



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Transitional Assistance
600 Washington Street • Boston, MA 02111

DEVAL L. PATRICK
Governor


TIMOTHY P. MURRAY
Lieutenant Governor

JUDYANN BIGBY, M.D.
Secretary

JULIA E. KEHOE
Commissioner

Operations Memo 2011-20A
June 8, 2011

To: Department of Transitional Assistance Staff

From:  Stephanie Brown, Assistant Commissioner for Policy, Program and External Relations

Re: Supplemental Nutrition Assistance Program (SNAP): Replacement of Food Lost Due to Tornadoes that Occurred on June 1, 2011

Overview

A storm, including several tornadoes, passed through Massachusetts on June 1, 2011, bringing significant damage to a number of communities. Among these communities, several were without power for a significant period of time and FNS has deemed them eligible to receive mass replacement of SNAP benefits. FNS has approved the following communities as eligible for mass replacement of SNAP benefits: Brimfield, Brookfield, Monson and Wilbraham. To that end, MIS has automatically issued benefits to current SNAP households residing in those communities.

Purpose of Memo

This Operations Memo:

- describes the waiver received from USDA;
 - explains the SNAP benefit mass replacement process; and
 - reminds case managers of procedures for household misfortune situations.
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**Replacement of
Lost Benefits
Based on Waiver**

USDA has granted the Department a waiver that allows the mass replacement of a portion of benefits to certain households in the following communities affected by the storm: Brimfield, Brookfield, Monson and Wilbraham. The waiver allows the benefits to be replaced without the client being required to request and externally verify a loss of food.

On June 6, 2011, the Department issued replacement benefits to all SNAP households in Brimfield, Brookfield, Monson and Wilbraham in the following amounts:

- 20 percent of the household's May issuance for cases with grantee SSNs ending in 0 – 4; and
- 40 percent of the household's May issuance for cases with grantee SSNs ending in 5 - 9.

These allotments will allow for replacement of any perishables purchased with May benefits and lost due to the power outages. A minimum replacement of \$16 was issued.

MIS has:

- identified all SNAP households eligible for replacement SNAP benefits by city or town;
- calculated the amount of benefits to be restored;
- issued replacement benefits;
- sent a notice (Attachment A) the week of June 6, 2011, to the affected households; and
- created an annotation in the BEACON Narrative tab stating "FNS waiver, replacement benefits issued due to 6/1/11 tornado."

Note: The BEACON Narrative tab entry will appear in BEACON on 6/7/2011.

SNAP households at zero benefits were excluded.

**Household
Misfortune
Replacements**

SNAP policy at 106 CMR 364.900 allows for replacement of food lost during a household misfortune, such as a fire, flood, loss of electricity or other disaster. Replacement is limited to the value of the food lost, not to exceed the total monthly SNAP benefit amount. For example, loss due to a fire most likely means that the entire monthly allotment must be replaced, while other situations, such as a loss of electricity, may result in a portion of the benefit (e.g., perishable food) replaced.

**Household
Misfortune
Replacements
(continued)**

Case managers must:

- have the client complete and sign the *Statement of Loss/Request for Replacement Food Due to a Household Disaster or Misfortune* (SNAP-9B) form;
Note: For clients who live in one of the 19 communities identified in Attachment C, signing the SNAP-9B satisfies the requirement to verify the household disaster/misfortune.
- obtain appropriate verification of the loss, e.g., by collateral contact with the fire department, utility company, or Red Cross if the client resides outside of the 19 communities identified in Attachment C;
- deny the request using an NFL-9 form if the client is not eligible for household misfortune replacement benefits;
- issue the replacement benefits in the Related Benefits page using the reason *FSP Household Disaster* if the client is eligible for household misfortune replacement benefits (if the case is *closed, pending or denied*, use *FSP Administrative Benefit*); and
Note: The replacement amount cannot exceed the monthly benefit amount the household received.
- annotate the BEACON Narrative tab with the action taken.

Important: Clients who live in Brimfield, Brookfield, Monson or Wilbraham have already received the 20 or 40 percent replacement benefits through BEACON as mentioned above. Therefore, if they have requested and been approved for household misfortune benefits, they will only be eligible for up to a full month of SNAP benefit *minus* the 20 or 40 percent the household has already received.

**People
Displaced to
Other Areas**

Any client who requests replacement SNAP benefits due to household misfortune resulting from the tornado must be serviced for this particular benefit by the TAO in which these benefits are requested.

For example, if someone who lost their home in Monson due to the storm is now living with family in Southeastern Massachusetts, the applicant does not need to return to Western Massachusetts to apply for replacement benefits but may apply at the nearest TAO.

Obsolete Memo

This Operations Memo obsoletes Operations Memo 2011-20.

Questions

If you have any questions, please have your Hotline designee call the Policy Hotline.

Attachment A

{BEACON_USER STREET_ADDRESS_CAN#}
{BEACON_USER CITY, STATE, ZIP}

Important Notice - Read Carefully
Este Mensaje Es Importante - Lea Cuidadosamente

Massachusetts Department of Transitional Assistance

{RECIPIENT_NAME}
{RECIPIENT_ADDRESS}
{RECIPIENT_CITY/TOWN, STATE, ZIP}

Agency ID: {CLIENT_ID}
{BEACON_USER_OFFICE_NAME}

{MM/DD/YYYY}

Dear {GRANTEE}:

Because you live in an area that was severely affected by the tornado on June 1, 2011, and may have lost food in a power outage, the Department has issued you emergency replacement Supplementary Nutrition Assistance Program (SNAP) food benefits in the amount of {AMOUNT_RECEIVED} on {ISSUE_DATE}. This is provided pursuant to a United States Department of Agriculture waiver. This benefit is available to you now.

Because you have already received these emergency SNAP food benefits, you do not need to contact your case manager about them.

If you disagree with the amount of your SNAP benefits, you have the right to a fair hearing. The other side of this notice contains important information about your hearing rights. To request a hearing, complete the other side of this notice.

If you have any questions about this notice, you may call Recipient Services toll free at 1-800-445-6604.

Attachment A

{BEACON_USER STREET_ADDRESS_CAN#} Important Notice - Read Carefully
{BEACON_USER CITY, STATE, ZIP} Este Mensaje Es Importante - Lea Cuidadosamente

Massachusetts Department of Transitional Assistance

{RECIPIENT_NAME} Agency ID: {CLIENT_ID}
{RECIPIENT_ADDRESS} {BEACON_USER_OFFICE_NAME}
{RECIPIENT_CITY/TOWN, STATE, ZIP} {MM/DD/YYYY}

Estimado (a) {GRANTEE}:

Debido a que usted vive en un área que fue gravemente afectada por la tormenta del 1 de junio del 2011, y pudo haber perdido alimentos en un apagón, el Departamento ha emitido un reemplazo de emergencia de sus beneficios para alimentos del Programa de asistencia de nutrición suplementaria (SNAP) en la cantidad de {AMOUNT_RECEIVED} el {ISSUE_DATE}. Esto se proporciona de acuerdo con una dispensa del Departamento de agricultura de los Estados Unidos. Este beneficio está a su disposición ahora.

Debido a que usted ya ha recibido estos beneficios de alimentos SNAP de emergencia, usted no necesita comunicarse con su administrador de caso al respecto.

Si no está de acuerdo con la cantidad de sus beneficios de SNAP, usted tiene derecho a una audiencia imparcial. El reverso de este aviso contiene información importante sobre sus derechos para la audiencia. Para solicitar una audiencia, complete el reverso de este aviso.

Si usted tiene alguna pregunta sobre este aviso, puede llamar al Servicio al receptor de forma gratuita al 1-800-445-6604.



**Statement of Loss/Request for Replacement Food
Due to a Household Disaster or Misfortune**

I, _____, of _____
(Name) (Street)
_____, Massachusetts
(City/ZIP)

EBT Card # _____ certify that I am in need of replacement food because
food I had purchased with my Supplemental Nutrition Assistance Program (SNAP) benefits, in the
amount of \$_____, was destroyed in a household disaster/misfortune.

The household disaster/misfortune that occurred on _____ was: (Explain)
(Date)

I certify under penalty of perjury that the information I have given in this statement is correct and true.
I understand that if I intentionally made a false or misleading statement about the destruction of my food
purchased with SNAP benefits, or misrepresent, conceal, or withhold any facts, I may be prosecuted for
an Intentional Program Violation. Prosecution for an Intentional Program Violation may result in my
ineligibility to participate in SNAP for a period of 12 months for the first violation, 24 months for the
second violation, and permanently for the third violation.

Head of Household Signature Date

Witness Signature Date

The occurrence of the household disaster/misfortune outlined above was confirmed by:

- Home Visit on _____
Date
- Collateral Contact with _____ on _____
Name Date
- Documentation from _____ on _____
Community Agency Date

Case Manager Date

Agawam
Auburn
Brimfield
Brookfield
Chicopee
Douglas
Mulberry
Monson
Northampton
Oxford
Palmer
Southbridge
Springfield
Sturbridge
Uxbridge
West Springfield
Westfield
Westover Air Force Base
Wilbraham