



STATE OF NEW MEXICO
HUMAN SERVICES DEPARTMENT
HUMAN SERVICES REGISTER

I. DEPARTMENT

HUMAN SERVICES DEPARTMENT

II. SUBJECT

NEW MEXICO MODIFIED COMBINED APPLICATION PROJECT (NMCAP)
SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)

III. PROGRAMS AFFECTED

NMCAP
SNAP

IV. ACTION

PROPOSED RULE

V. BACKGROUND

The Department is proposing changing the NMCAP benefit amount based on the most current cost neutrality calculation as established by the Food and Nutrition Services, United States Department of Agriculture. This amount is subject to review and adjustment in January of each year.

Additionally, language is being modified to clarify requirements for household composition and a provision added for overpayment and recoupment of benefits.

VI. PROPOSED RULE

This is an amendment section 9, 11, 12 & 13 of 8.139.503 NMAC, effective April 1, 2012.

- 8.139.503.9 BASIS FOR DEFINING GROUP (HOUSEHOLD COMPOSITION)**
- A. **Household:** An applicant can opt to receive NMCAP benefits if the applicant:
- (1) receives federal SSI benefits; and
 - (2) is not institutionalized; and
 - (3) does not receive benefits through the Food Distribution Program on Indian Reservations (FDIPR); and
 - ~~(2)~~ (4) is twenty-two years of age or older; and
 - ~~(3)~~ (5) is eligible for separate household status; or

~~(4)~~ (6) lives with a spouse as defined in Subsection B (31) of 8.139.100.7 NMAC, who also receives SSI benefits; or

~~(5)~~ (7) is living with others but buys and cooks food separately from others; and

~~(6)~~ (8) at the time application or recertification for NMCAP the household has no earned income.

B. Verification of information: All information received by the department from the SSA data interface will be deemed as true and accurate for purposes of initial verification. [8.139.503.9 NMAC - N, 06/01/2009; A 04/01/2012]

8.139.503.10 APPLICATION PROCESS

A. Opt in/out: An applicant can choose to receive benefits through the regular food stamp program if:

- (1) combined shelter and utility expenses, as defined at 8.139.520.11 NMAC, are greater than \$315.00; or
- (2) out-of-pocket medical expenses, as defined at 8.139.520.11 NMAC, are at least \$35.00 a month.

B. Application requirements: The application at minimum will contain:

- (1) the applicants name, and address;
- (2) receipt of income and amount;
- (3) amount of applicable deductions, such as shelter and medical; and
- (4) must be signed by the applicant or authorized representative.

C. Application filing: Potential NMCAP recipients will receive applications from the department based on interface data supplied by SSA. NMCAP applicants also have the right to apply at:

- (1) a social security (SSA) office; or
- (2) a local ISD county office.

D. Processing standards: Applications are processed by the department and notice of disposition is sent to the applicant.

(1) **Standard processing:** An application shall be processed as soon as possible and the applicant afforded an opportunity to participate no later than 30 days from the date of application.

(2) **Expedited processing:** In the month of application NMCAP applicants shall be considered as standard food stamp program applicants and may qualify for expedited service.

E. Authorized representatives: The head of the household or the spouse or any other responsible member of the household may designate an individual who is a non-household member to act on its behalf in applying, obtaining or using food stamp benefits.

(1) The caseworker shall obtain a copy of the household's written authorization for the authorized representative and maintain it in the household's case record. No limit shall be placed on the number of households an authorized representative may represent.

(2) Even if the household member is able to make an application and obtain benefits, the household should be encouraged to name an authorized representative to use the food stamp benefits in case illness or other circumstances prevent household members from using the benefits themselves.

(3) The authorized representative's identity shall be verified and a copy of the document maintained in the household's case file.

[8.139.503.10 NMAC - N, 06/01/2009; A 04/01/2012]

8.139.503.11 CASE MANAGEMENT

A. Interviews: NMCAP applicants are not required to see an ISD caseworker or be otherwise subjected to an interview, although additional information or verification may be requested.

B. Certification periods: Eligible households shall be assigned to a 36-month certification period, and with no interim contact.

C. Reporting requirements: All information received by the department from the SSA data interface will be deemed as true and accurate for reported changes.

D. Actions on reported changes: NMCAP recipients are subject only to the reporting standards of SSA and all data sent to the department monthly. Within ten days of receipt the department shall act on the following changes:

- (1) death of a household member;
- (2) loss of SSI eligibility;

- (3) changes in state residency; [~~or~~]
- (4) a member of the household's institutional status has changed[-]; or
- (5) change in shelter cost.

E. Recertification: NMCAP recipients shall not be subject to an interview to review eligibility at the end of the 36-month certification period. Recipients shall receive notice of expiration and recertification prior to closure. Continued eligibility will be evaluated based on the submission of a completed application and information received from SSA. Participants that do not reapply by the end of certification period will be subject to case closure.
[8.139.503.11 NMAC - N, 06/01/2009; A 04/01/2012]

8.139.503.12 BENEFIT DELIVERY

A. Effective date: Benefits for the initial month of certification shall be prorated from the date of application according to the standard food stamp program tables at 8.139.500 NMAC.

B. Benefit issuance: NMCAP are issued through a direct deposit into a household's electronic benefit transfer (EBT) food stamp account. EBT cards are issued and EBT accounts maintained as defined at 8.139.610 NMAC. A participating household has a definite issuance date so that food stamp benefits are received on or about the same time each month. The issuance date is based on the last two digits of the social security number of the individual to whom the food stamps are issued.

C. Benefit calculation: Benefits are issued based on ~~[allowable and out-of-pocket medical deductions.]~~ the household's total monthly shelter costs as defined at section F of 8.139.520.11 NMAC. Benefit amounts shall be subject to review and adjustment in coordination with the regular food stamp program and cost neutrality and may be adjusted each January. Monthly NMCAP benefit amounts are based on the following for:

- (1) monthly shelter costs equal to or less than \$315.00, the maximum benefit amount is [~~\$70.00~~] \$50.00; and
- (2) monthly shelter costs greater than \$315.00, the maximum benefit amount is [~~\$93.00~~] \$85.00.

~~**D. Benefit correction:** Benefit corrections shall be determined and adjusted as defined at 8.139.640 NMAC.~~
[8.139.503.12 NMAC - N, 06/01/2009; A 04/01/2012]

8.139.503.13 OVERPAYMENT AND RECOUPMENT

A. Overpayment: A household that has received NMCAP benefits and has been determined ineligible or does not qualify for some or all of the NMCAP benefit shall have a claim established against the household for the NMCAP benefit amount in accordance with 8.139.640 NMAC.

B. Recoupment:

- (1) The household shall be required to repay any amount of the NMCAP benefit due to an established claim or overpayment of the NMCAP benefit.
- (2) The household shall remain subject to claim establishment and recoupment for the NMCAP benefit in accordance with 8.139.640 NMAC.

[8.139.503.12 NMAC – N, 04/01/2012]

HISTORY OF 8.139.503 NMAC: [RESERVED]

This register and proposed regulations are available on the Human Services Department website at <http://www.hsd.state.nm.us/isd/ISDRegisters.html>. If you do not have Internet access, a copy of the proposed regulations may be requested by contacting Income Support Division Policy and Program Development Bureau at 827-7219.

VII. EFFECTIVE DATE

April 1, 2012

VIII. PUBLIC HEARING

A public hearing to receive testimony on this regulation will be held on March 15, 2012 at 10:00 am.

The hearing will be held at the Income Support Division Conference Room at Pollon Plaza, 2009 S. Pacheco St., Santa Fe, NM 87505. The Conference room is located in room 120 on the lower level. Individuals wishing to testify may contact the Income

Support Division, P.O. Box 2348, Santa Fe, NM 87504-2348, or by calling toll free 1-800-432-6217.

If you are a person with a disability and you require this information in an alternative format, or you require a special accommodation to participate in any HSD public hearing, program, or service, please contact the New Mexico Human Services Department toll free at 1-800-432-6217, in Santa Fe at 827-9454, or through the New Mexico Relay system, toll free at 1-800-659-8331. The Department requests at least a 10-day advance notice to provide requested alternative formats and special accommodations.

IX. ADDRESS

Interested persons may address written or recorded comments to:

Sidonie Squier, Secretary
Human Services Department
P.O. Box 2348 Pollon Plaza
Santa Fe, NM 87504-2348

Interested persons may also address comments via electronic mail to:
Vida.Tapia-Sanchez@state.nm.us

X. PUBLICATION

Publication of these emergency regulations approved on 1/25/12
by:

Sidonie Squier
SIDONIE SQUIER, SECRETARY
HUMAN SERVICES DEPARTMENT