

# Child and Adult Care Food Program Eligibility Determination

September 2016



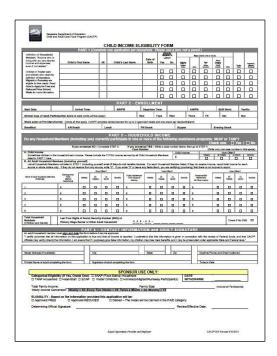
## **CACFP Eligibility Determination**

Importance of accurate eligibility determination

 Inaccurate/incomplete determination may result in the State Agency recouping reimbursemer

## **CACFP Eligibility Determination**

- Regulations, CACFP Handbooks, and Operational Memos
- Child Income Eligibility Form
- Notification of Households



## CACFP Eligibility Determination Regulations and Handbooks

- Regulations
  - 7 CFR 226.23 Free and reduced price meals
- CACFP Handbooks
  - USDA's 2014 Independent Child Care Centers, A Child and Adult Care Food Program Handbook
  - USDA's 2012 Family Day Care Homes Monitor Handbook, A Child and Adult Care Food Program Handbook
  - USDA's 2015 At Risk Afterschool Meals, A Child and Adult Care Food Program Handbook
  - USDA's 2014 Adult Day Care, A Child and Adult Care Food Program Handbook
- Eligibility Manual for School Meals (2016)

## **Eligibility Determination and Durations**

- USDA Memo CACFP 07-2014, "Guidance on Income Eligibility Determinations and Durations REISSUED":
  - "Income eligibility forms should be considered current and valid until the last day of the month in which the form was dated one year earlier."
  - "Sponsors now have flexibility concerning the effective date of certification for Program benefits. The date to be used to make this determination may be either the date the parent or guardian signed the income eligibility form or the date on which the sponsor or independent center official signs the form to certify eligibility of the participant. This flexibility applies only to eligibility determinations made through the application process of complete applications containing all required information at the time of submission...Sponsors must decide which date they will rely on as the effective date and apply this date to all income eligibility forms submitted on behalf of all participants in all sponsored centers and homes."

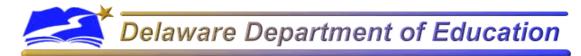
## **Income Eligibility Forms**

- Individual eligibility information must be collected for all enrolled participants (children and/or adult participants) once each year.
- Overt Identification Prohibition
  - Information submitted on income eligibility forms and the eligibility status of participants is confidential.
  - 7 CFR 226.23(c)(5)

### **Income Eligibility Forms**

- •Household income must be compared to the USDA Income Eligibility Guidelines to determine eligibility.
  - Income Eligibility Guidelines are updated yearly and are in effect from July 1 through June 30
  - Household income
  - Total number of household members.
- •CACFP Operational Memo #17 Income Eligibility Guidelines (income scales)

## 2016-2017 Income Eligibility Guidelines



Effective Date: July 1, 2016 - June 30, 2017

These are the income scales used by Child Nutrition Programs to determine eligibility for free and reduced price meals.

·		FREE MEAL	S – 130% Twice				REDU	JCED MEALS - Twice	- 185%	
Household Size	Yearly	Monthly	per Month	Every two weeks	Weekly	Yearly	Monthly	per Month	Every two weeks	Weekly
1	\$15,444	\$1,287	\$644	\$594	\$297	\$21,978	\$1,832	\$916	\$846	\$423
2	\$20,826	\$1,736	\$868	\$801	\$401	\$29,637	\$2,470	\$1,235	\$1,140	\$570
3	\$26,208	\$2,184	\$1,092	\$1,008	\$504	\$37,296	\$3,108	\$1,554	\$1,435	\$718
4	\$31,590	\$2,633	\$1,317	\$1,215	\$608	\$44,955	\$3,747	\$1,874	\$1,730	\$865
5	\$36,972	\$3,081	\$1,541	\$1,422	\$711	\$52,614	\$4,385	\$2,193	\$2,024	\$1,012
6	\$42,354	\$3,530	\$1,765	\$1,629	\$815	\$60,273	\$5,023	\$2,512	\$2,319	\$1,160
7	\$47,749	\$3,980	\$1,990	\$1,837	\$919	\$67,951	\$5,663	\$2,832	\$2,614	\$1,307
8	\$53,157	\$4,430	\$2,215	\$2,045	\$1,023	\$75,647	\$6,304	\$3,152	\$2,910	\$1,455
For each additional household member, add:	\$5,408	\$451	\$226	\$208	\$104	\$7,696	\$642	\$321	\$296	\$148

## Child Care Automatic Eligibility

Instances in which child care participants are automatically eligible for free meals, regardless of income:

- –A child who is a member of a household where someone in the household receives SNAP (Supplemental Nutrition Assistance Program) or TANF (Temporary Assistance for Needy Families). One case number certifies all children in the household to receive free meals.
- -A foster child Definition of a FOSTER child: a child whose care and placement is the responsibility of the State or who is placed by a court with a caretaker household.
- –Any child enrolled in Head Start.
- -A child who is homeless.
- -Residential children in participating emergency shelter's food service.

## Child Care Mixed Applications

Mixed Application: Presence of a foster child and other participating children in the Institution:

- •The Sponsor would certify the foster child for free meals, and then make an eligibility determination for the remainder of the household based on the household's income. "Households must report any personal income received by the foster child on their household application....foster payments received by the family from the placing agency are not considered income and do not need to be reported." (USDA's May 2014 Independent Child Care Centers A Child and Adult Care Food Program Handbook.)
- •Please note that the presence of a foster child in a household does not automatically certify non-foster children living in the household as free.

## **Child Income Eligibility Form**

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Equal Opportunity Provider and Employer

CACFF IEF Revised 8/10/201

## **Child Income Eligibility Form**

#### Part 1 -

Definition of Household				10000 0000	Hispa	nioity anio or	12	Race	check one or n	nore)			
Member: "Anyone who is living with you and shares income and expenses, even if not related."	Child's First Name	MI	Child's Last Name	Date of Birth	Yes	No	American Indian or Alexken Hadre	Asian	Black Or African American	Native Herwillen or Other Pacific Islander	Wes	Foster Child	Homeless, Migrant
Children in Foster care		$\Box$					nasve.		Amendan				Runsway
and children who meet the definition of Homeless,													
Migrant or Runaway are eligible for free meals. Read						10,12							
How to Apply for Free and Reduced Price School													
Meals for more information.													

We are required to ask for race and ethnicity information; however, responding to this section does not affect child's eligibility.

If Foster Child box or Homeless, Migrant, Runaway box is checked, child is automatically qualified for free meals.

#### Part 2 -

		PART 2 -	ENROLLI	MENT					
Start Date:	Arrival Time:	AM/PM	Departu	e Time:		AM/PM		Shift Work:	Yes/No
Normal days of week F	Participant(s) is/are in care (circle all that app	ply):	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Meals eaten at Provide	ers/Center: (Circle all that apply. CACFP prov	vides reimbursement for up to 2	2 approved mea	ls and one s	nack per o	lay/participant):			
Breakfast	AM Snack	Lunch	PM Snack			Supper	E	Evening Snack	

Start date, arrival and departure times, normal days and normal meals *must* be completed at the time of enrollment and/or renewal.

#### Part 3 -

Do any Household M	lambara (inal	udina v	aul aus			- HOUSEH				accieta	oneo programa	CNAD	or TAN	Eo	
Do any nousenou w	embers (mci	uumg y	ou) cum	enuy	Jarucip	ate ili one or i	HOIE OI	uie ioii	owing	assista		heck or			□ No
	If vo	u answere	d NO – Co	mplete S	TEP 3.	If you answer	ed YES - \	Write a cas	e numbe	r below, th	en go to STEP 4	HOOK OF		103 /	
	V-00	COLONE SCHOOL SCHOOL	ON 10 TUTO ( - SATE )			Case Num					(W	rite only on	e case nur	nber in thi	is space)
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B. All Adult Household Men List all Household Member source in whole dollars onl	rs not listed in STE	P 1 (includ	ing yourse any source	lf) even i e, write "	f they do r 0". If you e	not receive income enter "0" or leave ar	e. For eac ny fields bla	h Househo ank, you ar	old Memb re certifyi	er listed, if	they do receive inci	ome, report	total incor	me for eac	
			How (	Often?		_		How O	Often?		_		How	Often?	
Name of Adult Household Members (First/Last)	Earnings from Work (Before Deductions)	Weekly	Bi- Weekly	2x Month	Monthly	Public Assistance/ Child Support/ Alimony	Weekly	Bi- Weekly	2x Month	Monthly	Pensions/SSI/ Retirement/ All Other Income	Weekly	B⊦- Weekly	2x Month	Monthly
1	\$					\$					\$				
2	\$					s					S				
3	\$					\$					\$				
4	\$					\$					\$				
5	\$					s					\$				
Total Household Members (Children and Adults)	Last Four Digit					* * * .	* *						Check	k if No SSI	N 🗆

• If anyone in the household receives SNAP or TANF, the applicable box should be checked and the case number should be provided where noted. Applicant can skip to Part 4.

#### If no one in the household receives SNAP or TANF benefits:

- A. All income received by children must be reported here. If there is no child income, the adult should write "0". Frequency of income received must be reported. Any income field left blank is a positive indication that there is no income to report.
- B. All adult household members must be listed, and income must be listed for all adults. If an adult has no income, the adult filling out the form should write "0". Frequency of income received must be reported. Any income field left blank is a positive indication that there is no income to report.
- The total number of household members should be provided.
- The last four digits of Social Security Number (SSN) of primary wage earner or other adult household member must be listed in order for the form to be processed. If no SSN, then the box must be checked if no SSN.
- \*Please note: All income reported should be gross income, which is before taxes and deductions.

#### Part 4 -

PA	RT 4 -	CONTACT INFORMA	TI	ON and AD	UL	T SIGNATU	RE	
An adult household member must sign and date this for	m before it o	can be approved.						
"I certify (promise) that all information on this applicatio	n is true an	d that all income is reported. I und	derst	and that this inforn	natior	n is given in conne	ction	with the receipt of Federal funds, and that CACFP
officials may verify (check) the information. I am aware the	hat if I purpo	sely give false information, my child	iren	may lose meal ben	nefits,	and I may be prose	ecute	d under applicable State and Federal laws."
Street Address (Zerozistus)	0:1			01-1-	-	7:		Destination Disease of Feedly (and the only
Street Address (if available)	City			State		Zip		Daytime Phone and Email (optional)
Printed Name of adult completing the form	Signatu	re of adult completing the form						Today's Date

- ALL income eligibility forms must have the signature of an adult household member.
- ALL income eligibility forms must be dated by the adult completing the form.

#### Sponsor Use Only -

		SPONSOR USE ONLY:		
Categorical Eligibility	(If Yes, Check One): ☐ SNAP	(Food Stamp) Household	DATE	·
☐ TANF Household ☐	Head-Start □ ECAP □ Foste	r Child(ren)   Homeless/Migrant/Runaway Participant(s)	WITHDRAWN:	· ·
Total Family Income:		Family Size:		(Include all Participants)
Yearly Income Convers	sion: Weekly x 52; Every Two V	Veeks x 26; Twice a Month x 24; Monthly x 12		
•	on the information provided the	•		
•		•	gory.	

#### <u>Determining Official/Sponsor's Responsibility</u>:

- •If a child is determined to be categorically eligible, check appropriate categorical eligibility box, check Approved FREE, and sign and date form.
- •If a form is to be processed using Income, convert each income to yearly income, total all incomes, and list under Total Family Income section. Total number of family members in household and list under Family Size. Refer to Income Eligibility Guidelines and determine eligibility based off of total income and family size. Once determined, check appropriate box.
- Sign and date the form

## Notification of Eligibility Determination For Income Eligibility Forms

#### <u>Institutions that are Pricing Programs:</u>

All households that submit an IEF <u>must</u> be notified of their eligibility Status (7 CFR 226.23):

- ✓ Households with children approved for free or reduced meal benefits must be notified in writing.
- ✓ When the information furnished by the family is not complete or application does not meet the eligibility criteria for free or reduced-price meals, the participants are determined eligible for "paid" meals. Households with children denied benefits must be given written notification. The written notification must include:
  - The reason for the denial;
  - Notification of the right to appeal;
  - Instructions on how to appeal; and
  - A statement that the family may re-apply for benefits at any time during the school year.

## Disclosure of Children's Eligibility

**USDA MEMO:** SP 31 – 2010

#### **Statutory and Regulatory Requirements**

Section 9(b)(6) of the Richard B. Russell National School Lunch Act (NSLA) (42 U.S.C. 1758(b)(6)) delineates the restrictions on the disclosure and use of information obtained from an application for free and reduced price meals, as well as the criminal penalties for improper release of information. Note that while the law discusses applications, the disclosure requirements also apply to information obtained through the direct certification process. A copy of this section of the law is attached for reference. We recommend that State agencies and LEAs and, as applicable, CACFP institutions, sponsoring organizations and family day care home providers and SFSP sponsoring organizations, cite the law when responding to requests for release of information.

> Refer to Eligibility Manual for School Meals for guidance.

# Area Eligibility- CACFP At Risk Afterschool Meals

- School data must be used to establish area eligibility for CACFP At Risk Afterschool Meal sites
- School data must indicate that the meal site is located in the attendance area of a school where at least 50 percent of children are eligible for free or reduced price school meals
- -Area eligibility determinations must be re-determined every five years

## **Area Eligibility – Family Day Care Homes**

- School data or Census data may be used to determine eligibility of a Family Day Care Home (Tier 1)
- -School data must indicate that the meal site is located in the attendance area of a school where at least 50 percent of children are eligible for free or reduced price school meals
- -Census data must be most recent census data available
- Area eligibility determinations must be re-determined every five years

## **Questions, Comments, Concerns?**

