NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES BISMARCK, NORTH DAKOTA DATE 6/9/2014

IM 5208

TO: County Social Service Directors

Economic Assistance Policy Regional Representatives Economic Assistance Policy Quality Control Reviewers

FROM: Carol Cartledge, Director, Economic Assistance Policy

SUBJECT: Group Home and Alcohol/Drug Treatment Center

Reporting

PROGRAMS: Supplemental Nutrition Assistance Program

EFFECTIVE: July 1, 2014

RETENTION: Until Manualized

SECTIONS

AFFECTED: Manual Section 430-05-30-10 and 430-05-30-15

Effective July 1, 2014, when submitting the completed SFN 788 – Group Living Arrangement and Drug/Alcohol Treatment Center Report which is due quarterly, please attach a copy of the monthly report from each facility in which SNAP recipients reside or had resided during the quarter.

Policy at 430-05-30-10 and 430-05-30-15 is revised to include:

When the monthly list is received, the county is responsible to:

- a. Verify that the client's case status is appropriate as reported by the center.
- b. Make any appropriate changes to the case based on the information reported by the center.
- c. Validate that the correct amount of benefits have been credited to the client's EBT account.
- d. <u>Complete the SFN 788</u> Group Living Arrangement and Drug/Alcohol Treatment Center Report. is completed quarterly and a copy provided to the State SNAP Office. This report lists

- the facilities in which a client currently resides or had resided at some time during the quarter.
- e. <u>Make a copy of the monthly listing of SNAP clients received from each facility to attach to the SFN 788 which is due quarterly to the State SNAP Office.</u>

If you have questions, please contact your Regional Representative.