

	Division/Section	Family Support
	Chapter No./Name	4 – Economic Independence (EI)
	Part No./Name	B – Eligibility Factors
	Section No./Name	B-1000-FITAP-SNAP Resources
	Document No./Name	B-1020-SNAP Whose Resources Are Considered
	Effective Date	October 1, 2026

I. STATEMENT OF POLICY

B-1021-SNAP PO – PERSONS LIQUID RESOURCES TO CONSIDER

Consider the liquid resources of the following persons:

- Household members
- Disqualified members
- Ineligible aliens
- Alien Sponsors

B-1022 – SNAP PO - BROAD-BASED CATEGORICAL ELIGIBILITY (BBCE)

If the household is determined to be BBCE as defined in [E-280-SNAP](#), the household's resources reported must *** be counted.

II. PROCEDURES

B-1021-SNAP – PERSONS LIQUID RESOURCES TO CONSIDER

The client's statement is accepted as verification *** if the household's cash on hand and liquid resources are \$3000 or less.

Count the resources of an alien's sponsor and the sponsor's spouse if living with the sponsor until the alien becomes a citizen or has worked 40 qualifying quarters of Social Security coverage. (Refer to [E-110-SNAP](#).) Beginning January 1, 1997, a quarter in which the alien received federal means-tested assistance is not counted as a qualifying quarter. The resources of the sponsor and sponsor's spouse must be reviewed at application and each redetermination.

B-1022 – SNAP PR - BROAD-BASED CATEGORICAL ELIGIBILITY (BBCE)

Resources for all members included in the Broad-Based Categorically Eligible households are counted for eligibility determination purposes. Resource questions *** must be cleared when processing applications, Simplified Reports, or redeterminations. Verification of resources for BBCE households *** must be requested.

LITE will determine if the household is BBCE based on criteria in E-282-SNAP-PO and will automatically make a case note indicating that the household is eligible for BBCE.

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Upon certification of a BBCE household, the TANF Non-Cash Services Fact Sheet (OFS 4BBCE) will automatically be sent to notify the household that they are authorized to receive non-cash TANF/MOU services.

III. FORMS AND INSTRUCTIONS

[OFS 4BBCE Form](#) / [Instructions](#) TANF Non-Cash Services Fact Sheet

IV. REFERENCES

[LAC 67: III.1987.E](#)