

SNAP/ET Reimbursement Simplified

SkillWorksSM
PARTNERS FOR A PRODUCTIVE WORKFORCE



Commonwealth Workforce Coalition
A Network of Massachusetts Community-Based Workforce Development Practitioners

March 31, 2010
2:30 PM – 4:30 PM

Supplemental Nutrition Assistance Program / Employment and Training (SNAP/ET) - Community Organizations

CREATING A POSSIBLE REVENUE STREAM OPTION FOR WORKFORCE DEVELOPMENT COMMUNITY ORGANIZATIONS

Overview

What is SNAP/ET?

- Supplemental Nutrition Assistance Program / Employment and Training (SNAP/ET)
- Provides employment and training services to Non-TAFDC food stamp recipients
- Funding for the SNAP/ET program has been provided through a combination of federal grants and state funds, including an uncapped 50% federal financial participation (FFP)
- The overall purpose of the program is to assist Non-TAFDC food stamp recipients in achieving economic self-sufficiency through the receipt of high quality, comprehensive employment and training services.

Employment and Training Service Components

- Job Search
- Job Search Training
- Education
- Skills Training
- Case Management
- Placement Services
- Other Employment Opportunities

Federal Financial Participation (FFP)

- FFP is a term used by the federal government to denote when the federal government will “participate” with a state in the costs related to administering a program
- UMMS will have a **Provider Specific Agreement (PSA)** with Service Entities
- UMMS/DTA will claim 50% reimbursement for “eligible non-federal and non-state” matching funds
- UMMS will distribute funds to Service Entities (95%), less a 5% administrative fee per legislation

Eligible Costs

- Must directly relate to an approved SNAP/ET component and be necessary and reasonable
- Service components must not be available through another government program and/or at no cost to the participant through a private source
- SNAP Plan must contain information about service component
- Services are provided to Non-TAFDC Food Stamp recipients
- Services are provided utilizing non-federal and non-state matching funds
- Funds must not be “earmarked” and/or have spending restrictions or requirements

Reporting Requirements

- Name and Social Security Number
- Name of reimbursable component (i.e. Job Search, Education, Skills Training, etc)
- Hours per component and/or per participant
- Unit cost per component and/or per participant
- Total cost per participant on a monthly basis
- Certification of expenditures
- Maintain records and accounts of all costs (direct and indirect) associated with this initiative

How do I enroll?

- Anthony Owumi (617) 886-8107,
Anthony.Owumi@ummsmed.edu

SNAP-ET REIMBURSEMENT PROGRAM

Revenue Stream for Education & Job Training Activities

A FEW THINGS TO KEEP IN MIND

- Total Program Expenses Per Month
- Total Participants Per Month

REIMBURSEMENT CALCULATION...

	Month	Month	Month
Total Program Spending			
SNAP-ET Ineligible (per Anthony)			
Federal Dollars			
Household/Living			
Debt			
Lost Wages			
Emergency Funding			
Total Spending Ineligible for Reimbursement			
Number of Program Participants			
Per Participant Spending Eligible for Reimbursement			

STEP 1. TOTAL PROGRAM EXPENSES

Category	Oct 07	Nov 07	Dec 07
Salaries, Benefits, & Taxes	\$37,529	\$33,645	\$39,734
Direct Participant Payments	\$110,279	\$87,406	\$87,330
Occupancy	\$5,387	\$5,338	\$5,277
Other Expenses	\$8,706	\$9,580	\$12,357
Total Expenses	\$161,901	\$135,968	\$144,698

REIMBURSEMENT CALCULATION

	Oct 07	Nov 07	Dec 07
Total Program Spending	\$161,901	\$135,968	\$144,698
SNAP-ET Ineligible (Anthony comment)			
Federal Dollars (Pat Baker comment)			
Household/Living			
Debt			
Lost Wages			
Emergency Funding			
Total Spending Ineligible for Reimbursement			
Spending Eligible for SNAP-ET Funding			
Number of Program Participants			
Per Participant Spending Eligible for Reimbursement			

STEP 2. INELIGIBLE SPENDING

	Month	Month	Month
SNAP-ET Ineligible (per Anthony)			
Federal Dollar revenue	\$10,000	\$10,000	\$10,000
Lost Wages	\$921	\$221	\$0
Debt Payment	\$1,464	\$1,881	\$660
Household/Living	\$36,433	\$32,027	\$35,034
Emergency Funding	\$850	850	\$850
Total Ineligible Spending	\$49,668	\$44,980	\$46,544

REIMBURSEMENT CALCULATION

	Oct 07	Nov 07	Dec 07
Total Program Spending	\$161,901	\$135,968	\$144,698
SNAP-ET Ineligible (per Anthony)			
Federal Dollars	\$10,000	\$10,000	\$10,000
Household/Living	\$921	\$221	\$0
Debt	\$1,464	\$1,881	\$660
Lost Wages	\$36,433	\$32,027	\$35,034
Emergency Funding	\$850	850	\$850
Total ineligible for SNAP-ET reimbursement	\$49,668	\$44,980	\$46,544
Spending Eligible for SNAP-ET Funding			
Number of Program Participants			
Per Participant Eligible Spending for Reimbursement			

STEP 3. CALCULATE ELIGIBLE SPENDING

Total Spending

Less: Ineligible Spending

Equals: Spending Eligible for
Reimbursement

REIMBURSEMENT CALCULATION

	Month	Month	Month
Total Program Spending	\$161,901	\$135,968	\$144,698
SNAP-ET Ineligible (per Anthony)			
Federal Dollars	\$10,000	\$10,000	\$10,000
Household/Living	\$921	\$221	\$0
Debt	\$1,464	\$1,881	\$660
Lost Wages	\$36,433	\$32,027	\$35,034
Emergency Funding	\$850	850	\$850
Total Spending Ineligible for Reimbursement	\$49,668	\$44,980	\$46,544
Spending Eligible for SNAP-ET Funding	\$112,233	\$90,989	\$98,154
Number of Program Participants			
Per Participant Eligible Spending for Reimbursement			

STEP 4. TOTAL PROGRAM PARTICIPANTS

Entity Name	Last Name	First Name	SSN	Service Month
Jobs and Education Program	Doe	Jane	111-11-1111	Oct 07
Jobs and Education Program	Doe	Jill	222-22-2222	Oct 07
Jobs and Education Program	Jones	Mary	333-33-3333	Oct 07
Jobs and Education Program	Jones	Kathy	444-44-4444	Oct 07
Jobs and Education Program	Smith	Cindy	555-55-5555	Oct 07
Jobs and Education Program	Smith	Mandy	666-66-6666	Oct 07
Jobs and Education Program	Travis	Ann	777-77-7777	Oct 07
Jobs and Education Program	Travis	Nancy	888-88-8888	Oct 07
Jobs and Education Program	White	Margaret	999-99-9999	Oct 07
Jobs and Education Program	White	Nicole	000-00-0000	Oct 07
Jobs and Education Program	Xavier	Fiona	101-01-0101	Oct 07

REIMBURSEMENT CALCULATION

	Month	Month	Month
Total Program Spending	\$161,901	\$135,968	\$144,698
SNAP-ET Ineligible (per Anthony)			
Federal Dollars	\$10,000	\$10,000	\$10,000
Household/Living	\$921	\$221	\$0
Debt	\$1,464	\$1,881	\$660
Lost Wages	\$36,433	\$32,027	\$35,034
Emergency Funding	\$850	850	\$850
Total Spending Ineligible for Reimbursement	\$49,668	\$44,980	\$46,544
Spending Eligible for SNAP-ET Funding	\$112,233	\$90,989	\$98,154
Number of Program Participants	124	124	123
Per Participant Eligible Spending for Reimbursement			

STEP 5. CALCULATE REIMBURSEMENT RATE

$$\frac{\text{Monthly Eligible Spending}}{\# \text{ Program Participants that month}} = \text{Monthly Reimbursement per participant}$$

STEP 5. CALCULATE REIMBURSEMENT RATE

	Month	Month	Month
Total Program Spending	\$161,901	\$135,968	\$144,698
SNAP-ET Ineligible (per Anthony)			
Federal Dollars	\$10,000	\$10,000	\$10,000
Household/Living	\$921	\$221	\$0
Debt	\$1,464	\$1,881	\$660
Lost Wages	\$36,433	\$32,027	\$35,034
Emergency Funding	\$850	850	\$850
Total Spending Ineligible for Reimbursement	\$49,668	\$44,980	\$46,544
Spending Eligible for SNAP-ET Funding	\$112,233	\$90,989	\$98,154
Number of Program Participants	124	124	123
Per Participant Reimbursement	\$905	\$734	\$798
50% is the SNAP-ET funding request	\$453	\$367	\$399

STEP 6. PRODUCE THE REQUISITION

Total Program Participants

multiplied by

Reimbursement per participant

equals

SNAP-ET Funding Requested

THE REQUISITION (PARTIAL LISTING)

Entity Name	Last Name	First Name	SSN	Service Month	E & T Element	Rate	50%
Jobs and Education Program	Doe	Jane	111-11-1111	Oct 07	Education	\$905	\$453
Jobs and Education Program	Doe	Jill	222-22-2222	Oct 07	Education	\$905	\$453
Jobs and Education Program	Jones	Mary	333-33-3333	Oct 07	Education	\$905	\$453
Jobs and Education Program	Jones	Kathy	444-44-4444	Oct 07	Education	\$905	\$453
Jobs and Education Program	Smith	Cindy	555-55-5555	Oct 07	Education	\$905	\$453
Jobs and Education Program	Smith	Mandy	666-66-6666	Oct 07	Education	\$905	\$453
Jobs and Education Program	Travis	Ann	777-77-7777	Oct 07	Education	\$905	\$453
Jobs and Education Program	Travis	Nancy	888-88-8888	Oct 07	Education	\$905	\$453
Jobs and Education Program	White	Margaret	999-99-9999	Oct 07	Education	\$905	\$453
Jobs and Education Program	White	Nicole	000-00-0000	Oct 07	Education	\$905	\$453
Jobs and Education Program	Xavier	Fiona	101-01-0101	Oct 07	Education	\$905	\$453

THE CERTIFICATION LETTER

Certification Statement

I, Executive Director, certify under the pains and penalties of perjury the following:

1. I am the Executive Director of _____;
2. I have personally reviewed the enclosed quarterly cost report;
3. The services listed on the enclosed cost report are an accurate description of services provided between October 1, 2007 and December 31, 2007 by _____;
4. The services listed on the enclosed cost report are eligible for reimbursement under the current Food Stamp/Employment & Training Program Plan;
5. The costs totaling \$442,567 listed on the enclosed cost report are the actual costs incurred during between October 1, 2007 and December 31, 2007 by ____ for the provision of these services.
6. The individuals listed on the enclosed quarterly cost report were the actual recipients of the services listed on the cost report;
7. _____ has retained and will maintain records sufficient to verify the delivery and costs of the services listed on the quarterly cost report, as well as to identify and locate the individuals listed.

Signed and dated
Sent by regular mail.