issued Benefits</th>
<th>Number of Persons Issued Benefits</th>
<th>Total Value of Benefits Issued</th>
<th>Number of Households Issued Supplements</th>
<th>Number of Persons Issued Supplements</th>
<th>Total Value of Supplements Issued</th>
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### 11. Totals

|                         |                                     |                                  |                             |                                        |                                     |                                  |

### 12. Remarks (if more space is needed, attach sheet)

### 13. Signature

### 14. Title

### 15. Date

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**Form FN05-292B (04/11)** Previous Editions Obsolete

Electronic Version Designed in Adobe 8.1 Version SBU
Reporting: Post-Disaster Review

1. INTRODUCTION

Disaster Information

Background on disaster including date the disaster struck and affected area.

Program Background & Details

Include application period information, rules, and options selected by the site of FEMA or food bank only. Also include staffing information and number approved applications (amount of benefits issued).

2. COMPREHENSIVE REVIEW

Certification System(s)

Describe certification process and systems used.

Application Period

Describe insurance procedures.

Public Information & Outreach

Describe public and outreach efforts, including any involvement with partner organizations.

Issuance

Outline issuance procedures.

Program Accessibility

Describe procedures for ensuring program accessibility, particularly for elderly/disabled applicants.

3. INDIVIDUAL REVIEWS & PROBLEM ANALYSIS

Summary

Total number of each type of review conducted, procedures used in review process, any issues encountered in conducting reviews.

- Public Case Reviews

At least 5% of all SNAP cases (both approved & denied). Minimum of 15, maximum of 300. Include completed chart below for all public cases and attach Excel file with charts for each project are (generally County).

<table>
<thead>
<tr>
<th>Problem</th>
<th># of Cases</th>
<th># of Claims Established</th>
<th>Value of Claims Entitled to Recovery</th>
<th>Value of Claims Entitled to Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Problem w/ Case</td>
<td></td>
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<tr>
<td>Missing Documentation in Case File</td>
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</tr>
<tr>
<td>Household Error</td>
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<tr>
<td>State agency Error</td>
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</tr>
<tr>
<td>Intentional Program Violations</td>
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<td></td>
</tr>
<tr>
<td>Incomplete Case Review</td>
<td></td>
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<tr>
<td>Incomplete Case Review</td>
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</tbody>
</table>

Client Follow-up Procedure

- State Agency Employee Case Reviews

Required 100% of all approved state agency employee cases. If states has opted to review additional applications (such as design state agency employees, D-SNAP site volunteers, etc.) these should be listed on a separate chart. Include completed chart below for all state agency employee cases and attach Excel file with charts for each project are (generally County).

<table>
<thead>
<tr>
<th>Problem</th>
<th># of Cases</th>
<th># of Claims Established</th>
<th>Value of Claims Entitled to Recovery</th>
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<tr>
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<td>State agency Error</td>
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<tr>
<td>Incomplete Case Review</td>
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</table>

| TOTAL                           |            |                         |                                     |                                      |

4. PROPOSED CHANGES

Lessons Learned & Best Practices

Describe any of the State's best practices in planning and implementing the program. Also include any lessons encountered and lessons learned from those issues.
Reporting: Post-Disaster Review

- **INTRODUCTION**
  - Disaster Information
  - Program Background & Details

- **COMPREHENSIVE REVIEW**
  - Certification System(s)
  - Application Period
  - Public Information & Outreach
  - Issuance
  - Program Accessibility
  - Security & Fraud Control
INDIVIDUAL REVIEWS & PROBLEM ANALYSIS

- Summary
- Public Case Reviews
- State Agency Employee Case Reviews

PROPOSED CHANGES

- Lessons Learned & Best Practices
- Changes to Disaster Plan
- Changes to Internal Policies
- Recommended Changes to the Guidance
## Reporting: Post-Disaster Review

<table>
<thead>
<tr>
<th>Project Area: (insert County or other area name)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Problem</td>
</tr>
<tr>
<td>No Problem with Case</td>
</tr>
<tr>
<td>Missing Documentation in Case File</td>
</tr>
<tr>
<td>Household Error</td>
</tr>
<tr>
<td>State agency Error</td>
</tr>
<tr>
<td>Intentional Program Violation</td>
</tr>
<tr>
<td>Incomplete Case Reviews:</td>
</tr>
<tr>
<td>Inability to locate client</td>
</tr>
<tr>
<td>Client Failure to Cooperate</td>
</tr>
<tr>
<td><strong>TOTAL:</strong></td>
</tr>
</tbody>
</table>
Questions?

For more information visit:
http://www.fns.usda.gov/disasters