

Benefit Issuance & Direct Certification

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MISSISSIPPI
DEPARTMENT OF
EDUCATION

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Benefit Issuance

Statutory authority for the Child Nutrition Programs includes the Richard B. Russell National School Lunch Act (NSLA) and the Child Nutrition Act of 1966 (CNA). The statutory citations are, respectively, 42 United States Code 1751 et seq. and 42 United States Code 1771 et seq.

Regulatory authority is found, as follows, in the Code of Federal Regulations (CFR):

- 7 CFR Part 210, National School Lunch Program (NSLP)
- 7 CFR Part 215, Special Milk Program for Children (SMP)
- 7 CFR Part 220, School Breakfast Program (SBP)
- 7 CFR Part 225, Summer Food Service Program (SFSP)
- 7 CFR Part 226, Child and Adult Care Food Program (CACFP)
- 7 CFR Part 245, Determining Eligibility for Free and Reduced-Price Meals and Free Milk in Schools

There are 3 ways to issue free and reduced-price benefits:

1. Household indicates Categorical Eligibility based on Assistance Programs (ie..SNAP, TANF, FDPIR). **Substantiated by a case number on approved household application, DC list matching OR DC List Extension Statement**
2. Household indicates household size and income within IEG's. **Substantiated by approved household application**
3. Household indicates Categorical Eligibility based on Other Source (i.e. Foster, Homeless/McKinney Vento, Runaway, etc.). **Substantiated by a household application indicating the Other Source**

- Carry over for 30 operating days.
- Household sharing of benefits.
- LEA's may share benefit issuance data to extend benefits at the new LEA for transfer students without incurring liability of accuracy of determination.

Household Application

- Households cannot be required to submit an application.
- Requesting citizenship is not allowed!!!
- May have child's name prefilled ONLY! All other info must be entered by head of household.
- Not required for child listed on the Direct Certification (DC) list.
- Various media available: On-Line, Scannable and Paper. If not using prototype ensure required content is met.
- **Remember, even if you process applications online, you MUST provide a paper application. This is an accessibility issue.**

1. Child's name and household members listed
2. Indication of Other Source Eligibility type benefit with a case number

OR

Income amount, frequency & source for each member

3. **Adult signature!**
4. Last 4 digits of SSN or indication of not having an SSN

Processing Applications

Household Application for Free and Reduced Price School Meals

APPLY ONLINE: _____
 RETURN TO (School/District Name): _____
 ADDRESS: _____

Complete one application per household. Please use a pen (not a pencil).

STEP 1 List ALL children, infants, and students up to and including grade 12. Attach another sheet of paper if you need space for more names.

List ALL children in the household. Do not forget to list infants, children attending other schools, children not in school, and children not applying for benefits. This includes children not related to you in your household.

Child's First Name	MI	Child's Last Name	Grade	Foster Child	Migrant	Runaway	Homeless
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Check all that apply

If you checked any of these boxes, please refer to the Application Instruction's Step 1, Part C & Part D.

STEP 2 Do any household members (including you) participate in: SNAP, TANF, or FDIPIR?

NO → Go to STEP 3. YES → Write case number here and proceed to STEP 4. CASE NUMBER (NOT EBT NUMBER): _____

Write only one case number in this space.

STEP 3 List ALL household members and income for each member (before taxes and deductions)

A. All Adult Household Members (Anyone who is living with you and shares income and expenses, even if not related, including you.)
 List all Adult Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they receive income, report total gross income (before taxes and deductions) for each source in whole dollars (no cents) only. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Members (First and Last)	Earnings from Work	How often received?					Public Assistance, Child Support, Alimony	How often received?				Pensions, Retirement, Social Security, SSI, VA Benefits, All Other	How often received?		
		Weekly	Every 2 Weeks	2x/Month	Monthly	Annual		Weekly	Every 2 Weeks	2x/Month	Monthly		Weekly	Every 2 Weeks	2x/Month
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Household Members (Children and Adults) Last Four Numbers of Social Security Number of Primary Wage Earner or other Adult Household Member (if Applicable) Check if no Social Security Number

B. Child Income
 Sometimes children in the household earn or receive income. Include the TOTAL income (before taxes and deductions) received by ALL children listed in STEP 1 here. Child Income \$ Weekly Every 2 Weeks 2x/Month Monthly Annual

STEP 4 Contact information and adult signature. **RETURN COMPLETED FORM TO YOUR CHILD'S SCHOOL:** Insert school address here _____

I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal funds, and that school officials may verify (confirm) the information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable State and Federal laws.

Print Name of Adult Signing the Form _____ Signature of Adult _____ Today's Date _____

Mailing Address (if available) _____ City _____ State _____ Zip _____ Phone (optional) _____ Email (optional) _____

Return completed form to your child's school.

- Determination made, household notified, status implemented within 10 days of receipt of application.
 - Best practice: date stamp "received" when you receive a paper application
- Notify household immediately when benefit is reduced or denied, particularly for children who do not have approved applications on file from the previous year.
- LEA must not delay approval for failure by head of household to provide information that is not required.

- The letter must have the full USDA Nondiscrimination Statement.
 - Eligibility Guidance-2017 Page 13
- The parents/ guardians should be aware of how to file a civil rights complaint

- LEAs must ensure that all children in a household that indicate an Assistance Program case number on an application, for any household member, are extended free meal benefits.
- This extension of categorical eligibility also applies to the Direct Certification (DC) listed recipients.
- LEA's must document the extension of benefit to other household children.

- Application indicates zero income ?
- Multiple incomes at different frequencies ?
- A child is known to be eligible for benefits, however household refuses to apply ?
- Visiting students ?

7 CFR 245.6 (d); pg. 42 of Eligibility Manual

- Local School official may complete an app for a child known to be eligible for meal benefits, if the family has not applied.
- Intended for LIMITED USE IN INDIVIDUAL SITUATIONS – must NOT be used to make eligibility determinations for categories or groups of children
- These apps are excluded from Verification; but total number must be reported on 3-3 of Verification Report (“Non Applicant but approved by Local Officials”)

**WHAT QUESTIONS DO YOU HAVE REGARDING
BENEFIT ISSUANCE
USING AN APPLICATION?**

Direct Certification

DC Matching

DC matching is the process under which LEAs certify children who are members of households receiving assistance under the Assistance Programs (SNAP, TANF or FDPIR) as eligible for free school meals, without further application, based on information provided by the State and/or local agency administering those programs.

- LEAs must conduct direct certification matching with SNAP at least three times during the school year. More frequent direct certification efforts are permissible and encouraged. These efforts must be made at a minimum:
- At or around the beginning of the school year (i.e., July 1)
- Three months after the beginning of the school year
- Six months after the beginning of the school year
- More frequent matching is recommended . . . Highly recommended!

Documentation to establish children's eligibility for free meals under DC for Assistance Programs, and to substantiate claims for reimbursement, must include one or more of the following:

- Names of children or any household member currently certified to receive benefits from Assistance Programs.
- A statement certifying that each child is a member of a household where someone receives Assistance Program benefits.
- At least one form of identifying information matching each child with a child attending a particular school. Some examples of identifiers are included on the next slide.

- Childs Birth Date
- Addresses
- Parents' Names
- Child's SSN #
- Gender
- MSIS #
- Last 4 Of Parents' SSN #

- The LEA must notify the household about eligibility established through direct certification. The notification must include the following information:
- The child is eligible for free meal benefits
- No further application is necessary
- If applicable, an explanation of extended eligibility and how to notify the LEA of any additional children in the household
- How to notify the LEA if free meal benefits for directly certified children are not wanted

IDENTIFIED STUDENT, SNAP

- Mississippi Department of Human Services (MDHS) places a file weekly in the ITS mainframe directory which lists all students that receive snap benefits
- MSIS identifies/matches the student information

DIRECT CERTIFICATION DATA

- Districts are provided a current monthly file (SNAP) in MSIS that has been matched to “all” current Student MSIS number in each District

DC Reports

And How to Run Them

There are four (4) Direct Certification reports

1. **Full Match SNAP** - Provides information for children ages 5-17, all key identifiers match
2. **No Match SNAP** – If students are identified on this report, the **MSIS Primary user should correct the Date of Birth and/or Social Security Number in MSIS so that the child will be added** to the Full Match file on the next DHS report

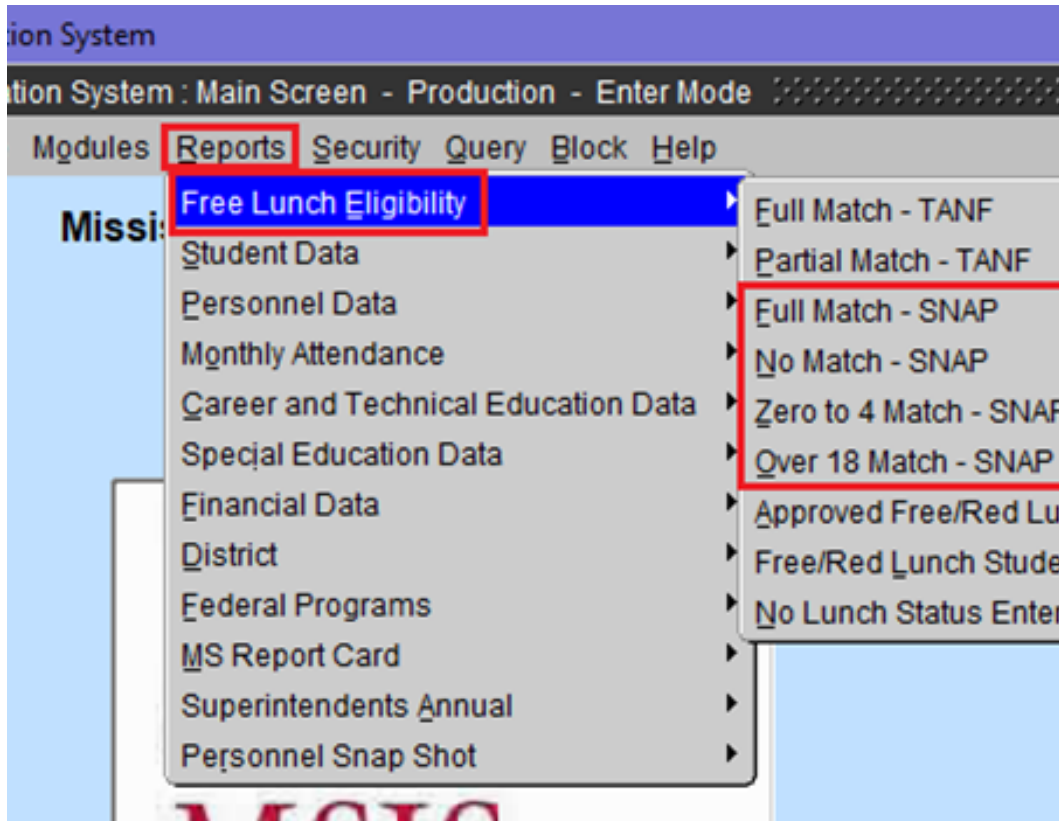
3. **Zero to 4 Match SNAP** – Students under the age of 5 that have an MSIS ID and have been matched to your district
4. **Over 18 Match Snap** – students over the age of 17 that have a MSIS ID and have been matched to your district

- If you do not have access to MSIS, you will have to work with your School District and the MDE Department of Core Student Applications to gain access.
- 601-359-3487
- <https://mdek12.org/OTSS/MSIS>

NOTE: Only school districts accredited with MDE can request access to MSIS

Selecting a Report

- From the MSIS main screen
- Select REPORTS
- Select FREE LUNCH ELIGIBILITY
- Select the SNAP report that best suits your need



Running the Report

Mississippi Student Information System
Report Selection Criteria Screen

Eligible Free Lunch Full Match SNAP Report

District Name: COTO PUBLIC SCHOOL DIST

School Name:

All Districts All Schools

IS ID	Last Name	First Name	School

Reporting Period: School Year:

Start Month: End Month:

Start Year: End Year:

School Type: Regular Vocational SPED

District Record Type: P S N

Display User Name
 Display Employee SSN
 Display Employee Salary

Immigrant Indicator
 CEIS Indicator
 504 Indicator

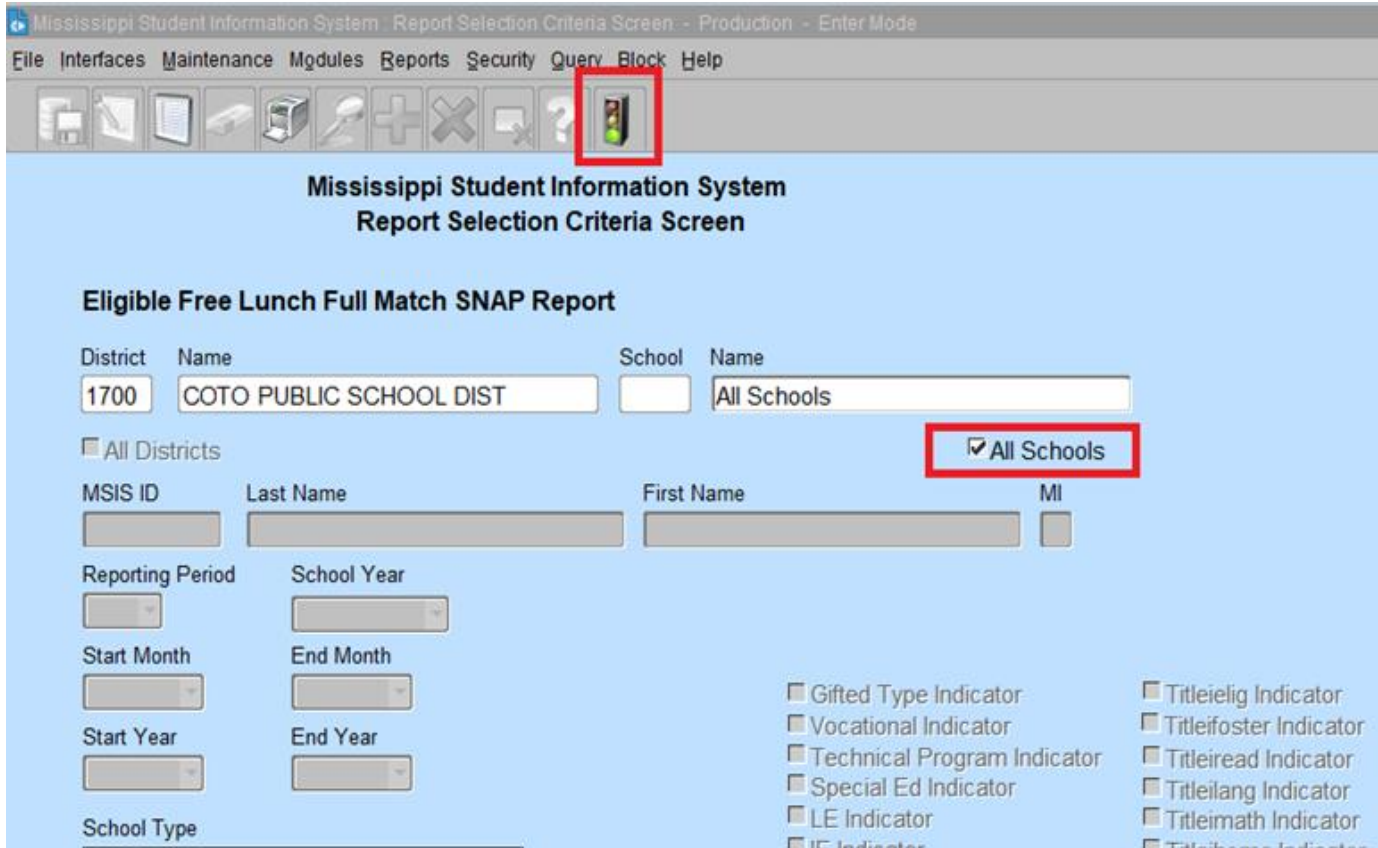
Title Indicator
 Title Social Indicator
 Title Science Indicator
 Title Support Indicator
 Pathway Indicator

Valid values for School

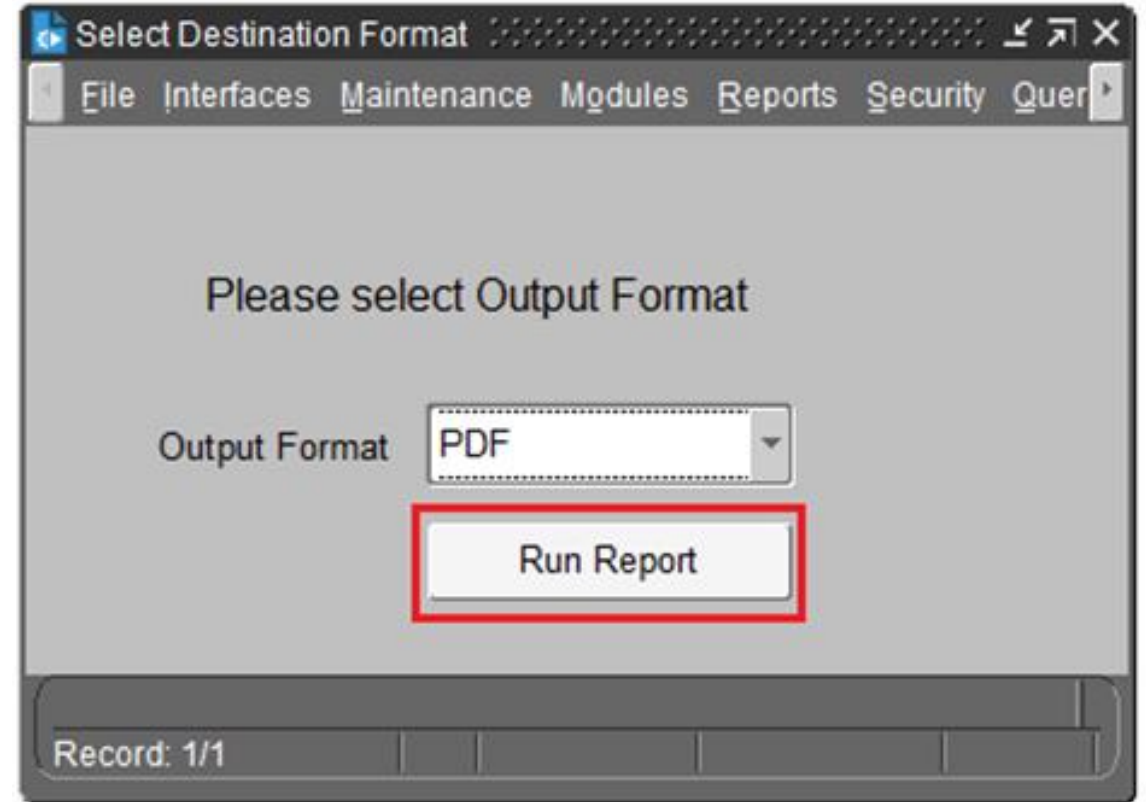
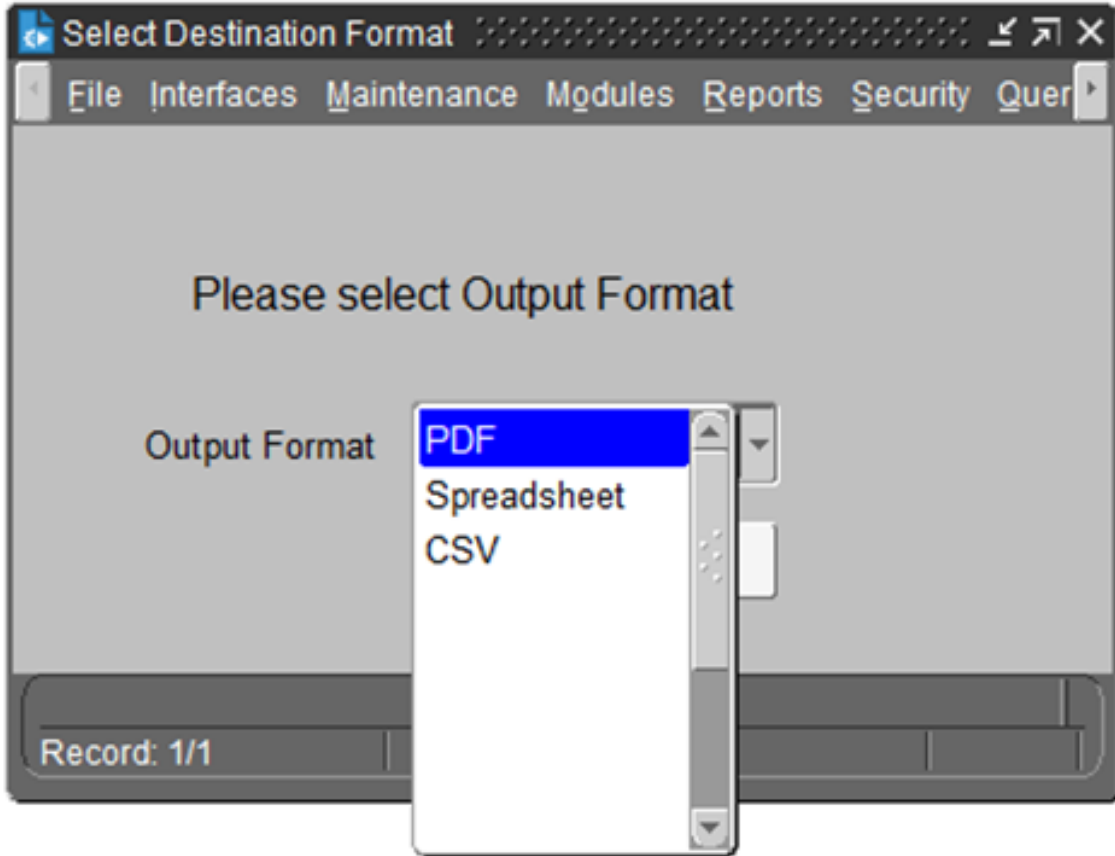
Find %

Name	School
CAHILL ELEMENTARY SCHOOL	010
CAHILL HIGH SCHOOL	072
CAHILL MIDDLE SCHOOL	074
HICKS ELEMENTARY SCHOOL	008
HICKS HIGH SCHOOL	052
HICKS MIDDLE SCHOOL	054

- School District automatically populates with your associated district, a list of schools pops up
- Highlight a school and click OK to run the report for a specific school
- Click CANCEL to run the report for all schools in the district



- ALL SCHOOLS appears in the School Name field and the checkbox automatically populates when Cancel is selected on the Schools popup
- Click the traffic light icon to run the report



Click on "Run Report"

- **PDF** – The report automatically opens in your internet browser, save the file if needed for future reference
- **Spreadsheet** – The report is automatically downloaded to your computer as an .xml file and requires the extension to be changed to a spreadsheet file (e.g., .xls for an excel spreadsheet)
- **Comma Separated Value (CSV)** – the report is automatically downloaded as a .CSV or .TXT file and requires importing into a spreadsheet before using

What
Questions do
you have?





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