

10A NCAC 71U .0213 SIMPLIFIED REPORTING

- (a) The simplified reporting category shall apply to all FNS units except the following:
- (1) A Simplified Nutrition Assistance Program (SNAP) unit; or
 - (2) A Transitional FNS Unit.
- (b) Certification periods are determined based upon the following household situations:
- (1) FNS units that contain only specified individuals who are without earned income are certified for a period of 12 months. A specified individual is an individual 60 years of age or older, or one of the following:
 - (A) A person who receives supplemental security income benefits under Title XVI of the Social Security Act or disability or blindness payments under Titles I, II, X, XIV, or XVI of the Social Security Act;
 - (B) A person who receives federally or State administered supplemental benefits under Section 1616(a) of the Social Security Act provided that the eligibility to receive the benefits is based upon the disability or blindness criteria used under Title XVI of the Social Security Act;
 - (C) Receives disability benefits from a governmental agency based on permanent Social Security disability requirements.
 - (D) Is a Veteran who receives 100 percent Veterans Administration (VA) disability payments (service or non-service connected) or is rated as 100 percent disabled but receives less than 100 percent disability payment;
 - (E) Is a Veteran considered by the VA to be in need of regular aid and attendance or permanently housebound under Title 38 of the U. S. Code;
 - (F) Is a disabled surviving spouse or disabled surviving child of a veteran and in need of regular aid and attendance or permanently housebound or considered by the VA to be entitled to compensation for a service-connected death or pension benefits for a nonservice-connected death under Title 38 of the U. S. Code;
 - (G) Receiving Railroad Retirement and determined to be eligible for Medicare;
 - (H) Receiving Interim Assistance Payments (DSS General Assistance to applicants for SSI that is repaid by SSA upon approval of the SSI application);
 - (I) Receiving Medicaid based on disability; and
 - (J) Benefits under the Federal Employees Compensation Act (FECA) based on Social Security disability requirements.
 - (2) FNS units that contain an Able-Bodied Adult Without Dependents (ABAWD) are certified for a period of six months. These FNS units will be issued a Notice of Adverse Action DSS-8553 during the second month of the certification period notifying the FNS unit that the local agency will terminate benefits after the third month unless the ABAWD satisfies the work requirements or meets an exception as set forth in 7 C.F.R. 274.24. The certification may be for a period of 6 months if the county is currently under an ABAWD waiver.
 - (3) All other units are certified for a period up to six months.
- (c) FNS units subject to Simplified Reporting are required to report to the public agency any of the following changes that occur during the certification period:
- (1) FNS units that include an ABAWD shall report when the ABAWD stops working an average of 80 hours per month;
 - (2) FNS units whose income is at or below the 130 percent maximum allowable gross income limit are required to report an increase in unit income that causes it to exceed the 130 percent maximum allowable gross income limit for its unit size at certification. Ineligible or disqualified persons are not considered in determining the FNS unit size; and
 - (3) If any member of the FNS unit receives substantial lottery and gambling winnings as defined in 7 CFR 212.17 and 7 CFR 273.8(b), the receipt of lottery and gambling winnings shall result in loss of eligibility for the entire FNS unit. The unit remains ineligible until they reapply for benefits and meet all non-categorical eligibility financial resource and income eligibility requirements.
- (d) FNS units are required to report changes by the 10th of the month following the month in which the change occurs. FNS units completing an application or recertification that experience changes prior to disposition of the application or recertification are required to report such changes by the 10th of the month following the month in which the Notice of Eligibility is received.
- (e) Changes are considered reported at the earliest of the following times:

- (1) The date the Change Report is received;
 - (2) The date the change is reported by the FNS unit by telephone, email or fax. If received during non-business hours the date reported will be the next business day;
 - (3) The date the FNS unit made an in-person office visit to report the change;
 - (4) The date the change is reported to Work First;
 - (5) The date the changed information is entered into NC FAST; or
 - (6) The date the change is reported by a third party.
- (f) A public agency shall evaluate, verify, and act upon a change within 10 calendar days, except for the following changes:
- (1) Changes in medical expenses of units eligible for the medical deduction when the source of the change in information is from a third party and requires household contact for verification;
 - (2) A decrease in the unit's gross monthly income of less than fifty dollars (\$50.00); or
 - (3) A change in income that is not expected to continue for longer than one month beyond the month in which the change is reported.
- (g) If a change is reported and the public agency fails to act on the change within the 10 calendar days, the public agency shall determine if an over issuance has occurred. If it is determined that an over issuance occurred, the public agency shall establish an Administrative Error (AE) claim.
- (h) If a reported change terminates eligibility or decreases a unit's benefit amount, a Notice of Adverse Action shall be issued to the FNS unit within 10 calendar days.
- (i) If a reported change does not affect eligibility or benefit amount, an Effect of Change Notice shall be issued to the FNS unit.
- (j) If a reported change will increase benefit amount, the public agency shall verify the reported change.
- (k) If an FNS unit fails to report a required change, the public agency shall establish a claim against the FNS unit and issue a Notice of Adverse Action if the change would result in a reduction or termination of benefits.

*History Note: Authority G.S. 108A-25; 108A-51; 143B-153; P.L. 107-171;
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